

NOVEMBER 5, 1980

OLYMPIA, WASHINGTON

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CITATION

Cite all material in the Washington State Register by its issue number and sequence within that issue, preceded by the acronym WSR. Example: The 37th item in the August 5, 1981, Register would be cited as WSR 81-15-37.

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A copy of each document filed with the Code Reviser pursuant to chapter 28B.19 RCW or 34.04 RCW is available for public inspection during normal office hours. The Code Reviser's office is located on the ground floor of the Legislative Building in Olympia. Office hours are from 8 a.m. to noon and from 1 p.m. to 5 p.m. Monday through Friday, except legal holidays. Telephone inquiries concerning material in the Register or the Washington Administrative Code (WAC) may be made by calling (206) 753-7470 (SCAN 234-7470).

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CERTIFICATE

Pursuant to RCW 34.08.040, the publication of rules or other information in this issue of the Washington State Register is hereby certified to be a true and correct copy of such rules or other information, except that headings of public meeting notices have been edited for uniformity of style.

DENNIS W. COOPER
Code Reviser

WASHINGTON STATE REGISTER

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STYLE AND FORMAT OF THE WASHINGTON STATE REGISTER

1. ARRANGEMENT OF THE REGISTER

Documents are arranged within each issue of the Register according to the order in which they are filed in the code reviser's office during the pertinent filing period. The three part number in the heading distinctively identifies each document, and the last part of the number indicates the filing sequence within an issue's material.

2. PROPOSED, ADOPTED, AND EMERGENCY RULES OF STATE AGENCIES AND INSTITUTIONS OF HIGHER EDUCATION

The three types of rule-making actions taken under the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW) may be distinguished by the size and style of type in which they appear.

- (a) **Proposed rules** are those rules pending permanent adoption by an agency and set forth in eight point type.
- (b) **Adopted rules** have been permanently adopted and are set forth in ten point type.
- (c) **Emergency rules** *have been adopted on an emergency basis and are set forth in ten point oblique type.*

3. PRINTING STYLE—INDICATION OF NEW OR DELETED MATTER

RCW 34.04.058 requires the use of certain marks to indicate amendments to existing agency rules. This style quickly and graphically portrays the current changes to existing rules as follows:

- (a) In amendatory sections—
 - (i) underlined matter is new matter;
 - (ii) ~~deleted matter is ((lined out and bracketed between double parentheses))~~;
- (b) Complete new sections are prefaced by the heading NEW SECTION;
- (c) The repeal of an entire section is shown by listing its WAC section number and caption under the heading REPEALER.

4. EXECUTIVE ORDERS, COURT RULES, NOTICES OF PUBLIC MEETINGS

Material contained in the Register other than rule-making actions taken under the APA or the HEAPA does not necessarily conform to the style and format conventions described above. The headings of these other types of material have been edited for uniformity of style; otherwise the items are shown as nearly as possible in the form submitted to the code reviser's office.

5. EFFECTIVE DATE OF RULES

- (a) Permanently adopted agency rules take effect thirty days after the rules and the agency order adopting them are filed with the code reviser. This effective date may be delayed, but not advanced, and a delayed effective date will be noted in the promulgation statement preceding the text of the rule.
- (b) Emergency rules take effect upon filing with the code reviser and remain effective for a maximum of ninety days from that date.
- (c) Rules of the state Supreme Court generally contain an effective date clause in the order adopting the rules.

6. EDITORIAL CORRECTIONS

Material inserted by the code reviser for purposes of clarification or correction or to show the source or history of a document is enclosed in brackets [].

7. INDEX AND TABLES

A combined subject matter and agency index and a table of WAC sections affected may be found at the end of each issue.

1980-1981
DATES FOR REGISTER CLOSING, DISTRIBUTION, AND FIRST AGENCY ACTION
(Revised 6/12/80)

Issue No.	Distribution Date	First Agency Action Date ²	Closing Dates ¹		
			OTS ³ 10 pages maximum (14 days)	Non-OTS and 11 to 29 pages (28 days)	Non-OTS and 30 pages or more (42 days)
80-06	Jun 18	Jul 8	Jun 4	May 21	May 7
80-07	Jul 2	Jul 22	Jun 18	Jun 4	May 21
80-08	Jul 16	Aug 5	Jul 2	Jun 18	Jun 4
80-09	Aug 6	Aug 26	Jul 23	Jul 9	Jun 25
80-10	Aug 20	Sep 9	Aug 6	Jul 23	Jul 9
80-11	Sep 3	Sep 23	Aug 20	Aug 6	Jul 23
80-12	Sep 17	Oct 7	Sep 3	Aug 20	Aug 6
80-13	Oct 1	Oct 21	Sep 17	Sep 3	Aug 20
80-14	Oct 15	Nov 4	Oct 1	Sep 17	Sep 3
80-15	Nov 5	Nov 25	Oct 22	Oct 8	Sep 24
80-16	Nov 19	Dec 9	Nov 5	Oct 22	Oct 8
80-17	Dec 3	Dec 23	Nov 19	Nov 5	Oct 22
80-18	Dec 17	Jan 6, 1981	Dec 3	Nov 19	Nov 5

81-01	Jan 7, 1981	Jan 27	Dec 24, 1980	Dec 10	Nov 26
81-02	Jan 21	Feb 10	Jan 7	Dec 24, 1980	Dec 10
81-03	Feb 4	Feb 24	Jan 21	Jan 7	Dec 24, 1980
81-04	Feb 18	Mar 10	Feb 4	Jan 21	Jan 7
81-05	Mar 4	Mar 24	Feb 18	Feb 4	Jan 21
81-06	Mar 18	Apr 7	Mar 4	Feb 18	Feb 4
81-07	Apr 1	Apr 21	Mar 18	Mar 4	Feb 18
81-08	Apr 15	May 5	Apr 1	Mar 18	Mar 4
81-09	May 6	May 26	Apr 22	Apr 8	Mar 25
81-10	May 20	Jun 9	May 6	Apr 22	Apr 8
81-11	Jun 3	Jun 23	May 20	May 6	Apr 22
81-12	Jun 17	Jul 7	Jun 3	May 20	May 6

¹All documents are due at the Code Reviser's Office by 5:00 p.m. on the applicable closing date for inclusion in a particular issue of the Register; see WAC 1-12-035 or 1-13-035.

²"No proceeding shall be held on any rule until twenty days have passed from the distribution date of the register in which notice thereof was contained." RCW 28B.19.030(2) and 34.04.025(2). These dates represent the twentieth day after the distribution date of the immediate preceding Register.

³OTS is the acronym used for the Order Typing Service offered by the Code Reviser's Office which is briefly explained in WAC 1-12-220 and WAC 1-13-240.

WSR 80-15-001
EMERGENCY RULES
HEALTH CARE FACILITIES AUTHORITY
 [Order 5—Filed October 2, 1980]

Be it resolved by the Washington Health Care Facilities Authority, acting at Olympia, Washington, that it does promulgate and adopt the annexed rules relating to WAC 247-02-040.

We, the Washington Health Care Facilities Authority, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is that the address of the authority is incorrect and needs to be amended to notify the clientele groups of the authority's new permanent address.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 70.37.050 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED September 30, 1980.

By Gerald L. Sorte
 Executive Director

AMENDATORY SECTION (Amending Order 2, Resolution 79-3, filed 9/26/79)

WAC 247-02-040 DESCRIPTION OF ORGANIZATION. (1) The authority is a public entity established under the provisions of chapter 70.37 RCW, which exercises essential governmental functions.

(2) Members. The authority consists of the governor, the lieutenant governor, the insurance commissioner, the chairman of the Washington state hospital commission, and one public member appointed by the governor on the basis of his or her interest or expertise in health care delivery, and confirmed by the senate for a term of four years. If the public office of any of the first four mentioned members is abolished, the resulting vacancy on the authority shall be filled by the officer who shall succeed substantially to the powers and duties thereof.

(3) Officers. The officers of the authority shall be a chairman, who shall be the governor, and a secretary. The secretary shall hold office for two years, or until his or her successor is later elected, and shall be elected by a majority vote of the members from among themselves. Whenever a vacancy occurs in the office of secretary, the members of the authority shall elect a successor who shall serve out the remaining term.

(4) Authority staff: The staff of the authority shall consist of an executive director and such other employees as are determined by the authority as necessary to

fulfill its responsibilities and duties. The executive director shall be the chief administrative officer of the authority and subject to its direction. All other staff shall be under his or her supervision and direction. The executive director shall keep a record of the proceedings of the authority and, when required by the authority, shall sign notes, contracts and other instruments and affix thereto the seal of the authority. The executive director shall have custody of and be responsible for all moneys and securities of the authority and shall deposit all such moneys forthwith in such banks as the authority may designate from time to time.

PROVIDED, HOWEVER, That the secretary of the authority, elected from time to time, shall exercise the duties of executive director specified in these rules until such time as an executive director is retained by the authority.

(5) Administrative office: The administrative office of the authority shall be located (~~(, until such time as an executive director and/or staff are retained by the authority, at 4300 Seattle First National Bank Building, Seattle, WA 98154)~~) at 508 E. 14th, Suite 130, Olympia, Washington 98504, which office shall be open each day for the transaction of business from ((9:00)) 8:00 a.m. to 5:00 p.m. (Saturdays, Sundays and legal holidays excepted, and except for business relating to public records, which is governed by WAC 247-12-050).

(6) Address for communications: All communications with the authority, including but not limited to the submission of materials pertaining to its operations and these rules, requests for copies of the authority's decisions and other matters, (~~(until such time as an executive director and/or staff are retained by the authority,)~~) shall be addressed as follows: Washington Health Care Facilities Authority, ((4300 Seattle First National Bank Building, Seattle, WA 98154)) 508 E. 14th, Suite 130, Olympia, Washington 98504.

WSR 80-15-002
ADOPTED RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Public Assistance)

[Order 1550—Filed October 2, 1980]

I, Gerald J. Thompson, Secretary of the Department of Social and Health Services do promulgate and adopt at Olympia, Washington, the annexed rules relating to:

- Amd WAC 388-28-530 Net cash income—Board, room rental, board and room.
- Amd ch. 388-29 WAC AFDC and GAU—Eligibility—Standards of assistance.
- Amd WAC 388-35-070 GAN—Requirements.

This action is taken pursuant to Notice No. WSR 80-11-064 filed with the code reviser on August 20, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated under the general rule-making authority of the secretary of Department of Social and Health Services as authorized in RCW 74.08.090.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 2, 1980.

By Gerald J. Thompson
Secretary

AMENDATORY SECTION (Amending Order 1434, filed 9/21/79)

WAC 388-29-100 MONTHLY STANDARDS FOR BASIC REQUIREMENTS—AFDC AND CONTINUING GENERAL ASSISTANCE. (1) Effective July 1, 1980 the state-wide monthly need standards for food, clothing, personal maintenance and necessary incidentals, household maintenance and shelter for those owning (including life estate), buying or renting an apartment or house (~~shall be~~) are:

(a) Recipients in Household	State Standard	Area Differential for King, Pierce, Snohomish, Kitsap and Thurston Counties	State Standard Plus Area Differential for King, Pierce, Snohomish, Kitsap and Thurston Counties
1	\$((220))	\$((+3))	\$((223))
2	244	15	259
3	((305))	((34))	((339))
4	339	37	376
5	((383))	((30))	((413))
6	425	33	458
7	((453))	((30))	((483))
8	503	33	536
9	((523))	((30))	((553))
10	581	33	614
11	((593))	((30))	((623))
12	659	33	692
13	((663))	((30))	((693))
14	737	33	770
15	((733))	((30))	((763))
16	815	33	848
17	((803))	((30))	((833))
18 or more	893	33	926
	971	33	1,004
	((943))	((30))	((973))
	1,049	33	1,082
	((+013))	((30))	((+043))
	1,127	33	1,160
	((+003))	((30))	((+113))
	1,205	33	1,238
	((+153))	((30))	((+183))
	1,283	33	1,316
	((+223))	((30))	((+253))
	1,361	33	1,394
	((+293))	((30))	((+323))
	1,439	33	1,472
	((+363))	((30))	((+393))
	1,517	33	1,550
	((+433))	((30))	((+463))
	1,595	33	1,628

~~((2) Deleted Household with supplied shelter.)~~
(b) Household with supplied shelter.

The monthly standard for supplied shelter includes requirements for food, clothing, personal maintenance and necessary incidentals, and household maintenance.

Recipients in household - all counties

1	\$ ((+43))	159
2	((208))	231
3	((276))	306
4	((344))	381
5	((412))	456
6	((480))	531
7	((548))	606
8	((616))	681
9	((684))	756
10	((752))	831
11	((820))	906
12	((888))	981
13	((956))	1,056
14	((+024))	1,131
15	((+092))	1,206
16	((+160))	1,281
17	((+228))	1,356
18 or more	((+296))	1,431

~~((4) These standards are effective July 1, 1979.)~~
(2) Effective November 1, 1980, the state-wide monthly payment standards reflecting 96% of the needs standards shall be:

(a) Recipients in Household	State Standard	Area Differential for King, Pierce, Snohomish, Kitsap and Thurston Counties	State Standard Plus Area Differential for King, Pierce, Snohomish, Kitsap and Thurston Counties
1	234	15	249
2	325	36	361
3	408	32	440
4	483	32	515
5	558	32	590
6	633	32	665
7	708	32	740
8	783	32	815
9	858	32	890
10	933	32	965
11	1,008	32	1,040
12	1,083	32	1,115
13	1,158	32	1,190
14	1,233	32	1,265
15	1,308	32	1,340
16	1,383	32	1,415
17	1,458	32	1,490
18 or more	1,533	32	1,565

(b) Household with supplied shelter.
The monthly standard for supplied shelter includes requirements for food, clothing, personal maintenance and necessary incidentals, and household maintenance.

Recipients in household - all counties

1	\$ 153
2	222
3	294
4	366
5	438
6	510
7	582
8	654
9	726
10	798
11	870
12	942
13	1,014

Recipients in household - all counties

14	1,086
15	1,158
16	1,230
17	1,302
18 or more	1,374

AMENDATORY SECTION (Amending Order 1434, filed 9/21/79)

WAC 388-29-110 MAXIMUMS TO MONTHLY STANDARDS FOR BASIC REQUIREMENTS. (1) Grants to families of 7 or more shall not exceed the following maximums. In computing the grant amount non-exempt income and resources which are available to meet need shall be deducted from the monthly standard specified in WAC 388-29-100.

		Number of recipients in household					
		7	8	9	10	11	12
Maximum		(\$694)	\$727	\$758	\$787	\$814	\$839
		\$740	\$772	\$802	\$830	\$856	\$880
		13	14	15	16	17	18
Maximum		(\$862)	\$883	\$902	\$919	\$934	\$947
		\$902	\$922	\$940	\$956	\$970	\$982

(2) These standards are effective ((July 1, 1979)) November 1, 1980.

AMENDATORY SECTION (Amending Order 1434, filed 9/21/79)

WAC 388-29-260 REQUIREMENTS OF PERSON IN BOARDING HOME-CONTINUING GENERAL ASSISTANCE. (1) The standard for board and room shall be ((~~\$160.00~~)) \$170.50 per month or ((~~\$5.26~~)) \$5.62 per day.

(2) The monthly standard for clothing and personal maintenance and necessary incidentals shall be \$27.50.

(3) These standards are effective ((July 1, 1979)) November 1, 1980.

AMENDATORY SECTION (Amending Order 1434, filed 9/21/79)

WAC 388-28-530 NET CASH INCOME-BOARD, ROOM RENTAL, BOARD AND ROOM. (1) The net income from operating a rooming, boarding, or boarding and rooming home shall be computed as follows effective ((July 1, 1979)) November 1, 1980.

(a) Boarder - The board payment received minus ((~~\$61~~)) \$63.

(b) Roomer - The room rental received minus ((~~\$5.50~~)) \$6.05.

(c) Boarder and roomer - The board and room payment received minus ((~~\$66.50~~)) \$69.05.

(2) If a recipient is engaged in the management and operation of a rooming, boarding or boarding and rooming home, the net income as computed in accordance with subsection (1) is considered earned income to that recipient.

((3) These standards are effective July 1, 1979.))

AMENDATORY SECTION (Amending Order 1436, filed 9/21/79)

WAC 388-35-070 NONCONTINUING GENERAL ASSISTANCE-REQUIREMENTS. (1) The standards for monthly requirements for a noncontinuing general assistance applicant/recipient, effective ((July 1, 1979)) November 1, 1980, shall be:

Number of GA-N recipients in assistance unit

1	2	3	4	5	6	7	8	9
(\$ 66)	\$105	\$138	\$173	\$213	\$251	\$286	\$323	\$360
\$ 70	\$112	\$147	\$184	\$227	\$268	\$304	\$345	\$384

10 11 12 13 14 15 16 17 18 or more

(\$397)	\$436	\$473	\$510	\$549	\$585	\$623	\$659	\$697
\$426	\$464	\$504	\$543	\$585	\$623	\$664	\$702	\$743

(2) An emergency shelter requirement shall be authorized by the CSO in the following circumstances:

(a) The applicant/recipient has been given, and presents to the CSO, a notice to quit premises or pay rent.

(b) The CSO has contacted the landlord and has been assured that payment of up to one month's rent standard will be sufficient to forestall eviction.

(c) The amount authorized shall be the actual amount needed to forestall eviction, not to exceed the following standards:

Number of GA-N recipients in assistance unit

1	2	3	4	5	6	7	8	9
(\$ 90)	\$131	\$136	\$139	\$139	\$142	\$146	\$149	\$152
\$100	\$145	\$151	\$154	\$154	\$158	\$162	\$165	\$169

10 11 12 13 14 15 16 17 18 or more

(\$155)	\$157	\$160	\$162	\$165	\$167	\$168	\$173	\$175
\$172	\$174	\$178	\$180	\$183	\$185	\$186	\$192	\$194

(3) An emergency utility requirement shall be authorized by the CSO in the following circumstances:

(a) The applicant/recipient has been given, and presents to the CSO, a notice of impending utility shut-off issued by the company providing the service, or it is otherwise verified by the CSO that the applicant or recipient is without necessary fuel for heating or cooking.

(b) The CSO has contacted the utility company or other provider of fuel to determine the amount necessary to forestall shut-off or otherwise provide necessary fuel.

(c) The amount authorized shall be the actual amount needed to forestall shut-off or to purchase one month's supply of fuel, not to exceed the following standards:

Number of GA-N recipients in assistance unit

1	2	3	4	5	6	7	8	9
(\$ 46)	\$ 48	\$ 67	\$ 77	\$ 83	\$ 88	\$ 95	\$101	\$111
\$ 51	\$ 53	\$ 74	\$ 85	\$ 92	\$ 98	\$105	\$112	\$123

10 11 12 13 14 15 16 17 18 or more

(\$120)	\$130	\$140	\$151	\$162	\$172	\$183	\$193	\$204
\$133	\$144	\$155	\$168	\$180	\$191	\$203	\$214	\$226

WSR 80-15-003
ADOPTED RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Public Assistance)
 [Order 1551—Filed October 2, 1980]

I, Gerald J. Thompson, Sec. of the Department of Social and Health Services do promulgate and adopt at Olympia, Washington, the annexed rules relating to homemaker services, amending WAC 388-15-220.

This action is taken pursuant to Notice No. WSR 80-11-067 filed with the code reviser on August 20, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated under the general rule-making authority of the secretary of Department of Social and Health Services as authorized in RCW 74.08.090.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 2, 1980.

By Gerald J. Thompson
Secretary

AMENDATORY SECTION (Amending Order 1238, filed 8/31/77)

WAC 388-15-220 **HOMEMAKER SERVICE.** (1) Homemaker services are services to ((individuals and)) families with children under the age of eighteen residing in their own homes or in special group situations outside their homes which will help ((individuals)) families overcome specific and temporary barriers to maintaining, strengthening, and safeguarding their functioning in the home. In an emergent situation, services may be provided to individuals sixty years of age and older, when due to sudden or unforeseen need, to enable the individual to return to or remain in own home, such emergency not to exceed seventy-two hours of homemaker care. Services include the casework functions of determination of need for service, the development with the clients, of a service plan, and ongoing evaluation of that plan during the period of placement. Homemaker services also include the direct provision of, as well as the formal and informal teaching of, limited personal care, home management of household budgets, maintenance and care of the home, food preparation and nutrition, the supervision and development of children and adults unable to care for themselves, and information and referral regarding community resources to improve home and family functioning. These services may be directed toward adult and children's protective services situations, and include the observation, evaluation and reporting of individual functioning in the home.

(2) Goals for Homemaker Services shall be limited to those specified in WAC 388-15-010(1)(a) through (e). Also see WAC 388-15-010(2).

WSR 80-15-004
PROPOSED RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Public Assistance)
 [Filed October 2, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Social and Health Services intends to adopt, amend, or repeal rules concerning AFDC—Eligibility, amending chapter 388-24 WAC;

and that the adoption, amendment, or repeal of such rules will take place at 9:00 a.m., Monday, October 6, 1980, in William B. Pope's Office, 4th floor, J-24, Office Building #2, Olympia, Washington.

The authority under which these rules are proposed is RCW 74.08.090.

This notice is connected to and continues the matter noticed in Notice No. WSR 80-11-065 filed with the code reviser's office on August 20, 1980.

Dated: October 2, 1980
By: Gerald J. Thompson
Secretary

WSR 80-15-005
EMERGENCY RULES
DEPARTMENT OF FISHERIES
 [Order 80-143—Filed October 2, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is coho management needs prevail in the lower Green-Duwamish and lower Elwha Rivers. Harvestable surplus of coho have been taken in Area 10E.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 2, 1980.

By Gordon Sandison
Director

NEW SECTION

WAC 220-28-006G0I CLOSED AREA. *Effective October 4, 1980 until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish or or possess salmon for commercial purposes with any type of gear from that portion of the Elwha River upstream from the upper reservation boundary.*

Reviser's Note: Errors of punctuation or spelling in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

NEW SECTION

WAC 228-28-010E0E CLOSED AREA. *Effective October 3, 1980 until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in Puget Sound Salmon Management and Catch Reporting Area 10E.*

NEW SECTION

WAC 228-28-010F0P CLOSED AREA. *Effective immediately until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear from that portion of the Green-Duwamish River upstream from the Highway 99 Bridge.*

REPEALER

The following sections of the Washington Administrative Code are repealed:

WAC 220-28-010F0N CLOSED AREA. (80-136)

effective October 6, 1980:

WAC 220-28-006G0H CLOSED AREA. (80-128)

**WSR 80-15-006
EXECUTIVE ORDER
OFFICE OF THE GOVERNOR
[EO 80-15]**

**4TH AMENDED EXECUTIVE ORDER
(In Reference to Mt. St. Helens Declaration,
April 3, 1980)**

WHEREAS, on July 29, 1980, I issued Executive Order 80-11, prohibiting any person or persons, subject to certain exceptions, from entering and/or occupying, at any time, an area designated the Red Zone; and

WHEREAS, on September 3, 1980, I formed the Cougar Hearing Panel and appointed three persons to the panel to provide recommendations as to whether the town of Cougar and its primary access route should be removed from the Red Zone; and

WHEREAS, on September 11, 1980, the Cougar Hearing Panel held a public hearing at the Yale Grade School in Ariel, Washington; and

WHEREAS, the Cougar Hearing Panel found that although the town of Cougar and its primary access route are in a hazardous area, the danger is to a lesser degree than in other areas within the Red Zone; and

WHEREAS, the Cougar Hearing Panel also found that the Red Zone restrictions placed on the citizens of the affected communities are intolerable for daily living; and

WHEREAS, in consideration of these findings, the Cougar Hearing Panel recommended that the town of Cougar and its primary access route be removed from the Red Zone, based on testimony presented by the scientific personnel of the United States Geological Survey, law enforcement representatives, the citizens of Cougar and Yale, and others.

NOW, THEREFORE, I, DIXY LEE RAY, Governor of the state of Washington, based upon the findings and recommendations of the Cougar Hearing Panel and the testimony presented to the panel by virtue of the power vested in me pursuant to the Revised Code of Washington (hereinafter RCW) 43.06.010(12), 43.06.210, 43.06.220(2), (8), and (9), 38.52.050(3)(a) and (f) and 38.52.010(7) do remove the town of Cougar and its primary access route from the previously designated Red Zone.

Except as provided in this order, no person or persons shall enter and/or occupy at any time and by any means the area known as the Red Zone which shall be described within the following boundaries:

From the intersection of township 111 north, range 2 east just north of Kid Valley, Cowlitz County; then east to the northwest corner of section 5, township 10 north, range 2 east; then south along the section line to the southwest corner of section 8, township 10 north, range 2 east; then west to the west boundary of range 2 east; then south along the west boundary of range 2 east to the northwest corner of section 18, township 6 north, range 2 east; then east along the section line to the point of intersect with the south one-fourth corner of section 8, township 6 north, range 4 east; then northerly to the one-fourth corner of section 8, township 6 north, range 4 east; then east to the north east section corner of section 8; then north to the northwest section corner of section 4, township 6 north, range 4 east; then east to the south one-fourth corner of section 33, township 7 north, range 4 east; then north to the north one-fourth corner of section 33; then east to the southeast section corner of section 27, township 7 north, range 4 east; then north to the west one-fourth corner of section 27; then east to the east one-fourth corner of section 27; then north to the north one-sixteenth corner on the east section line of section 27; then east to the Skamania county line; then south along the Skamania County line to the thread of the Lewis River

at the east end of Yale Dam Reservoir; then north and westerly to the high water line of Yale Dam Reservoir; then west and southerly along the high water line of Yale Dam Reservoir to the Yale Dam, across the top of the dam then along the high water mark to the section line dividing sections 32 and 33 of township 6 north, range 4 east to the northwest corner of section 4, township 5 north, range 4 east; then south to the southwest corner of section 33, township 5 north, range 4 east; then east along the south boundary of township 5 north to the southwest corner of section 31, township 5 north, range 7 east; then north along the west boundary of range 7 east to the northwest corner of section 6, township 5 north, range 7 east; then east along the north boundary of township 5 north to the southeast corner of section 34, township 6 north, range 8 east; then north along the section line to the northwest corner of section 26, township 6 north, range 8 east; then east along the section line to the southeast corner of section 24, township 6 north, range 8 east; then north along the east boundary of range 8 east to the northeast corner of section 1, township 10 north, range 8 east, which is also the Lewis County boundary; then west along the north boundary of township 10 north to the southeast corner of section 36, township 11 north, range 7 east; then north along the east boundary of range 7 east to the northeast corner of section 24, township 11 north, range 7 east; then west along the section line to the southeast corner of section 15, township 11 north, range 6 east; then north along the section line to the northeast corner of section 15, township 11 north, range 6 east; then west along the section line to the northeast corner of section 16, township 11 north, range 6 east; then south along the section line to the southeast corner of section 16, township 11 north, range 6 east; then west along the section line to the southeast corner of section 17, township 11 north, range 6 east; then north along the section line to the northeast corner of section 17, township 11 north, range 6 east; then west along the section line to the northeast corner of section 13; township 11 north, range 2 east; then south along the west boundary of range 3 east to the northeast corner of section 24, township 11 north, range 2 east; then west to the northwest corner of section 19, township 11 north, range 2 east; then south along the west boundary of range 2 east to the point of beginning.

This Executive Order shall supersede all prior Executive Orders pertaining to Mt. St. Helens.

I hereby delegate to the Washington State Director of Emergency Services, and the Sheriffs of the counties of Cowlitz, Clark, Skamania and Lewis, or their designee(s), the authority stated below pursuant to RCW 38.52.050(3)(f).

The following shall be exempted from this order prohibiting entry and/or occupation of the Red Zone, as described above, subject to limitations provided in the paragraphs below.

1. Scientific research personnel as determined by the United States Geological Survey.
2. Search and rescue personnel registered or as identified pursuant to RCW 38.52.010(5) on official search and rescue missions within the Red Zone.
 - a. The Sheriffs of Lewis, Cowlitz, Clark, and Skamania Counties or their designee(s) shall have the authority to approve entry and/or occupation by search and rescue personnel.
3. Federal, state, county or local law enforcement and firefighting personnel whose jurisdiction is within the Red Zone and who are on official business within the Red Zone.
4. Federal, state, county or local administrative personnel on official business within the Red Zone.
 - a. The Director, Washington State Department of Emergency Services, or his designee(s), shall have the authority to approve entry and/or occupation by state, county and local administrative personnel on official business.
 - b. Federal administrative personnel will be required to obtain and possess a permit.
5. Individual(s) who own and/or control real property or personal property being used as a residence and whose official permanent residence is within the Red Zone.
6. Individual(s) with a legitimate business reason for being within the Red Zone, provided they are approved by the Washington State Director of Emergency Services or his designee(s).
7. News media personnel, provided they are approved by the Washington State Director of Emergency Services or his designee(s).
8. Individual(s) not included in one through seven above, provided they are approved by the Washington State Director of Emergency Services or his designee(s).

Each individual and personnel given permission to enter and/or occupy the Red Zone under one and four through eight above, shall obtain a special identification

permit from the Washington State Department of Licensing prior to entry into the Red Zone. This entry permit must be carried upon the person of the individual at all times.

Prior to entry and/or occupation within the Red Zone each individual and personnel under one and five through eight, shall be required to sign a "Waiver of Rights" form releasing and discharging the state of Washington and all its political subdivisions, their officers or agents or employees from all liability for any damages or losses incurred by the individual while within the Red Zone or as a result of entering or occupying that zone. The "Waiver of Rights" form shall be issued by the Washington State Department of Licensing.

Any person willfully violating this order shall be guilty of a gross misdemeanor pursuant to RCW 46.06.220 and shall be punished by imprisonment in the county jail for a maximum term of not more than one year, or a fine in an amount of not more than one thousand dollars.

Any person who violates any other rule, regulation or order issued under the authority of Chapter 38.52 RCW shall be guilty of a misdemeanor and shall be punished by imprisonment in the county jail for a maximum of not more than ninety days or by a fine in an amount not more than five hundred dollars or both.

IN WITNESS WHERE-
OF, I have hereunto set my
hand and caused the seal of
the state of Washington to
be affixed at Olympia this
day of October, A.D.,
Nineteen Hundred and
Eighty.

Dixy Lee Ray

Governor of Washington

Bruce K. Chapman

Secretary of State

Reviser's Note: The citation error in the above material appeared in the original copy of the executive order and appears herein pursuant to the requirements of RCW 34.08.040.

Reviser's Note: The spelling error in the above material appeared in the original copy of the executive order and appears herein pursuant to the requirements of RCW 34.08.040.

WSR 80-15-007
ADOPTED RULES
WALLA WALLA
COMMUNITY COLLEGE

[Resolution 81-2—Filed October 2, 1980]

Be it resolved by the board of trustees, of the Washington State Community College District No. 20, Walla Walla Community College, acting at Walla Walla, Washington, that it does promulgate and adopt the annexed rules relating to bylaws of Community College District No. 20, chapter 132T-04 WAC.

This action is taken pursuant to Notice No. WSR 80-11-068 filed with the code reviser on August 20, 1980. Such rules shall take effect pursuant to RCW 28B.19.050(2).

This rule is promulgated under the general rule-making authority of the Washington State Community College District No. 20 as authorized in RCW 28B.19.030 and chapter 28B.50 RCW.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED September 25, 1980.

By Eldon J. Dietrich
President

AMENDATORY SECTION (Amending Order 78-4
filed October 24, 1977)

WAC 132T-04-080 OFFICERS OF THE BOARD. (1) At the ((final)) regular meeting of the board in September of each year, the board shall elect from its membership a chairman and vice-chairman to serve for the ensuing year((-)), commencing on October 1 and terminating on September 30. In addition the president of Walla Walla Community College shall serve as secretary to the board of trustees as specified by state law. The secretary may, at his discretion, appoint his administrative assistant or other appropriate college staff member to act as recording secretary for all regular and special meetings of the board.

(2) The chairman in addition to any duties imposed by rules and regulations of the state board, shall preside at each regular or special meeting of the board, sign all legal and official documents recording action of the board, and review the agenda prepared for each meeting of the board. The chairman shall, while presiding at official meetings, have full right of discussion and vote.

(3) The vice-chairman in addition to any duties imposed by rules and regulations of the state board shall act as chairman of the board in the absence of the chairman.

(4) In case of the absence of the chairman and vice-chairman from any meeting of the board of trustees or in case of the inability of both of the two to act, the board of trustees shall elect for the meeting a chairman pro tempore, and may authorize such chairman pro tempore to perform the duties and acts authorized or required by said chairman or vice-chairman to be performed, as long as the inability of these said officers to act may continue.

(5) The secretary of the board shall in addition to any duties imposed by rules and regulations of the state board, keep the official seal of the board, maintain all records of meetings and other official action of the board.

(6) The secretary shall also be responsible for board correspondence, compiling the agenda of meetings, and distributing the minutes of the meetings and related reports.

(7) The secretary, or his designate, must attend all regular and special meetings of the board, and official minutes must be kept of all such meetings.

Reviser's Note: RCW 28B.19.077 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

WSR 80-15-008
ADOPTED RULES
SECRETARY OF STATE
 [Order 80-3—Filed October 3, 1980]

I, Bruce K. Chapman, Secretary of State, of the State of Washington, do promulgate and adopt at Olympia, Washington, the annexed rules relating to canvassing of election returns.

This action is taken pursuant to Notice No. WSR 80-11-045 filed with the code reviser on August 18, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated under the general rule-making authority of the Office of the Secretary of State as authorized in RCW 29.04.080.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 3, 1980.

By Donald F. Whiting
 Deputy Secretary of State

Chapter 434-62 WAC
CANVASSING AND CERTIFICATION OF PRIMARIES AND ELECTIONS

WAC	
434-62-005	Authority and purpose.
434-62-010	Definitions.
434-62-020	Preliminary abstract of votes.
434-62-030	Auditor's abstract of votes.
434-62-040	Verification of auditor's abstract of votes by county canvassing board.
434-62-050	Errors and/or discrepancies discovered during the verification of the auditor's abstract of votes.
434-62-060	Documentation of corrective action taken.
434-62-070	Official county canvass report.
434-62-080	Abstract of votes—Secretary of State to receive a certified copy—transmittal.
434-62-090	Receipt of certified copy of abstract of votes by Secretary of State.
434-62-100	Canvass of returns by Secretary of State—powers and duties.
434-62-110	Certification of primary returns by Secretary State.

434-62-120	Certification of general election returns by Secretary of State.
434-62-130	Certification of special primaries and special elections by Secretary of State.
434-62-140	Microfilm copies of election returns.

NEW SECTION

WAC 434-62-005 **AUTHORITY AND PURPOSE.** These rules are adopted pursuant to RCW 29.04.080 and chapter 34.04 RCW in order to establish uniform procedures governing the canvass of primaries and elections, general and special, and to ensure the accurate and timely certification of those election returns.

NEW SECTION

WAC 434-62-010 **DEFINITIONS.** As used in these regulations:

(1) "Canvassing" is that process of examining in detail a ballot, groups of ballots, election sub-totals, or grand totals, in order to determine the final official returns of a primary, special, or general election, and to safeguard the integrity of the election process.

(2) "County Canvassing Board" is that body charged by law with the duty of canvassing absentee ballots, of ruling on the validity of questioned or challenged ballots, of the verifying all unofficial returns as listed in the Auditor's Abstract of votes, and the producing of the Official County Canvass Report; it shall be composed of the county auditor, prosecuting attorney, and chairman of the board of the county legislative authority, or their designated representatives.

(3) "Preliminary Abstract of Votes" is that report prepared by the county auditor which lists registered voters, votes cast, and all vote totals by precinct, or by combination of precincts if applicable, but it shall not include any absentee ballot totals or any subtotals or county-wide totals.

(4) "Auditor's Abstract of Votes" is that report prepared by the county auditor which lists registered voters, votes cast, all of the vote totals by precinct, or by combination of precincts if applicable, and which includes absentee ballot totals, legislative district sub-totals, if any, and county-wide totals. Vote totals in the Auditor's Abstract of Votes shall be unofficial until verified and certified by the county canvassing board.

(5) "Verification of the Auditor's Abstract of Votes" is that process whereby the county canvassing board determines that all of the individual precinct and absentee ballot totals, as shown on the Auditor's Abstract of Votes, have been correctly listed and that the various sub-totals are an accurate reflection of the sum of those individual precinct and absentee ballot totals.

(6) "County Canvass Report" is the Auditor's Abstract of Votes after verification by the county canvassing board and shall contain a certificate which shall include the oath as specified in RCW 29.62.040, the original signatures of each member of the county canvassing board, the county seal, and all other material pertinent to the election.

(7) "Certified Copy of the County Canvass Report" is that report transmitted by the county auditor to the Secretary of State which contains registered voters and votes cast by precinct, or combination of precincts if applicable, votes cast for and against state measures, and votes cast for candidates for federal and statewide offices and for any office whose jurisdiction encompasses more than one county, absentee ballot totals for those measures and candidates, sub-totals if applicable, and county-wide totals. It shall also include a certificate, bearing original signatures and an original county seal, identical to that included in the Official County Canvass Report, and any other material which may be pertinent to the canvass of the election.

NEW SECTION

WAC 434-62-020 PRELIMINARY ABSTRACT OF VOTES. Following the election and prior to the official canvass, the county auditor shall prepare an abstract of votes, listing registered voters and votes cast, votes cast for and against measures, and votes cast for candidates, by precinct or groups of precincts in the event precincts have been combined pursuant to RCW 29.04.055.

NEW SECTION

WAC 434-62-030 AUDITOR'S ABSTRACT OF VOTES. No later than the tenth day following any primary or special election and the fifteenth day following any general election the county canvassing board shall meet and canvass all absentee ballots not previously processed under the provisions of chapter 29.36 RCW, together with all questioned and challenged ballots. Upon completion of this canvass the board shall direct the county auditor to include all absentee ballot totals and all challenged and questioned ballot totals, or legislative district sub-totals if applicable, in the preliminary abstract of votes prepared pursuant to WAC 434-62-020. The county auditor shall then add these totals to the existing precinct totals. The ensuing report, containing a count of all ballots cast in the election, sub-total reports by legislative district, and county-wide totals shall constitute the Auditor's Abstract of Votes.

NEW SECTION

WAC 434-62-040 VERIFICATION OF AUDITOR'S ABSTRACT OF VOTES. The county canvassing board shall examine the Auditor's Abstract of Votes and shall verify that all of the individual precinct and absentee ballot totals have been included in the abstract and that the sub-totals and county-wide totals for registered voters and votes cast are an accurate reflection of the sum of those individual precinct and absentee ballot totals. This verification shall be accomplished, in counties with fewer than 100,000 registered voters, by directing the county auditor or his or her representative to add these individual precinct and absentee ballot totals in the presence of the canvassing board manually or by using an adding machine. The canvassing board shall then compare the sub-totals and totals produced in this manner against the sub-totals and totals as they appear on

the Auditor's Abstract of Votes and verify that the figures are identical. In counties with more than 100,000 registered voters the adding machine tapes or manual totals may be produced prior to the meeting of the canvassing board, but in such counties the canvassing board shall carefully compare the pre-produced sub-totals and totals against the sub-totals and totals as they appear on the Official Abstract of Votes and verify that the two sets of figures are identical.

NEW SECTION

WAC 434-62-050 ERRORS OR DISCREPANCIES DISCOVERED DURING THE VERIFICATION OF THE AUDITOR'S ABSTRACT OF VOTES. In the event that the county canvassing board, during the verifications process, discovers that errors exist in the Auditor's Abstract of Votes or that discrepancies exist between that abstract and the manual or adding machine totals for registered voters and votes cast produced pursuant to WAC 434-62-040, the board shall investigate those errors and discrepancies. They shall be empowered to take whatever corrective steps a majority of the board deems necessary, including changing or modifying the Auditor's Abstract of Votes if the error or discrepancy is discovered in that document. The canvassing board may then proceed to verify votes cast on measures or for candidates if a majority of the board believes that the nature of the errors or discrepancies discovered warrant such further action on their part.

NEW SECTION

WAC 434-62-060 DOCUMENTATION OF CORRECTIVE ACTION TAKEN. If the canvassing board decides to take corrective action with respect to any part of the Auditor's Abstract of Votes, they shall prepare a written narrative of the errors or discrepancies discovered, the cause of those errors, if known, and the corrective action taken. In the event the Auditor's Abstract of Votes is altered or modified by the canvassing board, those alterations and modifications shall be initiated by each member of the canvassing board. Additionally, the written narrative shall be signed by each member of the board.

NEW SECTION

WAC 434-62-070 OFFICIAL COUNTY CANVASS REPORT. Upon completion of the verification of the Auditor's Abstract of Votes and the documentation of any corrective action taken, the county canvassing board shall sign a certification that the abstract is a full, true, and correct representation of the votes cast for the issues and offices listed thereon. The certification shall also state the total number of registered voters and votes cast in the county. The certification shall contain the oath required by RCW 29.62.040, signed by the county auditor and attested to by the chairman of the board of the county legislative authority, and shall have a space where the official seal of the county shall be attached. This certification, the Auditor's Abstract of Votes, any adding machine tapes produced during the verification

process, and the written narrative of errors and discrepancies discovered and corrected, if applicable, shall constitute the Official County Canvass Report. This report may not be subsequently amended or altered, except in the event a recount conducted pursuant to chapter 29.64 RCW, or upon order of the Superior Court, or by the county canvassing board re-convened specifically for that purpose. The vote totals contained therein shall constitute the official returns of that election.

NEW SECTION

WAC 434-62-080 AUDITOR'S ABSTRACT OF VOTES—SECRETARY OF STATE TO RECEIVE CERTIFIED COPY—TRANSMITTAL. No later than the next business day following the certification of the returns of any primary, special, or general election at which votes were cast for or against state measures or for candidates for federal and statewide office or for offices whose jurisdiction encompasses more than one county, the county auditor shall send a certified copy of that part of the Auditor's Abstract of Votes covering those issues and offices to the secretary of state. This copy must be no larger than eleven inches by fourteen inches and have a certificate identical to that accompanying the Official County Canvass Report, bearing the county seal and original signatures of the officers required to sign that document attached or affixed thereto. A copy of the written narrative documenting errors and discrepancies discovered and corrective action taken shall accompany the abstract if applicable. Copies of the adding machine tapes used during the verification process need not be sent to the secretary of state.

Reviser's Note: Errors of punctuation or spelling in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

NEW SECTION

WAC 434-62-090 RECEIPT OF CERTIFIED COPY OF AUDITOR'S ABSTRACT OF VOTES BY SECRETARY OF STATE. The secretary of State shall ensure that all material required to be submitted pursuant to state law and these regulations has been included in the certified copy of the Auditor's Abstract of Votes transmitted to his or her office. In the event the secretary of state determines that the certified copy of the Auditor's Abstract of Votes is incomplete, he or she shall notify the county auditor of that fact and shall request that the missing part of the abstract be forwarded immediately. No county's certified copy of the abstract of votes shall be considered as complete for acceptance by the secretary of state until all of the material required by statute and regulation has been received by the secretary of state. In the event the certified copy of the official abstract is illegible or in improper form, the secretary of state shall return that abstract and require an immediate re-submission of the abstract in proper or legible form.

NEW SECTION

WAC 434-62-100 CANVASS OF RETURNS BY THE SECRETARY OF STATE—POWERS AND

DUTIES. Upon receipt of a complete certified copy of the Auditor's Abstract of Votes from a county auditor, the secretary of state shall proceed to include the results from that abstract in the official canvass of the primary, special, or general election prepared by that office. This shall be done by adding the certified returns from each completed county abstract of votes in order to determine the final results for those offices and issues he or she is required by law to certify. The secretary of state shall accept the certified copy of the Official Abstract of Votes from each county as being full, true, and correct in all respects. The secretary of state may include in the official canvass, a narrative which details or describes any apparent discrepancies discovered during the canvassing procedure, and may notify the county or counties involved of such discrepancies.

NEW SECTION

WAC 434-62-110 CERTIFICATION OF PRIMARY RETURNS BY THE SECRETARY OF STATE. Upon completion of the canvass of each county's certified copy of the Auditor's Abstract of Votes and no later than the third Tuesday following the primary, the secretary of state shall certify to the appropriate county auditors the returns for all candidates for federal and statewide offices, for those offices whose jurisdiction encompasses more than one county, and the ballot titles for all state measures. In the event the secretary of state is unable to certify all or part of a primary election by the third Tuesday following that primary because he or she has not received completed certified copies of the Auditor's Abstract of Votes from one or more counties, he or she shall certify the state ballot measures and those candidates for which completed abstracts have been received. The secretary of state shall also set forth, by letter to the county auditors, those reasons which render him or her unable to certify the entire primary. The certification of the remainder of the primary shall take place when all outstanding certified copies of official abstracts have been received and filed.

NEW SECTION

WAC 434-62-120 CERTIFICATION OF GENERAL ELECTION RETURNS BY THE SECRETARY OF STATE. Upon completion of the canvass of each county's certified copy of the Auditor's Abstract of Votes and no later than the thirtieth day following a general election the secretary of state shall certify to the governor the returns for all candidates for federal and statewide offices, for those offices whose jurisdiction encompasses more than one county, and for all state ballot measures. In the event the secretary of state is unable to certify all or part of a general election by the thirtieth day following that election because he or she has not received completed certified copies of the Auditor's Abstract of Votes from one or more counties, he or she shall certify those candidates for which completed abstracts have been received. The secretary of state shall also set forth, by letter to the governor, those reasons which render him or her unable to certify the entire

election. The certification of the remainder of the election shall take place when all outstanding certified copies of official abstracts have been received.

Reviser's Note: Errors of punctuation or spelling in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

NEW SECTION

WAC 434-62-130 CERTIFICATION OF SPECIAL PRIMARIES AND SPECIAL ELECTIONS. Insofar as practicable, the procedures governing the certification of special primaries by the secretary of state shall be the same as those governing the certification of primaries, and the procedures governing the certification of special elections shall be the same as those governing general elections.

NEW SECTION

WAC 434-62-140 MICROFILM COPIES OF ELECTION RETURNS. The secretary of state shall produce and make available for public inspection and copying pursuant to chapter 434-12 WAC microfilm or microfiche copies of all county canvass reports submitted to his or her office. The charges for microfilm duplicates or photocopies produced from the microfilm originals shall be equal to the actual cost of reproduction including personnel time and any cost of mailing.

WSR 80-15-009
EMERGENCY RULES
DEPARTMENT OF FISHERIES
[Order 80-144—Filed October 3, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is Samish River is closed to protect Samish River chinook. Areas 6, 6A and 6C and a portion of Area 5 are closed to protect chum bound for Nooksack and Samish Rivers and Strait of Juan de Fuca tributaries. Area 4B and the western portion of Area 5 remain open to allow tribal fisheries which meet the criteria of limited effort, limited impact and limited mobility established at Fisheries Advisory Board meetings 79-62, 79-69 and 79-83. Areas 7 and 7A remain open to allow harvest of chum salmon bound for Canada. Area 10E reopens to allow a harvest of coho equal to enhancement levels of production. Analysis of test fishing results indicates coho management needs should prevail in the western portion of Area 10B, Area 7B remains open to allow a harvest of Nooksack-Samish coho stocks. Coho management needs prevail in the Pysht,

Clallam, Dungeness and Lyre Rivers and in Salt and Deep Creeks.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 3, 1980

By Gordon Sandison
Director

NEW SECTION

WAC 220-28-00500U CLOSED AREA. Effective October 6, 1980 until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of net gear in that portion of Puget Sound Salmon Management and Catch Reporting Area 5 east of a line projected from Pillar Point to Sheringham Point.

NEW SECTION

WAC 220-28-00600T CLOSED AREA. Effective October 6, 1980 until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in Puget Sound Salmon Management and Catch Reporting Area 6.

NEW SECTION

WAC 220-28-006A0R CLOSED AREA. Effective October 6, 1980 until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in Puget Sound Salmon Management and Catch Reporting Area 6A.

NEW SECTION

WAC 220-28-006C0M CLOSED AREA. Effective October 6, 1980 until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of net gear in that portion of Puget Sound Salmon Management and Catch Reporting Area 6C outside and northerly of a line projected from Angeles Point to Observatory Point.

NEW SECTION

WAC 220-28-007G0H CLOSED AREA. Effective immediately until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes from the waters of the Samish River.

NEW SECTION

WAC 220-28-010B0S CLOSED AREA. Effective immediately until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in that portion of Puget Sound Salmon Management and Catch Reporting Area 10B easterly of the Interstate 5 Bridge.

REPEALER

The following sections of the Washington Administrative Code are repealed:

- WAC 220-28-005F0N CLOSED AREA. (80-136)
 WAC 220-28-006F0J CLOSED AREA. (80-136)
 WAC 220-28-010B0R CLOSED AREA. (80-136)
 WAC 220-28-010E0E CLOSED AREA. (80-143)

NEW SECTION

WAC 220-47-31200D PURSE SEINE—WEEKLY PERIODS. Notwithstanding the provisions of WAC 220-47-312, effective October 5 through October 11, 1980, it shall be unlawful to take, fish for or possess salmon with purse seine gear except during the weekly open periods hereinafter designated in the following Puget Sound Salmon Management and Catch Reporting Areas:

Areas 7 and 7A – Week beginning October 5: Monday, Tuesday, and Wednesday.

Area 7B – Week beginning October 5: Monday, Tuesday, Wednesday, Thursday and Friday.

NOTE: Purse Seine fishing in Area 7B closes at 4:00 p.m. on Friday October 10, 1980.

NEW SECTION

WAC 220-47-40200B REEF NET—WEEKLY PERIODS. Notwithstanding the provisions of WAC 220-47-402, effective October 5 through October 11, 1980, it shall be unlawful to take, fish for or possess salmon with reef net gear except during the weekly open periods hereinafter designated in the following Puget Sound Salmon Management and Catch Reporting Areas:

Areas 7 and 7A – Week beginning October 5: Sunday, Monday and Tuesday.

NEW SECTION

WAC 220-47-41200G GILL NET—WEEKLY PERIODS. Notwithstanding the provisions of WAC 220-47-412, effective October 5 through October 11, 1980, it shall be unlawful to take, fish for or possess salmon with gill net gear except during the weekly open periods hereinafter designated in the following Puget Sound Salmon Management and Catch Reporting Areas:

Areas 7 and 7A – Week beginning October 5: Sunday, Monday and Tuesday nights.

Area 7B – Week beginning October 5: Sunday, Monday, Tuesday, Wednesday and Thursday nights.

REPEALER

The following sections of the Washington Administrative Code are repealed effective October 5, 1980:

- WAC 220-47-31200C PURSE SEINE—WEEKLY PERIODS. (80-135)
 WAC 220-47-41200F GILL NET—WEEKLY PERIODS. (80-135)

WSR 80-15-010
ADOPTED RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Public Assistance)

[Order 1552—Filed October 6, 1980]

I, N. Spencer Hammond, Ex. Asst. of the Department of Social and Health Services do promulgate and adopt at Olympia, Washington, the annexed rules relating to:

- Amd WAC 388-15-170 General and seasonal day care services.
 Amd WAC 388-15-172 Day care participation.

This action is taken pursuant to Notice No. WSR 80-11-066 filed with the code reviser on August 20, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated under the general rule-making authority of the secretary of Department of Social and Health Services as authorized in RCW 74.08.090.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 2, 1980.

By N. S. Hammond
 Executive Assistant

AMENDATORY SECTION (Amending Order 1276, filed 3/2/78)

WAC 388-15-170 GENERAL AND SEASONAL DAY CARE SERVICES. (1) Day care services include providing care and protection and related services for a child under 15 years of age during that portion of the 24 hour day that neither of the child's parents are ((un- able)) able to provide necessary care and supervision for the following reasons:

(a) parent is employed or seeking employment in accord with an approved case plan,

(b) parent is enrolled in an approved Work Incentive Program (WIN) or refugee training program (not to exceed two years) leading toward employment,

(c) for school age parent to complete secondary education or attainment of G.E.D. (not to exceed two years), subject to approval by the department,

(d) for parent who is a resident of a federally recognized Indian reservation and is enrolled in an approved training program (not to exceed two years) leading to ward employment.

~~(e) for AFDC recipient to serve as a volunteer ((either)) on DSHS advisory board ((or to attain pre-employment skills, subject to approval by the department,~~

~~(e) for AFDC parent enrolled in a prevocational program subject to approval by the department)),~~

(f) parent to keep physical or mental health appointment,

(g) child in need of day care as part of children's protective service case plan,

(h) provided as child welfare services by a professional or other mental health social service agency referral for the child or parents physical/emotional health or support to the family structure.

(2) Goals for General Day Care Services shall be limited to those specified in WAC 388-15-010(1)(a), (b), (c). Also see WAC 388-15-010(2). Also see WAC 388-75-203 through 388-75-396.

(3) Child care including seasonal day care may be purchased for children or families who are:

(a) Individuals whose gross income is equal to or below 38 percent of the state median gross income for a family of four adjusted for family size. (See WAC 388-15-020(2)(d)).

(i) Exception: Residents on federally recognized Indian Reservations whose gross income is equal to or below 80% of the state median income for a family of four adjusted for family size, shall be eligible for general child day care services.

(b) In need of day care as an integral but subordinate part of a child protective service plan, regardless of the level of gross family income.

(4) Eligibility for Seasonal Day Care is:

(a) Both parents, or the single parent (in the case of the one-parent family) must be currently employed or seeking work in agriculturally related work or with agencies which serve migrant families; and

(b) Must derive at least 50% of its annual income from agriculturally related work; and

(c) must have more than one agricultural employer per year; and

(d) Must have a gross income for the past 12 months not to exceed 38% of the state median income adjusted for family size.

(5) Standards for in-home care

(a) In-home care is the care and supervision of a child in her or his own home by a relative or by an unrelated person during part of the 24-hour day while the child's parent(s) are temporarily absent from the home.

(b) When parents request in-home care, a service worker must determine that the caretaker meets the in-home care standards.

(c) Use of in-home care is appropriate when:

(i) There is a qualified caretaker available, and this type of child care is the parental choice,

(ii) The number of children in the family requiring child care is large enough to make it preferable for in-home care and/or,

(iii) A child's physical, mental or emotional problems make it necessary that he remain in his home.

(d) When in-home care is the approved child care plan for the child of a parent involved in basic education, job training, work experience, or other program which DSHS is responsible for arranging, approving or paying, the caretaker must meet the following minimum qualifications and fulfill the following responsibilities:

(i) Be eighteen years of age or older,

(ii) Be free of communicable disease, including tuberculosis, as shown by tests within the year, and every two years thereafter,

(iii) Be of sufficient physical, emotional and mental health to meet the needs of the children in care,

(iv) Subject to the discretion of the worker, give written evidence from a medical authority that he or she is in sufficient physical, emotional and mental health to be a safe caretaker,

(v) Produce written references indicating that she or he is capable of handling children of the ages for whom she or he will be caring and has the ability to provide activities suitable to their ages and interests.

(vi) Be able to work with children without recourse to physical punishment or psychological abuse,

(vii) Be able to accept and follow instructions,

(viii) Maintain personal cleanliness,

(ix) Be prompt and regular in job attendance,

(x) Expect to be evaluated on the above items.

(e) Responsibilities of in-home caretaker - in-home caretaker shall:

(i) Consider her or his primary function that of child care,

(ii) Provide constant care and supervision of the children for whom she or he is responsible throughout the time she or he is on duty in accordance with their needs,

(iii) Provide appropriate activities for children in care.

(6) Payment standards for day care: The rate of payment for day care shall be the prevailing community rate, not to exceed the maximum rate established by the department.

(a) When the parent or parent surrogate is responsible for in-home care, that person will receive payment for the cost of child care and will pay the in-home care provider according to the amount specified in the approved child care plan.

(b) The in-home care provider must sign a receipt at the time that payment is received. The parent/surrogate must send this receipt with his or her statement of child care provided during the previous month to the ESSO before the next child care payment shall be authorized.

(c) If total payments to an individual providing in-home care are expected to be \$50 or more in any one quarter, the employer's share of the FICA tax must be added to the amount authorized for in-home care.

(d) Payment for child care by relative: Unless the performance of child care services by a relative of the parent keeps the relative from accepting or continuing in paid employment, no payment shall be allowed for child care services for the following relatives: father, mother,

grandmother, grandfather, brother, sister, stepfather, stepmother, stepbrother, stepsister, uncle, aunt, first cousin, nephew or niece. Child care will be considered as in-home care when care is provided in the house of the relative.

(e) Payment for child care to nonresponsible relative: Where a child receiving AFDC is living with a nonresponsible relative not on AFDC and day care is required to support the relative's employment, the child is eligible for day care.

AMENDATORY SECTION (Amending Order 1306, filed 6/15/78)

WAC 388-15-172 DAY CARE PARTICIPATION. (1) The department will provide assistance for day care expenses of employed one and two parent families whose income exceeds 38% of the state median income adjusted for family size (SMIAFS), but does not exceed 52% SMIAFS. The parent(s) shall pay 50% of available income (income above 38% of SMIAFS) toward the cost of day care. The department shall pay the remainder not to exceed its established rate. Participation schedules are available at local offices of the department.

(2) Day care participation will ~~((only be authorized for the hours the parent(s) is employed))~~ be authorized for the hours of the work day and transit from the provider's facility to work and back. When one parent is employed and the other is in training, day care participation will only be authorized for the hours the working parent is employed and the other parent is in training.

WSR 80-15-011

ADOPTED RULES

BELLEVUE COMMUNITY COLLEGE

[Order 71, Resolution 131—Filed October 6, 1980]

Be it resolved by the board of trustees, of the Bellevue Community College, Community College District VIII, acting at 3000 Landerholm Circle S.E., Bellevue, WA 98007, that it does promulgate and adopt the annexed rules relating to student code of Community College District VIII, for the purpose of clarification of rules pertaining to the use of alcoholic beverages, WAC 132H-120-200.

This action is taken pursuant to Notice No. WSR 80-11-051 filed with the code reviser on August 19, 1980. Such rules shall take effect pursuant to RCW 28B.19.050(2).

This rule is promulgated under the general rule-making authority of the Bellevue Community College, Community College District VIII, as authorized in RCW 28B.50.140.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 1, 1980.

By Thomas E. O'Connell
Secretary, Board of Trustees

AMENDATORY SECTION (Amending order 57, filed 6-6-78)

WAC 132H-120-200 STUDENT RESPONSIBILITIES. Any student shall be subject to disciplinary action who either as a principal actor or aide or abettor: (1) Materially and substantially interferes with the personal rights or privileges of others or the educational process of the college;

(2) Violates any provisions of this chapter; or

(3) Commits any of the following acts which are hereby prohibited:

(a) Possessing or consuming any form of liquor or alcoholic beverage except as a participant of legal age in a student program, banquet or educational program which has the special written authorization of the college President or his designee.

(b) Procedural guidelines for liquor policy implementation are as follows:

(i) When approved by the President or his designee, alcoholic beverages may be served by a recognized student organization, college administrative unit or a community organization. Such groups must adhere to the stipulation of building use policies (WAC 132H-140) and fully meet all laws, rules and regulations as set forth in the Washington State Liquor Control Board regulations RCW 66.20.010, which permits consumption of spirits.

(ii) Approval for the serving of alcoholic beverages must be requested at least seven (7) calendar days prior to the date of use. A student organization request (Form 010-116 6-78) must be filed with the Office of the Dean for Student Services and Development. If, in the judgment of the Dean for Student Services and Development, the request is congruent with the best interests of the student group and the college, the Dean will forward the request to the President for final approval. All other request (Form 010-116 6-78) shall be filed with the Office of the President. The request shall be approved or denied at least three (3) calendar days prior to the proposed event. The application for utilization of alcoholic beverages must be completed by an authorized representative who accepts responsibility for compliance with the college and other governmental rules and regulations, where applicable, and agrees to be present at the function. The Associate Dean for Student Programs and Activities or designee shall be available at all student functions involving alcoholic beverages and is empowered to make decisions that might arise covering college policies or procedures.

(iii) Upon approval for the use of alcoholic beverages at Bellevue Community College, it shall be the responsibility of the sponsor to obtain all necessary licenses from the Washington State Liquor Control Board and to display such licenses at the time of the event.

(iv) Banquet events (sit-down dinners) are recognized as different in nature from student program events. At student program events, permission to serve alcoholic beverages shall be restricted to beer and light wine and

food appropriate for the event must be available. Banquet events shall be approved in accordance with Washington State Liquor Control Board regulations RCW 66.20.010 which permits the consumption of spirits.

(v) The matrix shall be set aside as the only location for the sale and/or consumption of beer and wine at student program-sponsored events.

(vi) A driver's license with picture or a Washington State Liquor Control Board identification card are the only acceptable identification sources in determining legal age.

(vii) The policing of identification cards shall be the responsibility of campus security if the function is a student program sponsored event.

(viii) No person who is under the influence of alcohol or dangerous substances or who is disorderly in conduct shall be allowed to serve, consume or dispense alcoholic beverages.

(ix) All sales and use of alcoholic beverages shall be governed by the Washington State Law as interpreted by the Washington State Liquor Control Board. The regulation shall be posted outside of the room where alcoholic beverages are consumed.

(x) No alcoholic beverages may be consumed outside the approved area for the event (building, room, etc.).

(xi) Non-alcoholic beverages shall be available to persons under the legal age at all events where alcoholic beverages are permitted.

(xii) No state monies shall be used to purchase any alcoholic beverages or to pay any license fees or related expense. All revenues generated by the sale of alcoholic beverages shall be processed in accordance with normal college policy and procedures.

(xiii) To insure variety in programming, the use of alcoholic beverages shall be approved for only a limited number of major collegewide activities.

(c) Using, possessing, selling or being under the influence of any narcotic drug as defined in RCW 69.50.101 now law or hereafter amended, or any dangerous drug as defined in RCW 69.50.308 as now law or hereafter amended, except when the use of possession of a drug is specifically prescribed as medication by an authorized medical doctor or dentist. For the purpose of this regulation, "sale" shall include the statutory meaning defined in RCW 29.04.005 as now law or hereafter amended.

(d) Entering any locked or otherwise closed college facility in any manner, at any time, without permission of the college employee or agent in charge thereof.

(e) Forgery, as defined in RCW 9.44.010 of any district record of instrument or tendering any forged record of instrument to any employee or agent of the district acting in his official capacity as such.

(f) Participation in an assembly which materially and substantially interferes with vehicular or pedestrian traffic, classes, hearing, meetings, the education and administrative functions of the college, or the private rights and privileges of others.

(g) Intentionally destroying or damaging any college facility or other public or private real or personal property.

(h) Failure to comply with directions of properly identified college officials acting in performance of their duties.

(i) Physical abuse of any person or conduct which is intended unlawfully to threaten imminent bodily harm or to endanger the health or safety of any person on college-owned or controlled property or at college-sponsored or supervised functions.

(j) Malicious damage to or malicious misuse of college property, or the property of any person where such property is located on the college campus.

(k) Possession or use of firearms, explosives, dangerous chemicals or other dangerous weapons or instrumentalities of the college campus, except for authorized college purposes or for law enforcement officers unless written approval has been obtained from the Dean for Student Services and Development; or any other person designated by the President.

(l) Engaging in lewd, indecent or obscene behavior on college-owned or controlled property or at college-sponsored or supervised functions.

(m) Falsely setting off or otherwise tampering with any emergency safety equipment, alarm or other device established for the safety of individuals and/or college facilities.

(n) Being under the influence of liquor or alcoholic beverages or narcotic drugs while on college property or while participating in any college program, class or event or while in attendance in any class or college-sponsored or supervised activity.

Reviser's Note: Errors of punctuation or spelling in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

Reviser's Note: The typographical errors in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

Reviser's Note: RCW 28B.19.077 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

WSR 80-15-012
EMERGENCY RULES
DEPARTMENT OF FISHERIES
[Order 80-145—Filed October 6, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is Case and Hammersley Inlet are closed to ensure escapements by local early-timing chum stocks. Henderson, Budd, Eld and Totten Inlets are closed to provide secondary protection of local coho stocks. An opportunity for selective harvest of chinook is

allowed in Budd Inlet. The Eld Inlet boundary line has been modified to one more easily recognized by tribal fishermen.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 6, 1980.

By Gordon Sandison
Director

NEW SECTION

WAC 220-28-013B0N CLOSED AREA. (1) *Effective immediately until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in:*

(a) *that portion of Puget Sound Salmon Management and Catch Reporting Area 13B westerly of a line projected from the flashing light (FL 4 sec) at Arcadia to Hungerford Point. (Hammersley Inlet).*

(b) *that portion of Puget Sound Salmon Management and Catch Reporting Area 13B northerly of a true east-west line projected through the southernmost point on Stretch Island and intersecting with the eastern and western shores of Case Inlet. (Case Inlet).*

(c) *that portion of Puget Sound Salmon Management and Catch Reporting Area 13B southerly of a line projected from Johnson Point to Dickinson Point. (Henderson Inlet).*

(d) *that portion of Puget Sound Salmon Management and Catch Reporting Area 13B southwesterly of a line projected true north from Cooper Point to the outermost point on the northeastern shore of Sanderson Harbor. (Eld Inlet).*

(e) *that portion of Puget Sound Salmon Management and Catch Reporting Area 13B southwesterly of a straight line projected from the flashing 4 second light at Arcadia through the southernmost point of Steamboat Island to Carlyon Beach. (Totten Inlet).*

(2) *Effective immediately until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with purse seine or gill net gear in that portion of Puget Sound Salmon Management and Catch Reporting Area 13B southerly of a line projected from Doffemeyer Point to Cooper Point. (Budd Inlet).*

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 220-28-013B0M CLOSED AREA. (80-140)

WSR 80-15-013
PROPOSED RULES
DEPARTMENT OF LICENSING
(Board of Registered Sanitarians)
[Filed October 7, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Washington State Board of Registered Sanitarians intends to adopt, amend, or repeal rules concerning the repeal of WAC 308-122-040 and 308-122-050 and readopting these rules under new sections WAC 308-170-040 and 308-170-050;

that such agency will at 10:00 a.m., Tuesday, November 25, 1980, in the Third Floor Conference Room, Highways-Licenses Building, Olympia, Washington, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 10:00 a.m., Tuesday, November 25, 1980, in the Third Floor Conference Room, Highways-Licenses Building, Olympia, Washington.

The authority under which these rules are proposed is RCW 18.90.020(2).

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to November 25, 1980, and/or orally at 10:00 a.m., Tuesday, November 25, 1980, Third Floor Conference Room, Highways-Licenses Building, Olympia, Washington.

Dated: October 3, 1980

By: Yvonne Braeme
Executive Secretary

STATEMENT OF PURPOSE

Title, Description Of Purpose And Statutory Authority For Rule:

Title: WAC 308-170-040 Application for registration—Process.

Description of Purpose: This section is merely a readoption of WAC 308-122-040 to place it in a separate chapter than the one it previously shared with rules relating to psychologists.

Statutory Authority: RCW 18.90.020(2).

Title: WAC 308-170-050 Registered sanitarians—Written examination.

Description of Purpose: Same as above.

Statutory Authority: RCW 18.90.020(2).

Summary Of Proposed Rule And Reasons Supporting Action:

Summary of Rule: WAC 308-170-040 provides cut-off dates for applications for written examinations.

WAC 308-170-050 lists the general subject matter of written examinations and provides for examination and scoring procedure.

Reason Supporting Action: Both WAC 308-170-040 and 308-170-050 are adopted as part of a new chapter 308-170 WAC. The identical language to these regulations was previously contained in chapter 308-122 WAC. The presence of the rules in that

chapter was confusing in that the majority of that chapter dealt with psychologists.

Agency Personnel Responsible For Drafting, Implementing And Enforcing The Rule: Yvonne Braeme, Executive Secretary, Third Floor, Highways-Licenses Bldg., Olympia, WA 98504, 234-0776 (SCAN) 753-0776 (COMM).

Name Of Person Or Organization Proposing The Rule: These rules were proposed by the Washington State Board of Registered Sanitarians.

Agency Comments: The intention of the Board in repealing WAC 308-122-040 and 308-122-050 and reenacting those regulations in a new chapter 308-170 WAC is to eliminate the confusion which had previously resulted from sanitarian regulations being placed in the same chapter as those of psychologists.

Neither WAC 308-170-040 nor 308-170-050 were made necessary as a result of federal law or federal or state court action.

Chapter 308-170

LICENSING OF REGISTERED SANITARIANS

WAC	
308-170-040	APPLICATION FOR REGISTRATION—PROCESS.
308-170-050	REGISTERED SANITARIANS—WRITTEN EXAMINATION.

NEW SECTION

WAC 308-170-040 APPLICATION FOR REGISTRATION—PROCESS. To be eligible to take any particular written examination, an applicant must file his or her application with the Department of Licensing not less than sixty days prior to the examination date. In the case of late filing, the time requirement for filing may be reduced if good cause for the late filing is shown and the application can still be processed prior to the examination date.

Examinations are normally held in August of each year.

NEW SECTION

WAC 308-170-050 REGISTERED SANITARIANS—WRITTEN EXAMINATION. Written examination requirements: The written examination that is used in the state of Washington is the examination for registration of sanitarians. The examination consists of approximately 200 objective multiple choice questions and covers the following subject matters:

1. Air and Water Quality Management
2. Liquid Waste Disposal
3. Solid Waste Disposal
4. Radiation
5. Noise
6. Land Use
7. Environmental Chemicals
8. Environmental Safety
9. Housing and Institutional Care
10. Population/Environmental Demands
11. Food Protection
12. Vector Controls
13. Administration

The applicant must satisfactorily pass the written examination acceptable to and approved for use by the board under the provisions of RCW 18.90.020. A passing score is 70 percent. Any applicant who fails to make a passing score on the examination shall be allowed to take the examination again, subject to the standard examination fee.

Written examinations shall be administered at least once a year at a location within the state as determined by the director.

A notification will be sent to each examination applicant at least fifteen days prior to each applicant's scheduled examination dates. Such notification will contain appropriate instructions or information and will reflect the time, date and location at which the applicant is to appear for examination. Should an applicant fail to appear for examination at the designated time and place, he shall forfeit the examination fee unless he has notified the Division of Professional Licensing of his inability to appear for the scheduled examination at least five days before the designated date.

REPEALER

The following sections of the Washington Administrative Code are each repealed:

WAC 308-122-040 APPLICATION FOR REGISTRATION—PROCESS.

WAC 308-122-050 REGISTERED SANITARIANS—WRITTEN EXAMINATION.

WSR 80-15-014

EMERGENCY RULES

DEPARTMENT OF GAME

[Order 113—Filed October 7, 1980]

Be it resolved by the undersigned, Jack Wayland, Interim Director, Washington State Department of Game, that I promulgate and adopt at Olympia, Washington, as emergency rule of this governing body, the annexed rule relating to Mt. St. Helens' area hunting, fishing and trapping closure effective October 11, 1980, WAC 232-28-002.

I, Jack Wayland, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to the public interest. A statement of facts constituting such emergency is the area described in WAC 232-28-002 is located in close proximity to Mt. St. Helens and in the past has received considerable damage from the volcanic eruptions of Mt. St. Helens. The Department of Game has not had time to totally evaluate the impact of the heavy ash fallout in this area. Rapid evacuation of the area in the event of additional major volcanic activities would be complicated by the presence of large numbers of people attracted to the area to take advantage of open hunting, fishing, and trapping seasons. Because of the above, it is necessary to close this area to hunting, fishing, and trapping. Such a closure will not result in an overescapement or surplus of game animals, game fish, game birds, or furbearing animals. This regulation shall become effective October 11, 1980. Such rule is therefore adopted as an emergency rule.

This rule is promulgated under the authority of the Director of Game as authorized in RCW 77.12.150 with the approval of the Game Commission as provided in that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), or the Administrative Procedures Act (chapter 34.04 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

This order, after being first recorded in the Order Register of this governing body, shall be forwarded to the Code Reviser for filing pursuant to chapter 34.04 RCW and chapter 1-12 WAC.

APPROVED AND ADOPTED October 6, 1980.

Jack S. Wayland
Interim Director

NEW SECTION

WAC 232-28-002 MT. ST. HELENS' AREA HUNTING, FISHING, AND TRAPPING CLOSURE EFFECTIVE OCTOBER 11, 1980. Notwithstanding the provisions of WAC 232-28-203, WAC 232-28-403, WAC 232-28-503, WAC 232-28-602, WAC 232-28-603, and WAC 232-28-802, it shall be unlawful for any person to take, hunt for, fish for, trap for, or possess any game animal, game fish, game bird, or furbearing animal in the Mt. St. Helens' area, described as follows:

From the intersection of the Lewis-Cowlitz County line and the West line of Range 2 East just north of Kid Valley, Cowlitz County; then north to the northwest corner of Section 19, Township 11 North, Range 2 East of Lewis County; then east to the northwest corner of Section 19, Township 11 North, Range 3 East; then north to the northwest corner of Section 18, Township 11 North, Range 3 East; then east along the section line to the intersection of the Gifford Pinchot National Forest proclaimed boundary at the southeast corner of Section 8, Township 11 North, Range 5 East then proceeding north and east along this boundary to the south bank of the Cowlitz River, east along the south bank of the Cowlitz River to the intersection of the proclaimed Gifford Pinchot National Forest boundary at the north section line of Section 12, Township 11 North, Range 5 East; then easterly following the proclaimed Gifford Pinchot National Forest boundary to the northwest corner of Section 19, Township 11 North, Range 7 East, then east along the north section line of Sections 19 and 20 to the south bank of the Cispus River at the north 1/4 corner of Section 20, Township 11 North, Range 7 East; then east and north along the south bank of the Cispus River to the private land boundary in Section 11, Township 11 North, Range 7 East; then south and east along private land boundary to the northeast 1/16 corner of Section 14, Township 11 North, Range 7 East; then south to the east 1/4 corner of Section 14, Township 11 North, Range 7 East; then due east to the east 1/4 corner of Section 13, Township 11 North, Range 7 East; then south along the section line to the northwest corner of Section 19, Township 11 North, Range 8 East; then due east along the north section line of Sections 19 and 20 to the east side of Road 112; then north along the east side of 112 to its junction with Road 123; then north and west along the eastern and northern side of Road 123 to its junction with the proclaimed boundary of the Gifford Pinchot National Forest in Section 27, Township 12 North, Range 7 East; then east and north along the proclaimed National Forest boundary to its intersection with an unnamed creek near the north 1/4 corner of Section 22, Township 12 North, Range 8 East; then south up this stream to

Pompey Peak; then south and east along Trail 128 to its junction with Road 120; then east along the south side of Road 120 to the junction with Trail 7 in Section 4, Township 11 North, Range 9 East; then north, south and east along Trail 7 to its junction with Road 1111 in Section 22, Township 11 North, Range 10 East; then west up the ridge to Elk Peak; then south along the ridge top down to the Cispus River in Northwest 1/4, Northwest 1/4, Section 10, Township 10 North, Range 10 East; then easterly up Midway Creek past Midway Guard Station to the boundary between the National Forest and Yakima Indian Reservation in Section 13, Township 10 North, Range 10 East; then south along this boundary to its intersection with the south section line in Section 20, Township 8 North, Range 11 East; then proceeding westerly along the south section line of Sections 20 and 19, Township 8 North, Range 11 East, and Sections 24, 23, 22, 21, 20, 19, Township 8 North, Range 10 East, and Section 24, Township 8 North, Range 9 East, to Forest Service Road No. N84; then north along the east side of this road to the junction with Road N85; then westerly along the north and west sides of this road to junction with Road N852; then westerly along the north side of Road N852 to the N88 road; then southerly along the west side of Road N88 to the junction with Road N604; then southerly along the west side of Road N604 to the junction with Road N627; then westerly and southerly along the west side of Road N627 to Dry Creek in Township 6 North, Range 8 East, Northeast 1/4 Section 35; then cross country in a southerly and westerly direction to the northerly end of Road N606 in Township 5 North, Range 8 East, Southwest 1/4 of Section 2; then southerly along the west side of Road N606 to the junction of N60, then along the north side of the N60 to the junction Road N605; then northerly along the east side of this road to the intersection of the east section line of Section 13, Township 5 North, Range 7 East; then west to Road N518 and down the north side of N518 to the Falls Creek Trail No. 152; then down the north side of this trail to the N505 road; then down the west side of Road N505 to the junction with Road N73 and Wind River; then westerly along the Wind River to Road N528, then along the north side of the summer home sites to the junction with the east section line of Section 25, Township 5 North, Range 6 East, then southerly along the east section lines of Sections 25 and 36, Township 5 North, Range 6 East, to the south side of the summer home sites in the Government Mineral Springs area, then easterly along the south boundary of the Government Mineral Springs summer home sites to Road No. N511 excluding these sites; then southerly along the west side of Road N511 to the junction of the N54; then westerly along the north side of Road N54 to the junction with Road N508; then westerly along Road N508 to the junction Road N63; then due westerly from this point north of Cougar Rock to Road N413; then westerly and southerly along the north and west sides of Road N413 to the junction of Road N503; then westerly along Road N503 to the junction with the crest of the Tatoosh Hills, then westerly from the junction of Road N503 and the crest of the Tatoosh Hills to the summit of Gumboot Mountain,

then westerly along the ridge line from Gumboot Mountain to the west Forest boundary; then north along the Forest boundary to southeast corner of Section 36, Township 5 North, Range 4 East; then west to the southwest corner of Section 33, Township 5 North, Range 4 East; then north to the intersection of the high water line of the Yale Dam Reservoir and the section line dividing Sections 32 and 33, Township 6 North, Range 4 East; then northeasterly along the high water line on the east side of the Yale Dam Reservoir, to its intersection with the south line of Section 9, Township 6 North, Range 4 East; then west to the southwest corner of Section 7, Township 6 North, Range 2 East; then north along the west line of Range 2 East to the northwest corner of Section 18, Township 10 North, Range 2 East; then east to the northwest corner of Section 17, Township 10 North, Range 2 East; then north to the northwest corner of Section 5, Township 10 North, Range 2 East; then west along section line to the point of beginning.

This regulation shall become effective October 11, 1980.

Reviser's Note: The typographical errors in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

WSR 80-15-015
EMERGENCY RULES
DEPARTMENT OF GAME
[Order 114—Filed October 7, 1980]

Be it resolved by the undersigned, Jack Wayland, Interim Director, Washington State Department of Game, that I promulgate and adopt at Olympia, Washington, as emergency rule of this governing body, the annexed rule relating to establishing open fishing seasons on the Snake River, Tucannon River, and Grande Ronde River to angling for steelhead, WAC 232-28-60209.

I, Jack Wayland, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to the public interest. A statement of the facts constituting such emergency is runs of steelhead entering and migrating into the Snake River system and tributaries in the State of Washington have improved in numbers to where harvest seasons and catch and release seasons can be established to harvest surplus fish in the Snake River and Tucannon River. Such an opening will not result in an underescapement or in damage to the steelhead runs in the Snake River system. This regulation shall become effective October 7, 1980.

Such rule is therefore adopted as an emergency rule.

This rule is promulgated under the authority of the Director of Game as authorized in RCW 77.12.150 with the approval of the Game Commission as provided in that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act

(chapter 42.30 RCW), or the Administrative Procedures Act (chapter 34.04 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

This order, after being first recorded in the Order Register of this governing body, shall be forwarded to the Code Reviser for filing pursuant to chapter 34.04 RCW and chapter 1-12 WAC.

APPROVED AND ADOPTED October 6, 1980.

Jack S. Wayland
Interim Director

NEW SECTION

WAC 232-28-60209 ESTABLISH OPEN FISHING SEASONS ON THE SNAKE RIVER, TUCANNON RIVER, AND GRANDE RONDE RIVER TO ANGLING FOR STEELHEAD. Notwithstanding the provisions of WAC 232-28-602, it shall be lawful for any sport fishermen to take, fish for, or possess steelhead in the Snake River system provided that these activities occur under the following provisions.

Snake River - from mouth to Three Mile Inn

Season Dates: October 7, 1980
to December 31, 1980
Daily Catch Limit: One (1) steelhead
over 20 inches in length
Possession Limit: Two (2) steelhead
over 20 inches in length
Season Limit: Four (4) steelhead
over 20 inches in length

Snake River - from Three Mile Inn upstream to Washington State line

Season Dates: October 7, 1980
to December 31, 1980

Special Provisions: **Catch and Release Fishery**
1. All steelhead over 20 inches in length must be released
2. Single pointed barbless hooks only
3. Only artificial flies or lures allowed
4. Bait including artificial fish eggs unlawful

Tucannon River

Season Dates: October 7, 1980
to December 31, 1980
Daily Catch Limit: One (1) steelhead
over 20 inches in length
Possession Limit: Two (2) steelhead
over 20 inches in length
Season Limit: Four (4) steelhead
over 20 inches in length

Grande Ronde River - from mouth to Washington-Oregon State line

Season Dates: October 7, 1980
to December 31, 1980

Special Provisions: **Catch and Release Fishery**
1. In the Grande Ronde River downstream from the steel bridge, all steelhead over 20 inches in length must be released
2. In the Grande Ronde River upstream from the steel bridge, all game fish including steelhead must be released
3. Single pointed barbless hooks only
4. Only artificial flies or lures allowed
5. Bait including artificial fish eggs unlawful

This regulation shall become effective October 7, 1980.

WSR 80-15-016
EMERGENCY RULES
DEPARTMENT OF GAME
[Order 115—Filed October 7, 1980]

Be it resolved by the undersigned, Jack Wayland, Interim Director, Washington State Department of Game, that I promulgate and repeal at Olympia, Washington, as emergency rule of this governing body, the annexed rule steelhead closure on the Columbia River, WAC 232-28-60207.

I, Jack Wayland, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to the public interest. A statement of the facts constituting such emergency is: Steelhead returns passing through the Columbia River to the Snake River drainage have improved in numbers to where harvest seasons can be established. Such an opening will not result in an underescapement or in damage to the steelhead runs. This regulation shall become effective October 7, 1980.

Such rule is therefore repealed as an emergency rule.

This rule is promulgated under the authority of the Director of Game as authorized in RCW 77.12.150 with the approval of the Game Commission as provided in that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), or the Administrative Procedure Act (chapter 34.04 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

This order, after being first recorded in the Order Register of this governing body, shall be forwarded to the Code Reviser for filing pursuant to chapter 34.04 RCW and chapter 1-12 WAC.

APPROVED AND ADOPTED October 6, 1980.
Jack S. Wayland
Interim Director

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 232-28-60207 **STEELHEAD CLOSURE ON THE COLUMBIA RIVER**

WSR 80-15-017
EMERGENCY RULES
DEPARTMENT OF GAME
[Order 116—Filed October 7, 1980]

Be it resolved by the undersigned, Jack Wayland, Interim Director, Washington State Department of Game,

that I promulgate and adopt at Olympia, Washington, as emergency rule of this governing body, the annexed rule relating to closure of the Toutle River including all tributary streams and Spirit Lake to the taking of all game fish, WAC 232-28-60204.

I, Jack Wayland, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to the public interest. A statement of the facts constituting such emergency is a major eruption of Mt. St. Helens occurred on May 18, 1980 resulting in a total loss of game fish in the Toutle River and North and South Forks of the Toutle River system. Several tributary streams have limited game fish populations that need to be preserved to help restore the future game fish populations within the Toutle River system. Such a closure will not result in an overescapement or surplus of game fish.

Such rule is therefore adopted as an emergency rule.

This rule is promulgated under the authority of the Director of Game as authorized in RCW 77.12.150 with the approval of the Game Commission as provided in that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), or the Administrative Procedures Act (chapter 34.04 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

This order, after being first recorded in the Order Register of this governing body, shall be forwarded to the Code Reviser for filing pursuant to chapter 34.04 RCW and chapter 1-12 WAC.

APPROVED AND ADOPTED October 6, 1980.
Jack S. Wayland
Interim Director

NEW SECTION

WAC 232-28-60204 CLOSURE OF THE TOUTLE RIVER INCLUDING ALL TRIBUTARY STREAMS AND SPIRIT LAKE TO THE TAKING OF ALL GAME FISH. *Notwithstanding the provisions of WAC 232-28-602, it shall be unlawful for any sports fishermen to take, fish for, or possess game fish in the Toutle River including all tributary streams and Spirit Lake.*

WSR 80-15-018
EMERGENCY RULES
DEPARTMENT OF FISHERIES
[Order 80-146—Filed October 7, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that

observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is coho allocation needs have been met. The need to protect chinook salmon milling near Dewatto Bay and Hoodspout Hatchery remains.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 7, 1980.

By Gordon Sandison
Director

NEW SECTION

WAC 220-28-01200P CLOSED AREA. Effective October 9 through October 18, 1980, it shall be unlawful for treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in Puget Sound Salmon Management and Catch Reporting Area 12.

NEW SECTION

WAC 220-28-012B01 CLOSED AREA. Effective October 9 through October 18, 1980, it shall be unlawful for treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in Puget Sound Salmon Management and Catch Reporting Area 12 B.

NEW SECTION

WAC 220-28-012C0U CLOSED AREA. Effective October 9 through October 18, 1980, it shall be unlawful for treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in Puget Sound Salmon Management and Catch Reporting Area 12C.

NEW SECTION

WAC 220-28-012D0N CLOSED AREA. Effective October 9 through October 18, 1980, it shall be unlawful for treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in Puget Sound Salmon Management and Catch Reporting Area 12D.

NEW SECTION

WAC 220-28-012F0F CLOSED AREA. Effective October 9, 1980 until further notice, it shall be unlawful for treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear from the waters of the Skokomish River.

REPEALER

The following sections of the Washington Administrative Code are repealed effective October 9, 1980:

WAC 220-28-012COT CLOSED AREAS. (80-61)

WAC 220-28-012D0M CLOSED AREA. (80-61)

WSR 80-15-019

NOTICE OF PUBLIC MEETINGS URBAN ARTERIAL BOARD

[Memorandum—October 7, 1980]

Beginning at 9:30 a.m., Thursday, October 16, 1980

1. Minutes from UAB meeting on July 17, 1980
2. Report of chairman
 - a. UATF expenditure report
 - b. Review audit procedure for Series II projects
- 1:30 p.m. 3. Continuation of UAB hearing held July 17, 1980 on changes to WAC #479-16-015, Registered Engineer.
- 2:30 p.m. 4. Presentation on formula that determines Washington State Fuel Tax.
5. Apportionment of Urban Arterial Trust Funds between statutorily established regions for the third quarter 1980.
6. Allocation of Urban Arterial Trust Funds to authorized projects for the fourth quarter 1980.
7. Review estimated cash requirements for the period through June 1981.
8. Proposed authorization of trust funds for construction of previously approved projects.
9. Report on audits of completed UAB projects.
10. Review delayed projects and proposed new schedules.
11. Reports on increases in Urban Arterial Trust Funds approved by the chairman.

WSR 80-15-020

ADOPTED RULES DEPARTMENT OF ECOLOGY

[Order DE 80-33—Filed October 7, 1980]

I, Elmer C. Vogel, deputy director of the Department of Ecology, do promulgate and adopt at the Department of Ecology, Lacey, Washington, the annexed rules relating to tax exemptions and credits for pollution control facilities, amending chapter 173-24 WAC.

This action is taken pursuant to Notice Nos. WSR 80-08-085 and 80-12-036 filed with the code reviser on 7/2/80 and 8/29/80. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated pursuant to RCW 43.21A-.080 and 43.21A.090 and chapter 82.34 RCW and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure

Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 7, 1980.

By Elmer C. Vogel
Deputy Director

AMENDATORY SECTION (Amending Order DE 70-7, filed 8/4/71)

WAC 173-24-090 INSTALLATION FOR THE PURPOSE OF POLLUTION CONTROL. A facility will be considered to be installed or intended to be installed for the primary purpose of pollution control when:

(1) It was installed or intended to be installed in response to a requirement of the department or a regional or local air pollution control authority contained in a permit, order, or regulation which applies to the particular industry or commercial establishment is question, and such facility meets or exceeds the requirements of such permit, order, or regulation ~~((, or,)) and~~

~~((2) It was installed or intended to be installed to meet the requirements of generally applicable air or water pollution control standards or regulations promulgated by federal, state, or regional agencies, and does in fact meet or exceed all such applicable standards, or,~~

~~(3) It was installed or intended to be installed to achieve the best known, available, and reasonable means of preventing and controlling air and water pollution and meets or exceeds all federal, state, and regional requirements applicable to the facility in question)).~~

(2) It was installed pursuant to a requirement developed under chapter 90.48 RCW or 70.94 RCW and not under some other statute administered by the department such as, for example, chapter 70.95 or 70.105 RCW.

Reviser's Note: The typographical errors in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

NEW SECTION

WAC 173-24-125 REVISION OF PRIOR FINDINGS. On its own initiative or on compliant of the local or regional air pollution control agency in which an air pollution control facility is located, the department may revise the prior findings of the appropriate control agency whenever it appears that any of the conditions listed in RCW 82.34.100 (1) or (2) have been met or when the department determines that the prior determination had been made in error.

**WSR 80-15-021
EMERGENCY RULES
DEPARTMENT OF ECOLOGY
[Order DE 80-43—Filed October 7, 1980]**

I, John F. Spencer, director of the Department of Ecology, do promulgate and adopt at the Department of

Ecology, Lacey, Washington, the annexed rules relating to NPDES Delegation, amending WAC 173-06-060.

I, John F. Spencer, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is due to the illness of Elmer C. Vogel, Emergency Order DE 80-39 was filed September 5, 1980, delegating to John F. Spencer the responsibility for this state's administration of the National Pollutant Discharge Elimination System (NPDES) of the Federal Water Pollution Control Act, as amended. Elmer C. Vogel is now able to resume that responsibility and, therefore, this Emergency Order amends the prior Emergency Order so that WAC 173-06-060 now reads the same as the permanent rule.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 43.21A-.090 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 7, 1980.

By John F. Spencer
Acting Director

AMENDATORY SECTION (Amending Emergency Order DE 80-39, filed 9/5/80)

WAC 173-06-060 NPDES DELEGATION. The sole and complete responsibility for the administration of the National Pollutant Discharge Elimination System permit program is delegated by the director to ~~((John F. Spencer))~~ Elmer C. Vogel, the deputy director.

**WSR 80-15-022
PROPOSED RULES
DEPARTMENT OF ECOLOGY
[Filed October 7, 1980]**

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Ecology, intends to adopt, amend, or repeal rules concerning San Juan County, amending WAC 173-19-360;

and that the adoption, amendment, or repeal of such rules will take place at 2:00 p.m., Monday, November 3, 1980, in the Hearings Room, Department of Ecology, Air and Land Offices, Rowsix, Building 4, 4224 6th Avenue S.E., Lacey, WA.

The authority under which these rules are proposed is RCW 90.58.120 and 90.58.200.

This notice is connected to and continues the matter noticed in Notice Nos. WSR 80-10-057 and 80-14-040

filed with the code reviser's office on 8/6/80 and 9/30/80.

Dated: October 2, 1980
By: John F. Spencer
Acting Director

WSR 80-15-023

ADOPTED RULES

DEPARTMENT OF ECOLOGY

[Order DE 80-40—Filed October 7, 1980]

I, John F. Spencer, acting director of the Department of Ecology, do promulgate and adopt at the Department of Ecology, Lacey, Washington, the annexed rules relating to Lewis County, amending WAC 173-19-290.

This action is taken pursuant to Notice Nos. WSR 80-09-097 and 80-13-029 filed with the code reviser on 7/23/80 and 9/10/80. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated pursuant to RCW 90.58.120 and 90.58.200 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 2, 1980.

By John F. Spencer
Acting Director

AMENDATORY SECTION (Amending Order DE 79-34, filed 1/30/80)

WAC 173-19-290 LEWIS COUNTY. Lewis County master program approved November 1, 1974. Revision approved January 16, 1978. Revision approved September 24, 1979. Revision approved October 2, 1980.

WSR 80-15-024

EMERGENCY RULES

**DEPARTMENT OF
LABOR AND INDUSTRIES**

[Order 80-19—Filed October 8, 1980]

I, James T. Hughes, director of the Department of Labor and Industries, do promulgate and adopt at the Director's office, the annexed rules relating to safety standards for commercial diving operations, chapter 296-37 WAC.

I, James T. Hughes, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity

to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is to implement Federal Regulations 29 CFR 1910.401 and 1910.424.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 34.04.030, 34.04.040 and 49.17.050 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 8, 1980.

By James T. Hughes
Director

AMENDATORY SECTION (Amending Order 78-18, filed 10/2/78)

WAC 296-37-510 SCOPE AND APPLICATION.

(1) *The requirements included in this vertical chapter shall apply throughout the state wherever commercial diving takes place within the jurisdiction of the Department of Labor and Industries. These requirements shall also be applicable to those diving related and supportive work activities not at the diving site but which have a direct effect on the safety of the diving operations. Examples may include but are not limited to: The supply of breathing air or gas; the supply of materials, equipment or supplies required by this chapter; the maintenance of diving equipment.*

(2) *This standard applies to diving and related support operations conducted in connection with all types of work and employments, including general industry, construction, ship repairing, shipbuilding, shipbreaking and longshoring. However, this standard does not apply to any diving operation:*

(a) *Performed solely for instructional purposes, using open-circuit, compressed-air SCUBA and conducted within the no-decompression limits; or*

(b) *Performed solely for search, rescue, or related public safety purposes by or under the control of a governmental agency; or*

(c) *Performed by noncommercial divers whose exposures may be of an entirely different type and whose operations are approved by the Department of Labor and Industries; or*

(d) *Governed by 45 C.F.R. Part 46 (Protection of Human Subjects, U.S. Department of Health, Education, and Welfare) or equivalent rules or regulations established by another federal agency, which regulate research, development, or related purposes involving human subjects.*

(3) *This chapter shall augment the requirements of the General Safety and Health Standard, chapter 296-24 WAC and the General Occupational Health Standard, chapter 296-62 WAC. In instances where this chapter is in direct conflict with the requirements of any*

general horizontal standard, the requirements of this chapter shall apply.

(4) Hoisting gear used in diving operations shall be inspected and certified as required by chapter 296-56 WAC, Safety Standards for Longshore, Stevedore and Related Waterfront Operations.

(5) Application in emergencies. ~~((a))~~ An employer may deviate from the requirements of this standard to the extent necessary to prevent or minimize a situation which is likely to cause death, serious physical harm, or major environmental damage, provided that the employer:

~~((i))~~ (a) Notifies the Assistant Director of the Department of Labor and Industries in Olympia or the Chief Safety Inspector for the Region within 48 hours of the onset of the emergency situation indicating the nature of the emergency and extent of the deviation from the prescribed regulations; and

~~((ii))~~ (b) Upon request from the authority notified, submits such information in writing.

(6) Employer obligation. ~~((a))~~ The employer shall be responsible for compliance with:

~~((i))~~ (a) All provisions of this standard of general applicability; and

~~((ii))~~ (b) All requirements pertaining to specific diving modes to the extent diving operations in such modes are conducted.

AMENDATORY SECTION (Amending Order 78-18, filed 10/2/78)

WAC 296-37-550 SCUBA DIVING. (1) General. Employers engaged in SCUBA diving shall comply with the following requirements, unless otherwise specified.

(2) Limits. SCUBA diving shall not be conducted:

(a) At depths deeper than 130 fsw;

(b) At depths deeper than 100 fsw or outside the no-decompression limits unless a decompression chamber is ready for use;

(c) Against currents exceeding one knot unless line-tended; or

(d) In enclosed or physically confining spaces unless line-tended.

(3) Procedures.

(a) A standby diver shall be available while a diver is in the water.

(b) A diver shall be line-tended from the surface, or accompanied by another diver in the water in continuous visual contact during the diving operation.

(c) A diver shall be stationed at the underwater point of entry when diving is conducted in enclosed or physically confining spaces and shall have positive means of communication with the diver or divers within the space.

(d) A diver-carried reserve breathing gas supply shall be provided for each diver consisting of:

(i) A manual reserve (J valve); or

(ii) An independent reserve cylinder with a separate regulator or connected to the underwater breathing apparatus.

(e) The valve of the reserve breathing gas supply shall be in the closed position prior to the dive.

WSR 80-15-025

ADOPTED RULES

**SUPERINTENDENT OF
PUBLIC INSTRUCTION**

[Order 80-36—Filed October 8, 1980]

I, Frank B. Brouillet, Superintendent of Public Instruction, do promulgate and adopt at Olympia, the annexed rules relating to the computation of the state basic education allocation entitlement of school districts for the 1979-80 and subsequent school years, including the local school district revenues to be deducted in the computation of such entitlement to state funds.

This action is taken pursuant to Notice No. WSR 80-12-056 filed with the code reviser on September 3, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated pursuant to RCW 28A.41.130(4) and is intended to administratively implement that statute.

This rule is promulgated pursuant to RCW 28A.41.170 which directs that the Superintendent of Public Instruction has authority to implement the provisions of chapter 28A.41 RCW.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 8, 1980.

By Frank B. Brouillet
Superintendent of Public Instruction

AMENDATORY SECTION (Amending Order 80-29, filed 7/28/80)

WAC 392-121-175 BASIC EDUCATION ALLOCATION—DEDUCTIBLE REVENUES. In addition to those funds appropriated by the legislature for basic education allocation purposes, the deductible revenues expressly identified in RCW 28A.41.130 and the following deductible general fund revenues shall be included in the computation of the total annual basic education allocation of each school district pursuant to RCW 28A.41.130 and 28A.41.140:

(1) Proceeds from the sale of tax title real property managed by a county or of property rights appurtenant thereto;

(2) Proceeds from the sale, rental or lease of stone, minerals, timber, forest products, other crops and matter, and improvements from or on tax title real property managed by a county;

(3) State forest funds;

(4) Proceeds from the state timber excise tax reserve fund; ~~((and))~~

(5) Federal in-lieu-of tax payments; and

(6) County in-lieu-of tax payments: PROVIDED, That otherwise deductible revenues from any of the foregoing sources received by a school district during the 1979-80 school year and any school year thereafter due solely to the district's levy of a building fund or bond

interest and redemption fund excess tax levy shall constitute nongeneral fund revenues and shall not be deducted in the computation of the district's annual basic education allocation for that school year.

WSR 80-15-026
ADOPTED RULES
HIGHER EDUCATION
PERSONNEL BOARD
 [Order 85—Filed October 8, 1980]

Be it resolved by the Higher Education Personnel Board, acting at Intercollegiate Center for Nursing Education, Spokane, Washington, that it does promulgate and adopt the annexed rules relating to:

Rep WAC 251-12-095 Appeals—Limitations.
 Amd WAC 251-14-090 Unfair labor practice—Hearings.
 New WAC 251-14-120 Requests for mediation and arbitration.

This action is taken pursuant to Notice No. WSR 80-10-049 filed with the code reviser on August 6, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated under the general rule-making authority of the Higher Education Personnel Board as authorized in RCW 28B.16.100.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED September 18, 1980.

By Douglas E. Sayan
 Director

REPEALER

The following section of the Washington Administrative Code is hereby repealed:

WAC 251-12-095 APPEALS—LIMITATIONS.

AMENDATORY SECTION (Amending Order 61, filed 8/30/77)

WAC 251-14-090 UNFAIR LABOR PRACTICE—HEARINGS. Complaints charging unfair labor practices shall be filed in writing with the board. (~~The complaints shall not be processed per WAC 251-14-080 if the same charges have been filed for hearing either through the grievance or appeal procedures of the higher education personnel board rules.~~) The board shall hold a hearing in the same manner as provided for appeals from demotions, suspensions, reductions, layoffs, and dismissals, and any decision of the board shall be binding unless reversed or modified by a court of law.

NEW SECTION

WAC 251-14-120 REQUESTS FOR MEDIATION AND ARBITRATION. Mediation and arbitration requests per WAC 251-14-100(2) and 251-14-110(2) shall not be allowed if the same charges are pending before the board for processing per WAC 251-12-090 or 251-14-090.

WSR 80-15-027
ADOPTED RULES
JAIL COMMISSION
 [Order 8—Filed October 8, 1980]

Be it resolved by the Washington State Jail Commission, acting at Bellingham, Washington, that it does promulgate and adopt the annexed rules relating to appeals from funding decisions.

This action is taken pursuant to Notice No. WSR 80-10-038 filed with the code reviser on August 5, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated pursuant to chapter 70.48 RCW and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED September 18, 1980.

By George Edensword-Breck
 Director

NEW SECTION

WAC 289-13-105 APPEALS FROM FUNDING DECISIONS. (1) Any applicant governing unit which is aggrieved by the funding decision contained in the written notice provided to it under WAC 289-13-100 may request reconsideration of such decision by filing a written request therefor with the director within fourteen days of its receipt of such notice. Such reconsideration shall constitute an "appeal" from such decision within the meaning of RCW 70.48.060(3)(v) and shall be conducted in accordance with the provisions of this rule: PROVIDED, That reconsideration of any commission funding decision under the provisions of this rule does not constitute a "contested case" within the meaning of RCW 34.04.010(3) or for purposes of the procedures set forth within chapter 34.04 RCW.

(2) Review of any request for reconsideration by the commission will be reviewed by the commission on the basis of written submissions. Any request shall contain a detailed statement as to any new factual matters regarding the decision on the application which have not previously been submitted to the commission and any argument as to the correctness of the decision under the applicable statutes and commission rules. The chairman shall call a meeting of the commission to occur within

fourteen days of the receipt of such request and the director shall notify the applicant and commission of such time at least five days prior thereto, sending each member of the commission a copy of the request. All other applicants shall be provided a written notice of any such proceeding and may submit a written statement with regard thereto.

(3) Commission action on reconsideration shall occur at the public meeting scheduled therefor and will be based entirely upon any written submissions received; additional oral argument will not be received. The commission decision on any request for reconsideration at such meeting will be reduced to written form by the director, and a notice thereof signed by the commission chairman shall be mailed by registered mail with return receipt requested to the governing unit in question. Such notice shall constitute a final funding decision by the commission subject only to such statutory review as would apply to any funding action.

WSR 80-15-028
PROPOSED RULES
ENERGY OFFICE
[Filed October 8, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025 and 34.04.040(2), that the Washington State Energy Office intends to adopt, amend, or repeal rules concerning expanding the definition of "Passenger Transportation Services" to include Fleetpools, WAC 194-14-030;

that such agency will at 9:30 a.m., Tuesday, November 25, 1980, in the Conference Room of the Washington State Energy Office, 400 East Union, Olympia, WA 98504, conduct a hearing relative thereto; and that the adoption, amendment, or repeal of such rules will take place at 3:00 p.m., Tuesday, December 2, 1980, in the Washington State Energy Office.

The authority under which these rules are proposed is RCW 43.21F.050(12).

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to November 25, 1980, and/or orally at 9:30 a.m., Tuesday, November 25, 1980, Washington State Energy Office, 400 East Union, 1st Floor, Olympia, WA 98504.

Dated: October 8, 1980

By: Jack O. Wood
Director

STATEMENT OF PURPOSE

Title: Amendment to WAC 194-14-030, Definitions

Description of purpose: To expand the definition of "Passenger Transportation Services" to include "Fleetpools"

Statutory authority: RCW 43.21F.050(12)

Summary of Rule: Amendment the definition of passenger transportation to include fleetpools. Fleetpools are public and private motor fleets (five or more vehicles) regularly

used by employees in carpool commuting. The amendment will allow such fleets to be considered priority vehicles for purpose of allocating state set-aside fuel.

Reasons supporting proposed action: Fleetpooling encourages fuel efficiency. By making fleetpools priority recipients of state set-aside, the State Energy Office can offer reasonable assurance of available fuel to fuel efficient operations during times of fuel shortages, hardships or emergencies. The amendment will assist the State Energy Office to promote ridesharing options on the part of local governments and private employers.

Agency personnel responsible for:

Drafting: Dan Silver, Washington State Energy Office, 400 E. Union, Mail Stop ER-11, Olympia, WA 98504, (206) 754-0726

Implementation and Enforcement: Ed Miller, Washington State Energy Office, Fuel Allocation Officer, 400 E. Union, Mail Stop ER-11, Olympia, WA 98504, (206) 754-1359

Organization proposing rule: Washington State Energy Office (governmental)

Agency comments and recommendations:

The agency supports the rule change. Implementation and enforcement procedures are presently established in the operation of the state set-aside program and should present no problems. The agency foresees no fiscal impact of this rule.

The rule is not a result of federal law or federal or state court action.

AMENDATORY SECTION (Amending Order 79-1, filed 8/30/79)

WAC 194-14-030 DEFINITIONS. The following words and terms have the following meanings for the purposes of this chapter, unless otherwise indicated:

(1) "Agricultural production" means all the activities classified under the industry code numbers specified in paragraph (a) below as set forth in the Standard Industrial Classification Manual, 1972 edition, except those industry code numbers listed in paragraph (b) which are excluded:

(a) Activities included.

(i) All industry code numbers included in Division A, agriculture, forestry and fishing, except as specified in paragraph (b) of this section.

(ii) All industry code numbers included in Major Group 20, food and kindred products, of Division D, as specified in paragraph (b) below; and

(iii) All the following other industry code numbers:

- 1474 Potash, soda and borate minerals (potash mining only);
- 1475 Phosphate rock;
- 2141 Tobacco stemming and redrying;
- 2411 Logging camps and logging contractors;
- 2421 Sawmills and planing mills;
- 2819 Industrial inorganic chemicals, not elsewhere classified (dicalcium phosphate only);
- 2873 Nitrogenous fertilizers;
- 2874 Phosphatic fertilizers;
- 2875 Fertilizers, mixing only;
- 2879 Pesticides and agricultural chemicals not elsewhere classified;
- 4212 Local trucking without storage (farm to market hauling and log trucking only);
- 4971 Irrigation systems (for farm use); and
- 5462 Retail bakeries, baking and selling.

(b) Activities excluded.

(i) All the following industry code numbers, otherwise listed under Division A, agriculture, forestry and fishing, are excluded from the definition:

- 0271 Fur-bearing animals and rabbits (except rabbit farms which are included in the definition);
 0279 Animal specialties, not elsewhere classified (except apiaries; honey production and bee, catfish, fish, frog and trout farms which are included in the definition);
 1742 Veterinary services for animal specialties;
 0752 Animal specialty services;
 0781 Landscape counseling and planning;
 9782 Lawn and garden services; and
 0949 Gathering of forest products, not elsewhere classified.

(ii) All the following industry code numbers, otherwise listed under Major Group 20, food and kindred products, of Division D, manufacturing, are excluded from the definition:

- 2047 Dog, cat and other pet food;
 2067 Chewing gum; and
 2085 Distilled, rectified and blended liquors.

Generally, an applicant may be considered as an agricultural producer if he derives the majority of his income from that activity.

(2) Assignment: An action designating that an authorized purchaser be supplied at a specified entitlement level by a specified supplier.

(3) Base period (or base allocation period):

(a) For gasoline means the month of the period November, 1977, through October, 1978, corresponding to the current month;

(b) For middle distillates means the month during calendar year 1978 corresponding to the current month.

(4) Base period supply volume: The volume of purchases from a supplier or to purchasers during the base period.

(5) "Bulk purchaser" means any firm which is an ultimate consumer which, as part of its normal business practices, purchases or obtains middle distillates or motor gasoline from a supplier and either (a) receives delivery of that product into a storage tank substantially under the control of that firm at a fixed location, or (b) with respect to use in agricultural production, receives delivery into a storage tank with a capacity not less than 50 gallons substantially under the control of that firm. A bulk purchaser of heating oil would include any firm or individual needing the product for space heating and has a storage tank substantially under the control of that firm or individual at a fixed location.

(6) Coordinator: The director or his designee who is authorized to sign orders and authorizing documents for permanent assignments.

(7) Current requirements: The supply of an allocated product needed by an end-user or wholesale purchaser to meet its present supply requirement for any single month.

~~((+8))~~ (8) Director: The director of the Washington state energy office.

(9) Emergency or severe hardship: A situation which, in the opinion of the office, represents a threat or foreseeable danger to the health, safety and well being of the citizens of the state.

(10) Emergency Petroleum Allocation Act: Public Law 93-159.

(11) Emergency services: Law enforcement, fire fighting, and emergency medical services.

(12) End-user: Any person who is an ultimate consumer of an allocated product other than a wholesale purchaser-consumer and is also a bulk purchaser.

(13) Energy production: The exploration, drilling, mining, refining, processing, production and distribution of coal, natural gas, geothermal energy, petroleum or petroleum products, shale oil, nuclear fuels and electrical energy. It also includes the construction of facilities and equipment used in energy production, such as pipelines, mining equipment and similar capital goods. Excluded from this definition are synthetic natural gas manufacturing, electrical generation whose power source is petroleum based, gasoline blending and manufacturing and refinery fuel use.

(14) Fleetpool: A government or private motor pool which is used during nonwork hours for commuter ridesharing purposes. To qualify as a fleetpool, these general guidelines must be observed:

(a) The motor pool must have a fleet of five or more passenger vehicles;

(b) The principle use of the vehicles must be for the regular business of the firm, other than commuting;

(c) During nonwork hours, the vehicles may not be used for private errands, other than commuting;

(d) The government or business entity must enact a formal agreement with the employees consistent with the terms of this regulation; and

(e) During the commute each such vehicle must be shared on a regular basis by three or more persons.

(15) Market area: The delineation of the market area will vary in each case, and ultimately will be determined by the office. There can be no hard and fast criteria, but some general guidelines may be observed:

(a) In a city of 25,000 population, the market area to be considered should be the area within a one-mile radius of the applicant or affected party.

(b) In a suburban area (housing developments, shopping centers, apartments) the market area to be considered should be the area within a two-to-three mile radius of the applicant or affected party, depending upon the density of recent growth and traffic pattern characteristics in the area.

(c) On a nonurban arterial highway with full control of access, the market area should include the area within one-fourth mile of the access point and the next two access points in each direction from the applicant or affected party.

(d) On a nonurban arterial highway with uncontrolled access or partially controlled access, the market area should include five miles in either direction along the highway from the applicant or affected party.

(e) On a through street or through highway in a rural area, the market area should be that area within a five mile radius of the applicant or affected party.

(f) In a town under 25,000 population, the market area should be a two mile radius from the applicant or affected party.

As used in the above guidelines, the following terms have the following meanings:

"Arterial highway" means a highway primarily for through traffic, usually on a continuous route.

"Full control of access" means that the authority to control access is exercised to give preference to through traffic by providing access connections with selected public roads only and by prohibiting crossings at grade or direct private driveway connections.

"Partially controlled access" means that the authority to control access is exercised to give preference to through traffic to a degree that, in addition to access connections with selected public roads, there may be some crossings at grade and some private driveway connections.

~~((+5))~~ (16) Medical and nursing buildings: Buildings that house medical, dental or nursing activities including, but not limited to those listed in Appendix I of 6 CFR 300.18-300.19, the use of clinics, hospitals, nursing homes and other facilities.

~~((+6))~~ (17) Middle distillate: Any derivatives of petroleum including kerosene, home heating oil, range oil, stove oil, and diesel fuel, which have a fifty percent boiling point in the ASTM D86 standard distillation test falling between 371° and 700° F. Products specifically excluded from this definition are kerosene-base and naphtha-base jet fuel, heavy fuel oils as defined in VV-F-815C or ASTM D-396, grades #4, 5, and 6, intermediate fuel oils (which are blends containing #6 oil), and all specialty items such as solvents, lubricants, waxes and process oil.

~~((+7))~~ (18) Motor gasoline: A mixture of volatile hydrocarbons, suitable for operation of an internal combustion engine, whose major components are hydrocarbons with boiling points ranging from 140° to 390° F and whose source is distillation of petroleum and cracking, polymerization, and other chemical reactions by which the naturally occurring petroleum hydrocarbons are converted to those that have superior fuel properties.

~~((+8))~~ (19) Office: The Washington State Energy Office.

~~((+9))~~ (20) Officer: The director or his designee who is authorized to sign orders and authorizing documents for state set-aside assignments.

~~((+20))~~ (21) Order: A written directive or verbal communication of a written directive if promptly confirmed in writing, issued by the office concerning state set-aside assignments or permanent assignments, or a written document issued by the Fuel Allocation Appeals Board deciding an appeal from an order of the office. An order shall be deemed to be issued on the date on which it is signed by the officer or coordinator. With respect to permanent assignment orders, they shall not become effective unless and until the regional DOE office authorizes the action. Set-aside assignment orders are effective on the date of issuance.

~~((+21))~~ (22) Passenger transportation services:

(a) Air, land and water facilities and services designed and used for the carrying of passengers whether publicly or privately owned. These facilities and services shall include, but not be limited to: Tour buses, charter buses, taxicabs and other methods or modes which serve the general public on a for hire or fare basis; special transportation services for the elderly and/or handicapped; vanpools and shuttle buses which shall regularly carry at least seven persons, including the driver and which at least eighty percent of that vehicles mileage can be verified as attributed to the use of commuting; fleetpools; and

(b) Bus transportation of pupils to and from school and school sponsored activities.

~~((22))~~ (23) Permanent assignment: A recommendation by the office to the U.S. Department of Energy that an applicant be assigned a permanent supplier and an allocation entitlement.

~~((23))~~ (24) Prime supplier: The supplier or producer which makes the first sale of any allocated product subject to the state set-aside into the state distribution system for consumption within the state.

~~((24))~~ (25) Purchaser: Wholesale purchaser, end-user, or both.

~~((25))~~ (26) Retail gasoline outlet: Wholesale purchaser-reseller which purchases or otherwise obtains gasoline and resells or otherwise transfers it to ultimate consumers.

~~((26))~~ (27) Sanitation services: The collection and disposal for the general public of solid wastes, whether by public or private entities, and the maintenance, operation and repair of liquid purification and waste facilities during emergency conditions. Sanitation services also includes the provision of water supply services by public utilities, whether privately or publicly owned or operated.

~~((27))~~ (28) Set-aside: The amount of an allocated product which is made available from the total supply of a prime supplier to resolve emergencies and hardships due to fuel shortages, pursuant to 10 C.F.R. ~~((S)-(S))~~ § 211.17.

~~((28))~~ (29) Supplier: Any firm or subsidiary of any firm which presently sells, transfers or otherwise furnishes any allocated product or crude oil to wholesale purchasers or end-users.

~~((29))~~ (30) Telecommunications services: The repair, operation, and maintenance of voice, data, telegraph, video, and similar communications services to the public by a communications common carrier, during periods of substantial disruption of normal service.

~~((30))~~ (31) Truck: A motor vehicle with motive power designed primarily for the transportation of property or special purpose equipment and with a gross vehicle weight rating for a single vehicle (the value specified by the manufacturer as the loaded weight of the vehicle) or the equivalent thereof in excess of 20,000 pounds, or in the case of trucks designed primarily for drawing other vehicles and not so constructed as to carry a load other than part of the weight of the vehicle and the load so drawn, with a gross combination weight rating (the value specified by the manufacturer as the loaded weight of the combination vehicle) or the equivalent thereof in excess of 20,000 pounds.

~~((31))~~ (32) Wholesale purchaser-consumer: Any firm that is an ultimate consumer which, as part of its normal business practices, purchases or obtains an allocated product from a supplier and receives delivery of that product into a storage tank substantially under the control of that firm at a fixed location and which either:

(a) Purchased or obtained more than 20,000 gallons of that allocated product for its own use in agricultural production in any completed calendar year subsequent to 1971;

(b) purchased or obtained more than 50,000 gallons of that allocated product in any completed calendar year subsequent to 1971 for use in one or more multi-family residences; or

(c) purchased or obtained more than 84,000 gallons of that allocated product in any completed calendar year subsequent to 1971.

~~((32))~~ (33) Wholesale purchaser-reseller: Any firm which purchases, receives through transfer, or otherwise obtains an allocated product and resells or otherwise transfers it to other purchasers without substantially changing its form.

WSR 80-15-029

ATTORNEY GENERAL OPINION

Cite as: AGLO 1980 No. 28

[October 7, 1980]

OFFICES AND OFFICERS—STATE—WASHINGTON TRANSPORTATION COMMISSION—FERRIES—CONTRACTS—IMPOSITION OF TIME LIMIT FOR USE OF COMMUTER BOOKS

The Washington Transportation Commission did not violate any contractual rights of persons who previously purchased undated ferry system commuter ticket books when, by Resolution No. 72, it provided that commutation ticket books shall be valid only for ninety days from the date of purchase.

Requested by:

Honorable Rick Smith
State Representative, 23rd District
P. O. Box 68
Silverdale, Washington 98383

WSR 80-15-030

EMERGENCY RULES

DEPARTMENT OF FISHERIES

[Order 80-147—Filed October 8, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is harvestable surplus of coho has been taken.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 8, 1980.

By Gordon Sandison
Director

NEW SECTION

WAC 220-28-00510B CLOSED AREA. Effective October 10, 1980 until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen,

that such agency will at 10:00 a.m., Thursday, December 11, 1980, in the Holiday Inn, Yakima, Washington, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 1:00 p.m. or as soon thereafter as possible, Thursday, December 11, 1980, in the Holiday Inn, Yakima, Washington.

The authority under which these rules are proposed is chapter 70.48 RCW.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to December 9, 1980, and/or orally at 10:00 a.m., Thursday, December 11, 1980, Holiday Inn, Yakima, Washington.

Dated: October 8, 1980

By: George Edensword-Breck
Director

STATEMENT OF PURPOSE

Title: Revisions of custodial care standards
Purpose: To clarify or revise existing custodial care standards.

Statutory Authority: Chapter 70.48 RCW.
Chapter 289-14 WAC provides specific custodial care standards with respect to administration of jails; chapter 289-15 WAC provides standards related to safety within jails; chapter 289-16 WAC provides specific custodial care standards with respect to operation within jails; chapter 289-18 WAC provides specific custodial care standards relating to security within jails; chapter 289-19 WAC provides specific custodial care standards relating to prisoner conduct within jails; chapter 289-20 WAC sets forth specific health and welfare custodial care standards; chapter 289-22 WAC provides specific custodial care standards with respect to services and programs within jails; chapter 289-24 WAC provides specific custodial care standards relating to communications. These revisions are to clarify or revise existing language.

Under the supervision of the State Jail Commission, its Director, George Edensword-Breck, is responsible for the drafting, implementation, and enforcement of chapter 289-14 through 289-24 WAC; his telephone number is (206) 753-5790.

Chapter 289-14 through 289-24 WAC revisions were proposed to the State Jail Commission by its Director in order to clarify implementation of the statutory requirements mentioned above.

At this time, the Commission has no comment or recommendations regarding chapter 289-14 through 289-24 WAC.

These revisions have no federal law or court action requirements except as indicated by RCW 70.48.050(1)(a).

AMENDATORY SECTION (Amending Order 5, filed 11/28/79)

WAC 289-14-005 INTRODUCTION TO CUSTODIAL CARE STANDARDS. (1) The provisions of chapters 289-14 through 289-24 WAC incorporate custodial care standards applicable to ~~(all jails except where specifically indicated otherwise. Each standard is designated as either mandatory or advisory)~~ holding, detention or correctional facilities as defined under WAC 289-02-020. Each standard is mandatory for the classification to which it applies unless specifically labeled as advisory or not applicable.

(2) Within each chapter, paragraphs numbered from 010 to 099 are introductory or definitional in nature and apply to all jails unless otherwise noted. Paragraphs numbered from 100 to 199 apply to holding facilities. Paragraphs numbered from 200 to 299 apply to detention and correctional facilities unless otherwise noted. For this purpose, "holding" and "detention" and "correctional" facilities are defined as set forth in WAC 289-02-020. For purposes of the holding facility standards, a distinction is made between different maximum time periods persons are held within such facility, including thirty-day facility, seventy-two hour facility, and four-hour facility.

(3) The adoption of the mandatory custodial care standards is intended to meet minimum legal requirements relating to prisoner health, welfare, and security and does not preclude the adoption of more stringent requirements not in conflict with such standards by the governing authority, chief law enforcement officer, or department of corrections responsible for a particular jail.

~~((3) All of the standards have been designated as advisory only with respect to holding facilities. The determination of which of the standards, if any, should be mandatory for holding facilities will be specifically addressed by the state jail commission at a future time.))~~

AMENDATORY SECTION (Amending Order 2, filed 6/27/79)

WAC 289-14-010 ((GENERAL ADMINISTRATION)) EMERGENCY SUSPENSION OF CUSTODIAL CARE STANDARDS. ~~((The department of corrections or the chief law enforcement officer of all jails shall develop and maintain an organizational chart and an operations manual of policies and procedures.~~

~~WAC 289-14-010 MANDATORY for detention and correctional facilities, advisory for holding facilities.))~~

Nothing in these standards shall be construed to deny the power of any department of corrections or chief law enforcement officer to temporarily suspend any standard herein prescribed in the event of any emergency which threatens the safety of any jail, prisoners, staff, or the public. Only such standards as are directly affected by the emergency may be suspended and the department of corrections or chief law enforcement officer shall notify the state jail commission in the event of such a suspension on the first business day following: PROVIDED, That suspension of standards relating to overcrowding is subject to the additional requirements of WAC 289-15-120 and 289-15-220.

NEW SECTION

WAC 289-14-100 GENERAL ADMINISTRATION. (HOLDING FACILITIES). (1) The department of corrections or the chief law enforcement officer shall develop and maintain an organizational chart and an operations manual of policies and procedures. All staff shall be familiar with the chart and manual (30-day).

(2) There shall be written policies and procedures which shall be made available to each officer who confines a prisoner in the facility (72-hour, 4 hour).

NEW SECTION

WAC 289-14-110 DETERMINATION OF STAFF POSITIONS. (HOLDING FACILITIES). (1) The department of corrections or chief law enforcement officer shall define the responsibilities and designate the qualifications in writing for each staff position following the guidelines set by WAC 289-14-210 (30-day).

(2) The department of corrections or chief law enforcement officer shall define the responsibilities and designate the qualifications in writing for each staff position (72-hour).

(3) Only duly authorized commissioned officers shall use the facility with the permission of the holding facility administration or staff on duty (4-hour).

to take, fish for or possess salmon for commercial purposes with any type of gear from the waters of the Hoko River.

REPEALER

The following section of the Washington Administrative Code is repealed effective October 10, 1980:

WAC 220-28-00510A CLOSED AREA. (80-134)

WSR 80-15-031
ADOPTED RULES
DEPARTMENT OF LICENSING
(Board of Medical Examiners)
 [Order PL-353—Filed October 8, 1980]

Be it resolved by the Washington State Board of Medical Examiners, acting at Seattle, Washington, that it does promulgate and adopt the annexed rules relating to the amending of WAC 308-52-139 Physician assistant—Registration and adding new section WAC 308-52-145 Birthday renewal registration implementation.

This action is taken pursuant to Notice No. WSR 80-10-031 filed with the code reviser on August 4, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated pursuant to RCW 18.71A-.020 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED September 19, 1980.

By John Walker M. D.
 Secretary of the Board

NEW SECTION

WAC 308-52-145 BIRTHDAY RENEWAL REGISTRATION IMPLEMENTATION. (1) Effective with the renewal period beginning March 1, 1981, the annual physician assistant registration renewal date will be changed to coincide with the physician assistant's birthdate. Physicians making application for initial registration will be issued a registration to expire on the physician assistant's next birthdate.

(2) Physicians desiring to renew a registration to utilize a physician assistant's services will pay the renewal fee plus one-twelfth of that amount for each month, or fraction thereof, in order to extend their registration so that it expires on the physician assistant's birthday next following March 1, 1982.

AMENDATORY SECTION (Amending Order PL 285, filed 3/14/78)

WAC 308-52-139 PHYSICIAN((S)) ASSISTANTS—REGISTRATION. (1) Classification. Each

physician((~~s~~)) assistant will be classified as type A, B, or C, depending upon his training. Type B and type C assistants will be subdivided according to specialty or function.

(2) Registration Procedure. All applications shall be made to the board on forms supplied by the board. Applications shall be submitted thirty days prior to the meeting of the board in which consideration is desired. Applications shall be made jointly by the physician and the assistant.

(3) Registration renewal. Each registered assistant and the registering physician shall be required to submit an application for renewal of their registration (~~(by January of each year)~~) at least sixty days prior to the expiration of the registration. Application for renewal shall be submitted on forms provided by the board. A current statement of utilization, skills and supervision shall be included in the application. Registration renewals will be issued (~~(as of March of of each year)~~) to expire on the physician assistant's next birth anniversary date.

(4) Change of Registration. In the event that a physician((~~s~~)) assistant who is currently registered desires to become associated with another physician, such transfer may be accomplished administratively with the approval of the chairman of the board, providing that the new physician supervisor is licensed and in good standing in the state of Washington and that evidence is submitted to document the continuing competence of the physician((~~s~~)) assistant. This action shall be subject to approval by the board as a whole at its next regular meeting. Application for transfer of registration shall be made on forms provided by the board and may be considered at any regular meeting of the board.

(5) Utilization Plan. The application for registration of a physician((~~s~~)) assistant must include a detailed plan describing the manner in which the physician((~~s~~)) assistant will be utilized. The board will grant specific approval for the tasks which may be performed by the assistant based upon the curriculum of the program from which the assistant graduated as contained in the files of the board. No assistant shall be registered to perform tasks not contained in the program approval unless evidence satisfactory to the board is submitted demonstrating that he has been trained in that function and his competence has been properly and adequately tested. Request for approval of newly acquired skills may be considered at any regular meeting of the board.

Reviser's Note: The typographical errors in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

WSR 80-15-032
PROPOSED RULES
JAIL COMMISSION
 [Filed October 8, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Washington State Jail Commission, intends to adopt, amend, or repeal rules concerning revision of ¹custodial care standards;

NEW SECTION

WAC 289-14-120 TRAINING. (HOLDING FACILITIES). (1) All staff shall receive an orientation to the policies and procedures of the facility and on-the-job training plus such training as may be specified by the jail commission in cooperation with the criminal justice training center (30-day).

(2) All staff shall receive an orientation to the policies and procedures of the facility and on-the-job training (72-hour).

(3) Officers who use the facility shall have had training in the handling of prisoners as part of their overall officers training (4-hour).

NEW SECTION

WAC 289-14-130 RECORDS. (HOLDING FACILITIES). (1) Fiscal. It is recommended that all holding facilities maintain fiscal records which clearly indicate facility operation and maintenance costs according to generally accepted accounting principles (all holding facilities). ADVISORY.

(2) Confidentiality. All holding facility personnel shall be advised of the statutory provisions for confidentiality of jail records under RCW 70.48.100(2) (all holding facilities).

(3) Individual prisoner records.

(a) An individual file or record shall be kept for each prisoner which includes, but is not limited to, booking and release forms approved by the jail commission, court orders, property receipts, receiving medical screening forms, medical information necessary for emergency care or routine administration of medication or other necessary care, and reports of any major disciplinary actions (30-day).

(b) An individual file or record shall be kept for each prisoner which includes, but is not limited to, booking and release forms approved by the jail commission, court orders, property receipts, receiving medical screening forms, and medical information necessary for emergency care or routine administration of medication or other necessary care (72-hour).

(c) If formal booking occurs in the facility, the information should be recorded on a booking form which is approved by the jail commission (4-hour). ADVISORY.

(4) Medical.

(a) Any prisoner medical information other than that included in the prisoner's individual file under WAC 286-14-130(2)(a) shall be maintained separately in accordance with WAC 289-20-250 (30-day).

Such medical information may include, but not be limited to, a record of all contacts or actions related to a prisoner's health by non-medical staff and a summary of all referrals to medical staff for treatment either in the facility or in a clinic. It may also include such specific medical information regarding each prisoner as would be required to perform authorized emergency procedures in the absence of medical staff (30 day, 72 hour). ADVISORY.

(b) Any serious medical problems experienced by a prisoner while in the facility shall be recorded and such records shall be transported with the prisoner if he is transferred to another jail, hospital or other facility (4-hour).

(5) Prisoner access. Each prisoner shall be permitted reasonable access to his jail record, or to information contained therein: PROVIDED, That such access may be limited only on substantial grounds of institutional security (all holding facilities).

(6) Transfer.

(a) When a prisoner is transferred to another facility, a copy of his records should be forwarded to the receiving facility. Those records should include, but not be limited to, copies or summaries of health records provided that the requirements of WAC 289-20-250 regarding confidentiality are followed. Applicable court orders should be transferred. Summaries or copies of disciplinary records should be transferred where such information may serve a substantial governmental interest in the safety and security of the receiving institution (30-day, 72 hour). ADVISORY.

(b) A copy of the booking form, if available, should be sent to any other facility to which the prisoner is transported (4-hour). ADVISORY.

(7) Prisoner population accounting. Each holding facility shall keep a jail register as required by RCW 70.48.100 and such other prisoner population accounting information as required by the commission (all holding facilities).

(8) Infraction and disciplinary.

(a) Written records shall be maintained for all incidents which result in property damage or bodily harm. Major infraction reports and

disciplinary actions under chapter 289-19 WAC shall become part of the prisoner's jail record (30-day).

(b) Not applicable (72-hour, 4 hour).

(9) Incidents and emergencies. All serious incidents and emergencies should be recorded (all holding facilities). ADVISORY.

(10) Incident reports. An incident report on any death, completed escape, or serious fire shall be submitted to the jail commission on the form provided by the commission on the first business day following the incident. A copy of all incident reports shall be retained at the jail (all holding facilities).

(11) Activity log. A log of daily activity should be kept within the facility for future accountability (all holding facilities). ADVISORY.

(12) Personnel. Performance and training records should be maintained for each staff member employed by the facility (all holding facilities). ADVISORY.

NEW SECTION

WAC 289-14-200 GENERAL ADMINISTRATION. (DETENTION AND CORRECTIONAL FACILITIES). (1) The department of corrections or the chief law enforcement officer of all jails shall develop and maintain an organizational chart and an operations manual of policies and procedures.

(2) Such chart and manual shall be reviewed by all staff and such review noted by signature prior to any assignment.

(3) All jail policies and procedures should be reviewed and revised as appropriate on a continuing basis but at least yearly. ADVISORY.

NEW SECTION

WAC 289-14-210 DETERMINATION OF STAFF POSITIONS. (DETENTION AND CORRECTIONAL FACILITIES).

(1) Written job descriptions approved by the department of corrections or chief law enforcement officer shall define the responsibilities and designate the qualifications for each staff position.

(2) Qualifications for detention and correctional facility staff hired on or after the effective date of these minimum standards shall include, but not be limited to, a high school diploma, or equivalent.

(3) All jail staff shall be selected on merit and retained on proven ability to perform.

(4) Appropriate physical fitness standards should be set and enforced for all jail staff. ADVISORY.

NEW SECTION

WAC 289-14-220 TRAINING. (DETENTION AND CORRECTIONAL FACILITIES). (1) All jails shall provide preservice training to each newly hired jail staff member, regardless of his or her previous training or experience prior to the assignment of any jail duties. Such training may be provided either by existing jail staff or other qualified persons, and must be verified by a written outline, and shall include, but not necessarily be limited to:

(a) Review and understanding of all policies and procedures relating to his/her job responsibilities, specifically;

(i) Agency organization;

(ii) Admission and release procedures;

(iii) Security and safety procedures;

(iv) Contraband control, definition of, etc.;

(v) Prisoner discipline;

(vi) Medical and mental health procedures;

(vii) Use of force;

(viii) Confidentiality of jail records (RCW 70.48.100(2)).

(b) Review and understanding of the Washington Criminal Justice System as it relates to jail duties.

(c) Review and understanding of the current Washington State Jail Commission Custodial Care Standards.

(d) Identification and understanding of the function of agencies whose authority may extend to the jail's prisoners.

(e) Appropriate training and qualification in the use of weapons when jail duties include possession or carrying of a firearm.

(2) All persons directly responsible for the supervision of prisoners shall successfully complete the Washington State Criminal Justice Training Commission basic correctional academy within the first year of their employment, as required by WAC 139-36-010.

(3) Staff training shall further include such training as required by WAC 289-20-230.

(4) All jails should provide at least twenty hours of in-service training to each correctional officer each year (following academy training for purposes of updating training previously received). ADVISORY.

NEW SECTION

WAC 289-14-230 RECORDS. (DETENTION AND CORRECTIONAL FACILITIES). The department of corrections or chief law enforcement officer for each jail shall establish a records system which shall comply with the requirements of this section and any subsequent rules adopted by the state jail commission.

(1) Fiscal. Each detention and correctional facility shall maintain fiscal records which clearly indicate facility operation and maintenance costs according to generally accepted accounting principles. Such records shall separate specific jail functions from other departmental functions.

(2) Confidentiality. All jail facility personnel shall be advised of the statutory provisions for confidentiality of jail records under RCW 70.48.100(2).

(3) Individual prisoner records. The information required by the booking and release form provided by the commission shall be obtained for each booking and release. Such information as prescribed by the commission will be retained in written form or within computer records. Other information retained in each prisoner's jail record shall include, but not be limited to, court orders, personal property receipts, infraction reports, reports of disciplinary actions and/or unusual occurrences, and, in case of death, disposition of prisoner's property and remains.

(a) Medical. Health care records shall be maintained separately in accordance with WAC 289-20-250.

(b) Prisoner access. Each prisoner shall be permitted reasonable access to his jail record, or reasonable access to information contained therein. Provided that such access may be limited only on substantial grounds of institutional security.

(c) Transfer. When a prisoner is transferred to another facility, copies or summaries of all health records shall be transferred to the receiving facility, provided that the requirements of WAC 289-20-250 regarding confidentiality are followed. Applicable court orders shall be transferred. Summaries or copies of disciplinary records shall be transferred where such information may serve a substantial governmental interest in the safety or security of the receiving institution.

(4) Population reports. Each jail shall complete and submit monthly reports on its population on forms provided by the jail commission.

(5) Population accounting. Each jail should, in addition, maintain an ongoing and a permanent accounting of its population by its own confinement categories, location, or classification within the jail. Advisory.

(6) Jail register. Each jail shall maintain an accurate jail register as required by RCW 70.48.100.

(7) Infraction and disciplinary. Each department of corrections or chief law enforcement officer shall maintain a written record of all incidents which result in property damage or bodily harm, or serious threat of property damage or bodily harm. Major infraction reports and disciplinary actions under chapter 289-16 WAC shall become part of the prisoner's jail record.

(8) Incidents and emergencies. All serious incidents and emergencies shall be recorded on forms provided by the commission. For purposes of this section, the term "serious incidents and emergencies" includes, but is not limited to any death which occurs within a jail, attempted suicides, any unusual prisoner medical problem, epidemics, attempted or completed escapes, any assault upon staff or prisoners, dangerous contraband within the jail, serious fires, flooding or other natural disasters, riots or strikes, and any acts of terrorism or physical violence.

(9) Incident reports. An incident report on any death, completed escape, or serious fire shall be submitted to the jail commission on the form provided by the commission on the first business day following the incident. A copy of all incident reports shall be retained at the jail.

(10) Activity log. All jails should keep a log of daily activity within the facility for future accountability. ADVISORY.

(11) Personnel training. Training records shall be maintained for each staff member employed by a detention or correctional facility.

(12) Personnel performance. Performance records should be maintained for each staff member employed by a detention or correctional facility. ADVISORY.

REPEALER

The following sections of the Washington Administrative Code are repealed:

- (1) WAC 289-14-020 STAFFING.
- (2) WAC 289-14-030 RECORDS.

Chapter 289-15 WAC CUSTODIAL CARE STANDARDS—SAFETY

NEW SECTION

WAC 289-15-010 INTRODUCTION. (1) The provisions of chapter 289-15 WAC incorporate custodial care standards relating to the safety of both prisoners and staff within jails. The importance of prior planning and understood written procedures is stressed in the areas of potential emergencies, particularly fire, and in the use of force.

(2) The lack of overcrowding is considered as a primary factor relating to the safety of prisoners and staff, the security of the jail, and the health and welfare of the prisoners. WAC 289-15-120 and 289-15-220 incorporate minimum standards for housing prisoners within the maximum reasonable capacity of facilities.

NEW SECTION

WAC 289-15-100 EMERGENCY PROCEDURES. (HOLDING FACILITIES). The department of corrections or chief law enforcement officer shall establish and maintain written emergency procedures consistent with the provisions of WAC 289-15-200 as appropriate for the specific facility (all holding facilities).

NEW SECTION

WAC 289-15-110 FIRE PREVENTION AND SUPPRESSION. (HOLDING FACILITIES). The department of corrections or chief law enforcement officer shall, in conjunction with the local fire department, establish and maintain a written fire prevention and suppression plan which meets the guidelines of WAC 289-15-210 (all holding facilities).

NEW SECTION

WAC 289-15-120 OVERCROWDING. (HOLDING FACILITIES). (1) No prisoner shall be required to sleep directly on the floor, or on a mattress on the floor, unless there are reasonable grounds to believe that such provisions are necessary to prevent the prisoner from damaging property, inflicting bodily harm to himself or others or substantially compromising the security of the jail.

(2) If the prisoner population in any holding facility exceeds the maximum reasonable capacity as set by the commission for each facility, that facility shall comply with the procedure in WAC 289-15-220 (3) through (7) (all holding facilities).

NEW SECTION

WAC 289-15-130 USE OF FORCE. (HOLDING FACILITIES). Only lawful and reasonable force to the person of a prisoner shall be used. The procedures set forth in WAC 289-15-230 shall be followed to the extent possible in each holding facility (all holding facilities).

NEW SECTION

WAC 289-15-200 EMERGENCY PROCEDURES. (DETENTION AND CORRECTIONAL FACILITIES). (1) The department of corrections or the chief law enforcement officer shall formulate written emergency procedures relative to escapes, riots, rebellions, assaults, injuries, suicides or attempted suicides, outbreak of infectious disease, fire, acts of nature, and any other type of major disaster or disturbance. The emergency plan shall outline the responsibilities of jail facility staff, evacuation procedures, and subsequent disposition of the prisoners after removal from the area or facility. Such plan shall be formulated in cooperation with the appropriate supporting local government units.

(2) Emergency plans shall always be available to the officer in charge of the jail, and all personnel shall be aware of, and trained in, the procedures.

(3) The emergency plan shall include a reference to the incident reporting requirements of WAC 289-14-230(8).

NEW SECTION

WAC 289-15-210 FIRE PREVENTION AND SUPPRESSION. (DETENTION AND CORRECTIONAL FACILITIES). (1) The department of corrections or chief law enforcement officer shall consult with the local fire department having jurisdiction over the facility in developing a written fire prevention and suppression plan which shall include, but not be limited to:

- (a) A fire prevention plan to be part of the operations manual of policies and procedures;
 - (b) Daily fire prevention inspections by facility staff;
 - (c) Fire prevention inspections at least semi-annually by the fire department having jurisdiction. Recommendations resulting from inspections shall be promptly implemented; and
 - (d) A regular schedule for inspections, testing and servicing fire suppression equipment.
- (2) Results of all fire department inspections shall be kept on file at the jail, together with records of actions taken to comply with recommendations from such reports.

NEW SECTION

WAC 289-15-220 OVERCROWDING. (DETENTION AND CORRECTIONAL FACILITIES). (1) No prisoner shall be required to sleep directly on the floor, or on a mattress on the floor, unless there are reasonable grounds to believe that such provisions are necessary to prevent the prisoner from damaging property, inflicting bodily harm to himself or others or substantially compromising the security of the jail.

(2) The director will establish a maximum reasonable capacity for each existing and each newly constructed detention or correctional facility. In the case of new facilities, such capacity shall reflect the physical plant standards set forth in chapter 289-12 WAC. For existing facilities, the capacity shall be based upon the nature of the physical plant as well as the totality of circumstances affecting conditions in such jail.

Following the issuance of notice of the established maximum reasonable capacity by the director, the governing unit shall have fifteen days from receipt of such notice to request review of such action by the commission, which review shall be scheduled and occur within forty-five days of receipt of the request.

(3) Overcrowding in excess of the established maximum reasonable capacity shall be reported in writing by mail to the director by the department of corrections or chief law enforcement officer on the first business day following its occurrence. Continued conditions of overcrowding shall be reported on a weekly basis using the monthly population accounting form provided by the jail commission. Each case of overcrowding which continues beyond seventy-two hours shall be considered by the director of the jail commission for possible enforcement action under chapter 289-30 WAC.

(4) The reporting of conditions of overcrowding required by WAC 289-14-010(2) will be considered as notice of an emergency suspension of standards.

(5) An emergency suspension of the overcrowding standard beyond seventy-two hours must be approved by the director.

(6) No emergency suspension of the standards relative to maximum reasonable capacity beyond seventy-two hours shall be approved except when the following conditions are met:

- (a) No applicable custodial care standards are suspended;
- (b) All existing diversion programs have been fully utilized;
- (c) All prisoners being held for other jurisdictions have been transferred to those jurisdictions to the extent possible;
- (d) All facilities within adjacent counties have been utilized to the fullest extent permissible by their classification; and
- (e) Staff are available to, and do in fact, check each overcrowded living area at least once within every fifteen minute period, except as provided under WAC 289-14-010.

(7) If prisoners are held without bed, bedding, clothes, or other personal care items, they shall be considered high risk prisoners and be personally observed continuously by staff. **ADVISORY.**

NEW SECTION

WAC 289-15-230. USE OF FORCE. (DETENTION AND CORRECTIONAL FACILITY). Only lawful and reasonable force to the person of a prisoner shall be used. Such force shall be used only after obtaining the prior approval of the senior jail officer on duty, and a record of the event shall be made in the jail log. Only in cases of self-defense, to prevent escape, to prevent injury to a person (including

the prisoner himself), or to prevent the commission of a crime shall prior approval not be necessary for the use of such force. The extent of such force shall always be limited to the extent it is reasonably necessary to accomplish its purpose.

NEW SECTION

WAC 289-16-100 ADMISSIONS (HOLDING FACILITIES).

(1) Authorized confinement.

(a) The receiving officer shall determine that the confinement of each prisoner is being accomplished by a duly authorized officer, and a copy of all documents that purport to legally authorize the confinement shall become part of the prisoner's jail record (30 day, 72 hour).

(b) No prisoner shall be confined without proper legal authority (4 hour).

(2) Officers present. More than one jail facility staff person or officer should be present until the prisoner is locked into the confinement area (all holding facilities). **ADVISORY.**

(3) Same sex staff. A staff member of the same sex as the prisoner shall be present during admission and shall conduct the search of the prisoner (all holding facilities).

(4) Forms. The information required on the booking forms provided by the commission shall be recorded for each prisoner booked into the facility (30 day, 72 hour). (Not applicable - 4 hour.)

(5) Telephone.

(a) Each prisoner, after completion of booking, shall be advised of his right to, and be allowed to complete, at least two local or collect calls to persons of his choice who may be able to come to his assistance. If the prisoner chooses not to place the calls allowed this information shall be noted on the booking form: **PROVIDED**, That if long distance calls are necessary to make initial contact with a prisoner's attorney or immediate family, and the prisoner is unable to pay for the cost of such calls, they shall be made at the expense of the governing unit: **PROVIDED FURTHER**, That this section does not prohibit restriction of calls to persons other than a prisoner's attorney or a provider of bail or bond, when such restriction is necessary to protect the integrity of a criminal investigation. Any such restriction shall be noted on the prisoner's booking form (30 day, 72 hour).

(b) Each prisoner shall be advised of his right to, and be allowed to complete at least two local or collect calls to persons of his choice who may be able to come to his assistance. If the prisoner chooses not to place the calls allowed, this information should be recorded in writing: **PROVIDED**, That if long distance calls are necessary to make initial contact with a prisoner's attorney or immediate family, and the prisoner is unable to pay for the cost of such calls, they shall be made at the expense of the governing unit: **PROVIDED FURTHER**, That this section does not prohibit restriction of calls to persons other than a prisoner's attorney or a provider of bail or bond, when such restriction is necessary to protect the integrity of a criminal investigation. Any such restriction shall be noted on the prisoner's booking form (4 hour).

(6) Language problems.

(a) Reasonable provisions for communicating with non-English speaking, handicapped and illiterate prisoners shall be provided concerning the booking process, rules of the facility, privileges and other information pertinent to his rights and well-being while confined (30 day, 72 hour).

(b) Reasonable provisions for communicating with non-English speaking, handicapped and illiterate prisoners shall be provided (4 hour).

(7) Booking process. The booking process shall be completed promptly unless the prisoners physical condition necessitates delay (30 day, 72 hour). (Not applicable - 4 hour.)

(8) Search. Each prisoner shall be searched for contraband in such a manner as responsible staff determine is necessary to protect the safety of prisoners, staff, and institutional security. Such search should be conducted in a private area and in a professional manner which protects the prisoner's dignity to the extent possible (all holding facilities).

(9) Strip search. When a strip search of a prisoner is conducted, it should include a thorough visual check for birthmarks, wounds, sores, cuts, bruises, scars and injuries; "health tags"; and body vermin. Less complete searches should include the same checks to the extent possible (all holding facilities). **ADVISORY.**

(10) Physical markings recorded. All physical markings and "health tag" identifications shall be recorded and made immediately available to the appropriate jail employees and the medical professionals responsible for care of the prisoner under chapter 289-20 WAC (all holding facilities).

(11) Injuries photographed. Particularly when force has been used during arrest, all visible injuries should be photographed (all holding facilities). ADVISORY.

(12) Body vermin. Any person with body vermin shall be treated appropriately in accordance with chapter 289-20 WAC, or prisoners shall be made to have the condition treated in another facility (all holding facilities).

(13) Medical complaints. Complaints of illness or injury expressed during booking shall be checked promptly by a qualified medical professional in accordance with the medical procedure established under WAC 289-20-220 (all holding facilities).

(14) Communicable diseases. A prisoner suspected of having a communicable disease shall be isolated without delay. Arrangements shall be made for his immediate transfer to a facility equipped to handle the suspected disease, unless the admitting facility can safely and effectively segregate and maintain the medically prescribed treatment. (See definitions.) (all holding facilities.)

(15) Prisoner property. If the prisoner's personal property is taken from him, the jail staff or transporting officer shall record and store such items and issue the prisoner a witnessed receipt (all holding facilities).

(16) Prisoner weight. Each prisoner's weight should be measured and recorded upon admission (30 day). ADVISORY. (Not applicable 72 hour, 4 hour.)

(17) Photographs. Front and side-view identification photographs of each prisoner should stipulate the arresting agency or the booking agency and the date of arrest or the date of the photograph (all holding facilities). ADVISORY.

(18) Fingerprints. Copies of fingerprints if they are taken, shall be forwarded to the proper state and federal authorities (all holding facilities).

(19) Clothing. Each jail should establish its own policy on prisoners' use of personal clothing or jail uniforms (30 day, 72 hour). ADVISORY. (Not applicable - 4 hour.)

(20) Issuances. At or following booking, but within four hours after completion of booking, each prisoner shall be issued clean bedding, as well as such personal care items as required under WAC 289-20-030 (30 day, 72 hour). (Not applicable - 4 hour.)

(21) Writing paper.

(a) Upon prisoner request, a reasonable supply of writing material shall be furnished (30 day).

(b) Upon prisoner request a reasonable supply of writing material should be furnished (72 hour). ADVISORY. (Not applicable - 4 hour.)

NEW SECTION

WAC 289-16-110 TEMPORARY CELL ASSIGNMENTS (HOLDING FACILITIES). (1) Prior to a classification determination, each prisoner should be housed in a single occupancy cell whenever possible (30 day). ADVISORY.

(2) Each prisoner should be housed in a single occupancy cell whenever possible (72 hour, 4 hour). ADVISORY.

(3) If prisoners who are suspected of being dangerous, intoxicated or mentally ill cannot be housed separately, they shall be continuously and directly observed (all holding facilities).

(4) No prisoner known or suspected to be a danger to himself may be housed alone without continual direct observation (all holding facilities).

NEW SECTION

WAC 289-16-120 ORIENTATION. (1) As soon after booking as possible, if the prisoner is not to be released within two hours, he shall receive an orientation. The orientation shall include information regarding the prisoner's rights and responsibilities, facility rules and privileges, access to medical care and answers to any questions the prisoner may have (30 day, 72 hour).

(2) The prisoner should be advised of his rights and any facility rules. His questions should be answered (4 hour). ADVISORY.

NEW SECTION

WAC 289-16-130 CLASSIFICATION/SEGREGATION (HOLDING FACILITIES). (1) Classification procedures.

(a) The department of corrections or chief law enforcement officer shall establish written classification and reclassification procedures

consistent with the requirements of WAC 289-16-230(2) and (4) which shall be included in the manual of policies and procedures (30 day).

(b) Written classification procedures shall be included in the policies and procedures (72 hour, 4 hour).

(2) Classification committee.

(a) A classification committee, or individual shall be designated as responsible for classification of prisoners confined in the facility in accordance with such written procedures: PROVIDED, That this does not preclude designation of alternate persons to serve in such individuals' absence: PROVIDED FURTHER, That certain classification functions, such as initial cell assignment, may be delegated, in writing, to staff not assigned to classification functions (30 day).

(b) The department of corrections or chief law enforcement officer, or his designee, shall be responsible for classification (72 hour, 4 hour).

(c) It is recommended that no less than two facility staff members be responsible for classification determinations when reasonably possible (all holding facilities). ADVISORY.

(3) Classification training.

(a) At least one staff person per shift shall be trained in the facility's classification procedures and shall be responsible for classification. The training shall include the recognition of the types of prisoners who are not held in the facility but who are immediately transferred elsewhere. It shall also include recognition and referral of prisoners who are "special problems" according to WAC 289-16-130(4)(d) (30 day, 72 hour).

(b) Officers who use the facility should be trained to recognize and refer prisoners who are "special problems" according to WAC 289-16-130(4)(d) (4 hour). ADVISORY.

(4) Classification criteria. To the extent possible in the available physical plant, the following classification criteria shall be used. If (4)(a) through (d) cannot be enforced, arrangements shall be made to immediately transfer the prisoners involved to another facility which can segregate and supervise them (all holding facilities).

(a) The primary criteria for classification shall be the safety of the prisoner and the security of the institution (all holding facilities).

(b) Juveniles (seventeen years of age and under) shall always be segregated from visual and oral communication with adult prisoners, except where such prisoner has been remanded to superior court jurisdiction and has been convicted in such a court: PROVIDED, That the age of youthful offenders is a factor to be considered in classification determinations: PROVIDED FURTHER, That where physical plant limitations prevent complete sight and sound separation of juveniles from adult prisoners, direct continual supervision of such portion of the jail may substitute for physical sight and sound separation (all holding facilities).

(c) Females shall be segregated from visual and oral communication with male prisoners except under direct supervision of a staff person (all holding facilities).

(d) Special problem prisoners who endanger the health or safety of other prisoners (or themselves) shall be segregated and closely supervised (all holding facilities).

(e) Prisoners on work release and weekend confinement programs, and any other prisoners who have regular contact outside the jail should be segregated from other prisoner categories (30 day, 72 hour). ADVISORY. (Not applicable - 4 hour.)

(f) Factors to be considered in classification shall include, but are not limited to, age, type of crime, pretrial versus post-trial status, and offender sophistication (all holding facilities).

NEW SECTION

WAC 289-16-140 GOOD TIME (HOLDING FACILITIES). The director of the department of corrections or the chief law enforcement officer should develop written policies regarding time off for good behavior. Such policies should insure that good time when authorized by sentencing courts, is given on a consistent basis, and in accordance with RCW 70.48.210 and 9.92.150 (30 day). ADVISORY. (Not applicable - 72 hour, 4 hour.)

NEW SECTION

WAC 289-16-150 RELEASE AND TRANSFER (HOLDING FACILITIES). (1) Release.

(a) The releasing officer shall positively determine prisoner identity and ascertain that there is legal authority for the release (all holding facilities).

(b) The information required on the release forms provided by the commission shall be recorded for each prisoner released from the facility (30 day, 72 hour). (Not applicable - 4 hour.)

(c) All prisoners being released shall sign a witnessed receipt for personal property returned (all holding facilities).

(d) Each prisoner discharged should receive a visual body check to detect changes from his admitting physical record (30 day, 72 hour). ADVISORY. (Not applicable - 4 hour.)

(2) Transfer. In addition to the release procedures designated above, the releasing officer shall determine that the receiving unit or person has the authority to accept custody (all holding facilities).

NEW SECTION

WAC 289-16-160 TRANSPORTATION (HOLDING FACILITIES). When jail facility staff are responsible for prisoner transportation and when the prisoner is still in the custody and under the supervision of the jail, the department of corrections or chief law enforcement officer shall develop and maintain written instructions consistent with the requirements of WAC 289-16-260 (all holding facilities).

NEW SECTION

WAC 289-16-200 ADMISSIONS (DETENTION AND CORRECTIONAL FACILITIES). (1) General.

(a) The receiving officer shall determine that the arrest and confinement of each prisoner is being accomplished by a duly authorized officer, and a copy of all documents that purport to legally authorize the confinement shall become part of the prisoner's jail record.

(b) If only one jail facility officer is on duty, the delivery officer shall remain until the prisoner is locked into the confinement area.

(c) A staff member of the same sex as the prisoner shall be present during admission and shall conduct the search of the prisoner.

(d) The information required on the booking and release forms provided by the commission shall be recorded for each prisoner booked into the facility.

(e) Each prisoner, after completion of booking, shall be advised of his right to, and be allowed to complete, at least two local or collect calls to persons of his choice who may be able to come to his assistance. If the prisoner chooses not to place the calls allowed, this information shall be noted on the booking form: PROVIDED, That if long distance calls are necessary to make initial contact with a prisoner's attorney or immediate family, and the prisoner is unable to pay for the cost of such calls, they shall be made at the expense of the governing unit: PROVIDED FURTHER, That this section does not prohibit restriction of calls to persons other than a prisoner's attorney or a provider of bail or bond, when such restriction is necessary to protect the integrity of a criminal investigation. Any such restriction shall be noted on the prisoner's booking form.

(f) Reasonable provisions for communicating with non-English speaking, handicapped and illiterate prisoners shall be provided concerning the booking process, rules of the facility, privileges and other information pertinent to his rights and well-being while confined.

(g) The booking process shall be completed promptly unless the physical condition of the prisoner necessitates delay.

(2) Search/examination.

(a) Each prisoner shall be searched for contraband in such a manner as responsible staff determine is necessary to protect the safety of prisoners, staff, and institutional security. Such search should be conducted in a private area and in a professional manner which protects the prisoner's dignity to the extent possible.

(b) When a strip search of a prisoner is conducted it should include a thorough visual check for birthmarks, wounds, sores, cuts, bruises, scars and injuries; "health tags"; and body vermin. Less complete searches should include the same checks to the extent possible. ADVISORY.

(c) All physical markings and "health tag" identifications shall be recorded and made immediately available to the appropriate jail employees and the medical professionals responsible for care of the prisoner under chapter 289-20 WAC.

(d) Particularly when force has been used during arrest, all visible injuries should be photographed. ADVISORY.

(e) Any person with body vermin shall be treated appropriately in accordance with chapter 289-20 WAC.

(f) Complaints of illness or injury expressed during booking shall be checked promptly by a qualified medical professional in accordance with the medical procedure established under WAC 289-20-220.

(g) A prisoner suspected of having a communicable disease shall be isolated without delay. Arrangements shall be made for his immediate transfer to a facility equipped to handle the suspected disease, unless the admitting facility can safely and effectively segregate and maintain the medically prescribed treatment. (See definitions.)

(3) Personal property. The admitting officer shall record and store the prisoner's personal property and issue the prisoner a witnessed receipt.

(4) Prisoner weight. Each prisoner's weight should be measured and recorded upon admission. ADVISORY.

(5) Photographs and fingerprints.

(a) Front and side-view identification photographs of each prisoner should stipulate the arresting agency or the booking agency and the date of arrest or the date of the photograph. ADVISORY.

(b) Copies of fingerprints shall be forwarded to the proper state and federal authorities.

(6) Issuances.

(a) Each jail should establish its own policy on prisoners' use of personal clothing or jail uniforms.

(b) At or following booking, but within four hours after completion of booking, each prisoner shall be issued clean bedding, as well as such personal care items as required under WAC 289-20-030.

(c) Upon prisoner request, a reasonable supply of writing material shall be furnished.

NEW SECTION

WAC 289-16-210 TEMPORARY CELL ASSIGNMENTS (DETENTION AND CORRECTIONAL FACILITIES). (1) Prior to a classification determination, each prisoner should be confined in a single occupancy cell whenever possible. ADVISORY.

(2) Prisoners who, upon screening, appear to have serious and potentially dangerous problems with drugs, including alcohol, or signs of serious mental illness, shall be closely observed. Persons qualified and trained to evaluate such prisoners shall be contacted without delay.

(3) Any prisoner suspected of being intoxicated or assaultive shall be housed separately prior to classification except where continual direct observation is maintained.

(4) No prisoner known or suspected to be a danger to himself may be housed alone without continual direct observation.

NEW SECTION

WAC 289-16-220 ORIENTATION (DETENTION AND CORRECTIONAL FACILITIES). As soon after booking as possible each prisoner shall receive an oral orientation, consistent with the provisions of WAC 289-16-200. The orientation shall provide information regarding the prisoner's confinement including, but not limited to:

(1) Rules of prisoner conduct; including possible disciplinary sanctions, as provided in WAC 289-19-210;

(2) Procedures and conditions regarding classification and reclassification, as provided in WAC 289-16-230;

(3) Staff expectations of prisoner responsibilities, including if applicable, cleaning of prisoner living areas;

(4) Prisoner rights and privileges;

(5) The means of access to health care as required by WAC 289-20-220, and other services;

(6) Other questions the prisoner may have.

NEW SECTION

WAC 289-16-230 CLASSIFICATION/SEGREGATION (DETENTION AND CORRECTIONAL FACILITIES). (1) Classification.

(a) The department of corrections or chief law enforcement officer shall establish written classification and reclassification procedures which shall be included in the manual of policies and procedures.

(b) A classification committee, or individual shall be designated as responsible for classification of prisoners confined in the facility in accordance with such written procedures: PROVIDED, That this does not preclude designation of alternate persons to serve in such individuals' absence: PROVIDED FURTHER, That certain classification functions, such as initial cell assignment, may be delegated, in writing, to staff not assigned to classification functions.

(c) It is recommended that no less than two facility staff members be responsible for classification determinations when reasonably possible. ADVISORY.

(d) For each prisoner confined in a detention or correctional facility, those responsible for classification shall determine the degree of security required, housing assignment, program eligibility, and regulations for association within and outside the confinement area.

(2) Classification procedures.

(a) Each prisoner confined in a detention or correctional facility shall be interviewed by the persons responsible for classification determinations or other designated staff. Where designated staff conduct the interviews, the information shall be reported to the classification committee, or person responsible in a uniform manner.

(b) The prisoner shall be promptly informed of the classification housing assignment decision, the basis for that decision, and of his right to have that decision reviewed upon making a written request. Such notice shall also be given with regard to any reclassification action.

(c) A prisoner who is dissatisfied with his housing assignment shall be entitled to a review of the decision by the department of corrections or chief law enforcement officer upon making a written request, and shall be promptly informed of this right. Such request shall be reviewed by the department of corrections, chief law enforcement officer, or a designated staff member supervisory to the classification committee, within 72 hours of its receipt by staff. The prisoner shall receive a written decision of the review of such assignment, including reason(s).

(3) Criteria for prisoner classification.

(a) The primary criteria for classification shall be the safety of the prisoner and the security of the institution.

(b) Juveniles (seventeen years of age and under) shall always be segregated from visual and oral communication with adult prisoners, except where such prisoner has been remanded to superior court jurisdiction and has been convicted in such a court: PROVIDED, That the age of youthful offenders is a factor to be considered in classification determinations: PROVIDED FURTHER, That where physical plant limitations prevent complete sight and sound separation of juveniles from adult prisoners, direct continual supervision of such portion of the jail may substitute for physical sight and sound separation.

(c) Females shall be segregated from visual and oral communication with male prisoners except under direct supervision of a staff person.

(d) Special problem prisoners who endanger the health and safety of other prisoners (or themselves) shall be segregated and closely supervised.

(e) Prisoners on work release or weekend confinement programs, and any other prisoners who have regular contact outside the jail shall be segregated from other prisoner categories.

(f) Factors to be considered in classification shall include, but are not limited to, age, type of crime, pretrial versus post-trial status, and offender sophistication.

(4) Administrative segregation.

(a) Written classification procedures shall include provisions for the separation of certain prisoners for their own protection, for purposes of investigation, and for the security of the facility.

(b) Written documentation shall be maintained for each case of administrative segregation.

NEW SECTION

WAC 289-16-240 GOOD TIME (DETENTION AND CORRECTIONAL FACILITIES). The director of the department of corrections or the chief law enforcement officer should develop written policies regarding time off for good behavior. Such policies should insure that good time when authorized by sentencing courts, is given on a consistent basis, and in accordance with RCW 70.48.210 and 9.92-.150. ADVISORY.

NEW SECTION

WAC 289-16-250 RELEASE AND TRANSFER (DETENTION AND CORRECTIONAL FACILITIES). (1) Release.

(a) The releasing officer shall positively determine prisoner identity and ascertain that there is legal authority for the release.

(b) The information required on the release forms provided by the commission shall be recorded for each prisoner released from the facility.

(c) All prisoners being released shall sign a witnessed receipt for personal property returned.

(d) Each prisoner discharged should receive a visual body check to detect changes from his admitting physical record. ADVISORY.

(2) Transfer. In addition to the release procedures designated above, the releasing officer shall determine that the receiving unit or person has the authority to accept custody.

NEW SECTION

WAC 289-16-260 TRANSPORTATION (DETENTION AND CORRECTIONAL FACILITIES). When jail facility staff are responsible for prisoner transportation and when the prisoner is still in the custody and under the supervision of the jail, the department of corrections or the chief law enforcement officer of each detention and correctional facility shall develop and maintain written instructions to include the following minimum standards:

(1) Vehicles for the transportation of jail prisoners considered dangerous should have a divider between the driver's seat and other seat areas.

(2) Prisoners being transported may be handcuffed, placed in a restraining belt, or handcuffed to other prisoners of the same sex.

(3) No prisoner shall be handcuffed to a vehicle.

(4) Prisoners shall not be left in an unattended or unsupervised vehicle.

(5) A female should accompany any female prisoner transported in a vehicle, and a male should accompany male prisoners: PROVIDED, That if it is necessary for a person of the opposite sex to transport a prisoner, he or she may arrange with the jail to record and verify the mileage and time for the trip from point to point. ADVISORY.

NEW SECTION

WAC 289-18-100 STAFFING. (HOLDING FACILITIES.)

(1) General staffing. At all times in all jails, at least one staff member shall be awake, alert, and directly responsible for supervision and surveillance: PROVIDED, That this section does not require the presence of such staff when no prisoners are being housed or booked in the facility. (All holding facilities.)

(2) Same sex staffing. At all times a staff member of the same sex as the prisoner(s) shall be on duty or available within a reasonable time, which staff member shall be directly responsible for supervision which involves intimate physical contact or activities commonly afforded reasonable protection against opposite sex observation or supervision: PROVIDED, That this does not preclude jail staff from performing nonjail-related functions or being relieved from direct duties and remaining on call. (All holding facilities.)

(3) Surveillance.

(a) There shall be continual sight and/or sound surveillance of all prisoners.

(b) Such surveillance may be by remote means, provided there is the ability of staff to respond face-to-face to any prisoner within three minutes: PROVIDED, That special problem prisoners are subject to the more stringent personal observation and supervision requirements of other sections.

(c) Prior to completion of classification procedures, but in no case less than twenty-four hours, each prisoner shall be personally observed once in every thirty minute period. Following classification and proper living area assignment, and in the absence of unusual behavior or other concerns for prisoner security and health, such observation of prisoners by staff may be reduced to, but may not be less frequent than, at least once within every sixty minute period. (All holding facilities.)

(d) It is strongly recommended that all jails personally observe prisoners at least once within every thirty minute period. (All holding facilities.) ADVISORY.

(e) Personal staff observations of prisoners should be recorded in writing and retained in the jail records. (All holding facilities.) ADVISORY.

(f) Personal observation of prisoners for purposes of this or other sections of these standards may be by opposite sex staff so long as opposite sex privacy concerns are given appropriate protection. (All holding facilities.)

(g) Staff shall be alert to prisoner depression, dissension, family rejection, loneliness, resistance to staff or programs, and the effects of use of substances prohibited by facility rules or by law. When such symptoms are discovered, such persons shall be closely observed. (All holding facilities.)

NEW SECTION

WAC 289-18-110 SUPERVISION AND SURVEILLANCE. (HOLDING FACILITIES.) (1) Prisoner identification. All holding

facilities shall establish a positive means of identifying prisoners. (All holding facilities.)

(2) Perimeter security. Perimeter security shall be reviewed within the limit of existing physical plant limitations. (All holding facilities.)

(3) Security devices. Minimum necessary security devices shall be maintained in proper working condition at all times. (All holding facilities.)

(4) Prisoner authority. No prisoner shall be permitted to have authority over other prisoners. (All holding facilities.)

(5) Prisoner counts. A system should be maintained for taking and recording prisoner counts at least at shift changes and at other regular or irregular times as necessary. (All holding facilities.) ADVISORY.

(6) Contraband control. All holding facilities shall establish and maintain a written procedure regarding searches of prisoners, visitors, and the facility to prevent the introduction of contraband. All jails which permit visiting shall post a sign displaying the penalty for the introduction of contraband. (All holding facilities.)

NEW SECTION

WAC 289-18-120 CRITICAL ARTICLES. (HOLDING FACILITIES.) (1) All holding facilities shall establish procedures to insure that weapons shall be inaccessible to prisoners at all times. (All holding facilities.)

(2) Weapon lockers should be located outside of booking and confinement areas. (All holding facilities.) ADVISORY.

(3) Whenever possible, keys to weapon lockers should be located outside of booking and confinement areas. (All holding facilities.) ADVISORY.

(4) Keys and locking devices.

(a) Key regulations shall be established by the department of corrections or chief law enforcement officer and read and initialed by all staff. (30 day.)

(b) A control point shall be designated for key cataloging and logging the distribution of keys. (30 day.)

(c) There shall be at least two sets of jail facility keys, one set in use and the other stored securely but easily accessible to staff for use in the event of an emergency. (30 day.)

(d) All keys not in use shall be stored in a secure key locker inaccessible to prisoners. (30 day.)

(e) Emergency keys shall be marked and placed where they may be quickly identified in case of an emergency. (30 day.)

(f) Keys to locks on doors inside the security area of a jail shall be on a separate ring from keys to locks on doors or gates to the outside of the jails. At no time should both rings be carried by a person inside the jail simultaneously. (30 day.)

(g) Keys shall be accounted for at all times and the distribution certified at each shift change. (30 day.)

(h) Jail facility keys shall never be issued to a prisoner. (30 day.)

(i) If electronic devices are used in place of keys, there shall be key or other manual override capabilities available for immediate use in case of an emergency and/or a failure of the system. (30 day.)

(j) Key regulations shall be established by the department of corrections or chief law enforcement officer. All staff and officers who use the facility shall be familiar with the regulations. (72 hour, 4 hour.)

(5) The department of corrections or the chief law enforcement officer shall establish and maintain written procedures regarding storage of protective equipment and dangerous kitchen utensils, if applicable, which are consistent with WAC 289-18-220(3) and (4). (All holding facilities.)

NEW SECTION

WAC 289-18-200 STAFFING. (DETENTION AND CORRECTIONAL FACILITIES.) General staffing.

(1) At all times in all jails, at least one staff member shall be awake, alert, and directly responsible for supervision and surveillance.

(2) At all times a staff member of the same sex as the prisoner(s) shall be on duty or available within a reasonable time, which staff member shall be directly responsible for supervision which involves intimate physical contact or activities commonly afforded reasonable protection against opposite sex observation or supervision: PROVIDED, That this does not preclude jail staff from performing nonjail-related functions or being relieved from direct duties and remaining on call.

(3) There shall be continual sight and/or sound surveillance of all prisoners.

(4) Such surveillance may be by remote means, provided there is the ability of staff to respond face-to-face to any prisoner within three minutes: PROVIDED, That special problem prisoners are subject to the more stringent personal observation and supervision requirements of other sections.

(5) Prior to completion of classification procedures, but in no case less than twenty-four hours, each prisoner shall be personally observed once in every thirty minute period. Following classification and proper living area assignment, and in the absence of unusual behavior or other concerns for prisoner security and health, such observation of prisoners by staff may be reduced to, but may not be less frequent than, at least once within every sixty minute period.

(6) It is strongly recommended that all jails personally observe prisoners at least once within every thirty minute period. ADVISORY.

(7) Personal staff observations of prisoners should be recorded in writing and retained in the jail records. ADVISORY.

(8) Personal observation of prisoners for purposes of this or other sections of these standards may be by opposite sex staff so long as opposite sex privacy concerns are given appropriate protection.

(9) Staff shall be alert to prisoner depression, dissension, family rejection, loneliness, resistance to staff or programs, and the effects of use of substances prohibited by facility rules or by law. When such symptoms are discovered, such persons shall be closely observed.

NEW SECTION

WAC 289-18-210 SUPERVISION AND SURVEILLANCE. (DETENTION AND CORRECTIONAL FACILITIES.) (1) General security.

(a) All jails shall establish a positive means of identifying prisoners.

(b) Perimeter security shall be maintained.

(c) Security devices shall be maintained in proper working condition at all times.

(d) No prisoner shall be permitted to have authority over other prisoners.

(2) Prisoner counts. Detention and correctional facilities shall develop a system for taking and recording prisoner counts. This procedure shall be followed at shift changes and at other regular or irregular times.

(3) Contraband control.

(a) Any item or person entering or leaving a jail shall be subject to search.

(b) When housed in a jail facility, work release prisoners and prisoners who have regular contact outside the jail shall not be permitted contact with other prisoner classifications or entrance to areas frequented by other prisoners.

(c) There shall be irregularly scheduled searches for contraband in detention and correctional facilities and all areas frequented by prisoners.

(d) Conspicuously posted signs shall display the statutory penalty for giving or arranging to give anything to a prisoner without official authorization. Non-English speaking visitors shall be informed of the statutory penalty either verbally or by posted signs in the appropriate language.

NEW SECTION

WAC 289-18-220 CRITICAL ARTICLES. (DETENTION AND CORRECTIONAL FACILITIES.) (1) All detention and correctional facilities shall establish procedures to insure that weapons shall be inaccessible to prisoners at all times.

(2) Weapon lockers shall be located outside of booking and confinement areas.

(3) Whenever possible, keys to weapon lockers should be located outside of booking and confinement areas. ADVISORY.

(4) Keys and locking devices.

(a) Key regulations shall be established by the department of corrections or chief law enforcement officer and read and initialed by all staff.

(b) A control point shall be designated for key cataloging and logging the distribution of keys.

(c) There shall be at least two sets of jail facility keys, one set in use and the other stored securely but easily accessible to staff for use in the event of an emergency.

(d) All keys not in use shall be stored in a secure key locker inaccessible to prisoners.

(e) Emergency keys shall be marked and placed where they may be quickly identified in case of an emergency.

(f) Keys to locks on doors inside the security area of a jail shall be on a separate ring from keys to locks on doors or gates to the outside of the jails. At no time should both rings be carried by a person inside the jail simultaneously.

(g) Keys shall be accounted for at all times and the distribution certified at each shift change.

(h) Jail facility keys shall never be issued to a prisoner.

(i) If electronic devices are used in place of keys, there shall be key or other manual override capabilities available for immediate use in case of an emergency and/or a failure of the system.

(5) Protective equipment. Protective equipment, tear gas, and any other chemical suppressing agent shall be kept in a secure area, inaccessible to prisoners and unauthorized persons, but quickly accessible to officers of the facility.

(6) Kitchen utensils, tools, and toxic substances.

(a) Dangerous kitchen utensils and tools shall be marked for identification, recorded, and kept in a secure place.

(b) Toxic substances shall be kept in locked storage, and use of toxic substances shall be strictly supervised. Such substances, including cleaning supplies, shall be stored in a separate area from food supplies.

Chapter 289-19 WAC PRISONER CONDUCT

NEW SECTION

WAC 289-19-010 INTRODUCTION. It is assumed that disciplinary procedures are usually not applicable to 4 hour holding facilities, but where any disciplinary rules or sanctions exist, the facility must comply with the applicable provisions of this chapter.

NEW SECTION

WAC 289-19-100 PRISONER RIGHTS. (HOLDING FACILITIES.) Each holding facility should establish a written statement of prisoner rights, to be reviewed at the time of post-booking orientation, which should include, but not be limited to, access to courts, confidential access to attorneys and/or legal assistance, protection from abuse and corporal punishment, freedom from discrimination based on race or sex, access to information on facility rules and regulations and consequences, communication such as telephone calls, and access to necessary medical care. (30 day, 72 hour.) **ADVISORY.** (See WAC 289-16-120(2) - 4 hour.)

NEW SECTION

WAC 289-19-110 PRISONER RULES OF CONDUCT. (HOLDING FACILITIES.) (1) Rules established.

(a) The department of corrections or chief law enforcement officer shall establish uniform rules and disciplinary sanctions to guide the conduct of all prisoners which rules shall designate major and minor infractions. (30 day, 72 hour.)

(b) Appropriate rules relating to the imposition of discipline, if any, should be established in writing. (4 hour.) **ADVISORY.**

(2) Prisoners informed.

(a) Printed rules and possible disciplinary sanctions shall be posted conspicuously throughout the jail. Non-English speaking prisoners shall be informed of the rules either orally or by posted signs in the appropriate language. (30 day, 72 hour.)

(b) Prisoners should be informed of any facility rules and sanctions. (4 hour.) **ADVISORY.**

(3) Major infractions. If major infractions are handled within the facility, rather than as criminal proceedings, the requirements set by detention and correctional facility standards WAC 289-19-210(3) and 289-19-220(1) and (2) shall be followed. (30 day, 72 hour.) (Not applicable - 4 hour.)

(4) Minor infractions. Minor infractions should be handled informally as delineated in the standards for correctional and detention facilities. (30 day, 72 hour.) (Not applicable - 4 hour.)

NEW SECTION

WAC 289-19-120 DISCIPLINE. (HOLDING FACILITIES.) (1) Corrective action on forms of discipline.

(a) Nonpunitive corrective action should be the first consideration in any disciplinary proceedings. (30 day, 72 hour.) **ADVISORY.** (Not applicable - 4 hour.)

(b) When punitive measures are imposed, such measures shall be in accordance with law, and recommended sanctions, appropriate to the

severity of the infraction, and based on considerations of the individual involved. (30 day, 72 hour.) (Not applicable - 4 hour.)

(c) Acceptable forms of discipline shall include the following, if applicable:

(i) Loss of privileges;

(ii) Removal from work detail or other assignment;

(iii) Recommendation of forfeiture of "good time" credit;

(iv) Transfer to the maximum security or segregation section. (30 day, 72 hour.)

(2) Limitations on punishment.

(a) No prisoner or group of prisoners shall be given authority to administer punishment to any other prisoner or group of prisoners. (All holding facilities.)

(b) Deprivation of regular feeding, clothing, bed, bedding, or normal hygienic implements and facilities shall not be used as a disciplinary sanction. (30 day, 72 hour.) (Not applicable - 4 hour.)

(c) Correspondence privileges shall not be denied or restricted, except in cases where the prisoner has violated correspondence regulations. In no case shall the correspondence privilege with any member of the bar, holder of public office, the courts, or the department of corrections or chief law enforcement officer be suspended. (30 day, 72 hour.) (Not applicable - 4 hour.)

(d) Restrictions on visitation.

(i) Visitation privileges should not be denied or restricted as a sanction for infractions of rules of the institution unrelated to visitation. (30 day, 72 hour.) **ADVISORY.** (Not applicable - 4 hour.)

(ii) Under no circumstances shall attorney-client visits be restricted. (All holding facilities.)

(e) No prisoner shall be held in disciplinary segregation for more than five consecutive days without review by the disciplinary hearing body or chief law enforcement officer or his or her designee, and in no event shall a prisoner be held in disciplinary segregation for more than ten consecutive days as the result of any one hearing. (30 day.) (Not applicable - 72 hour, 4 hour.)

(f) Corporal punishment and physical restraint (e.g., handcuffs, leather restraints, and strait jackets) shall not be used as sanctions. Reasonable physical restraint when necessary for medical reasons shall be medically directed, except that in an emergency reasonable physical restraint may be used to control a grossly disturbed or violent prisoner, but the review and direction of the health care staff or local mental health professionals shall be promptly obtained. (All holding facilities.)

NEW SECTION

WAC 289-19-130 GRIEVANCE PROCEDURES. (HOLDING FACILITIES.) The department of corrections or chief law enforcement officer for each jail should develop and maintain procedures for the collection of prisoner grievances. Such procedures should provide for persons to whom grievances are to be directed, for timely review of grievances, and for written notification of action taken regarding the grievance. (30 day, 72 hour.) **ADVISORY.** (Not applicable - 4 hour.)

NEW SECTION

WAC 289-19-200 PRISONER RIGHTS. (DETENTION AND CORRECTIONAL FACILITIES.) Each detention and correctional facility should establish a written statement of prisoner rights, to be reviewed at the time of post-booking orientation, which should include, but not be limited to, access to courts, confidential access to attorneys and/or legal assistance, protection from abuse and corporal punishment, freedom from discrimination based on race or sex, access to information on facility rules and regulations and consequences, communication such as telephone calls, and access to necessary medical care. **ADVISORY.**

NEW SECTION

WAC 289-19-210 PRISONER RULES OF CONDUCT. (DETENTION AND CORRECTIONAL FACILITIES.) (1) The department of corrections or chief law enforcement officer shall establish uniform rules and disciplinary sanctions to guide the conduct of all prisoners, which rules shall designate major and minor infractions.

(2) Printed rules and possible disciplinary sanctions shall be posted conspicuously throughout the jail. Non-English speaking prisoners shall be informed of the rules either orally or by posted signs in the appropriate language.

(3) All major infractions of the rules shall be reported in writing to the supervisor prior to shift change by the staff member observing or discovering the act. Such reports shall become a part of the prisoner's jail record.

(4) Minor infractions. Minor violations of the rules may be handled informally by any staff member by reprimand, warning, or minor sanction as defined by local rules. Such incidents may become part of the prisoner's record only with the approval of the supervisor and verbal notification to the prisoner.

NEW SECTION

WAC 289-19-220 DISCIPLINE. (DETENTION AND CORRECTIONAL FACILITIES.) (1) Disciplinary committee.

(a) The director of the department of corrections or the chief law enforcement officer or such person's designee or designees, shall hear and decide all charges of major violation of facility rules and impose sanctions.

(b) It is recommended, but not required, that there be a committee of two or more staff to perform the function of disciplinary committee. **ADVISORY.**

(c) Any facility staff member involved in a charge shall not be allowed to participate as a hearing officer with respect to that charge.

(2) Disciplinary procedures.

(a) Any charges pending against a prisoner shall be acted on as soon as possible and no later than forty-eight hours (exclusive of Saturdays, Sundays, and holidays) after observation or discovery of the infraction.

(b) At least twenty-four hours prior to hearing, the prisoner shall receive a copy of the written infraction report made in conformance with WAC 289-18-050(1)(c). If the prisoner is illiterate, the infraction report shall be read to him.

(c) The prisoner alleged to have committed a major infraction shall have, and be promptly advised of, the following rights:

(i) The prisoner shall have the right to be present at all stages of the hearing, except during the decisional deliberations;

(ii) The prisoner shall be allowed to appear on his own behalf, to present witnesses, and to present documentary evidence unless the exercise of such rights would be unduly hazardous to institutional safety or correctional goals, in which case the prisoner shall be given a written statement of the reasons for such judgments and the prisoner's record shall contain a statement with regard to such grounds;

(iii) A prisoner who is unable to represent himself in such a hearing shall be informed of his right to be assisted by another person in understanding and participating in the proceedings;

(iv) The prisoner shall be advised of the decision in a written notice giving the reasons for the disciplinary action, if any, and evidence relied on; and

(v) The prisoner shall be permitted to appeal the disciplinary hearing decision to the department of corrections or the chief law enforcement officer or his or her designee in accordance with appeal procedures established by each facility and included in the printed rules.

(d) All disciplinary proceedings shall be recorded.

(e) There shall be a finding of guilt based on the preponderance of evidence before imposition of a sanction.

(f) The above provisions do not preclude imposition of administrative segregation or other appropriate limitations on freedom of the prisoner involved prior to such disciplinary proceeding: **PROVIDED**, That every such restriction shall be in accordance with the other provisions in these standards: **PROVIDED FURTHER**, That any such restrictions shall be based on legitimate grounds of institutional security or prisoner safety, and such action shall be noted in the prisoner's records.

(3) Corrective action or forms of discipline.

(a) Nonpunitive corrective action should be the first consideration in all disciplinary proceedings. **ADVISORY.**

(b) When punitive measures are imposed, such measures shall be in accordance with law, and recommended sanctions, appropriate to the severity of the infraction, and based on considerations of the individual involved.

(c) Acceptable forms of discipline shall include the following:

(i) Loss of privileges;

(ii) Removal from work detail or other assignment;

(iii) Recommendation of forfeiture of "good time" credit;

(iv) Transfer to the maximum security or segregation section.

(4) Limitations on punishment.

(a) No prisoner or group of prisoners shall be given authority to administer punishment to any other prisoner or group of prisoners.

(b) Deprivation of regular feeding, clothing, bed, bedding, or normal hygienic implements and facilities shall not be used as a disciplinary sanction.

(c) Correspondence privileges shall not be denied or restricted, except in cases where the prisoner has violated correspondence regulations. In no case shall the correspondence privilege with any member of the bar, holder of public office, the courts or the department of corrections or chief law enforcement officer be suspended.

(d) Restrictions on visitation.

(i) Visitation privileges shall not be denied or restricted as a sanction for infractions of rules of the institution unrelated to visitation. **ADVISORY.**

(ii) Under no circumstances shall attorney-client visits be restricted.

(e) No prisoner shall be held in disciplinary segregation for more than five consecutive days without review by the disciplinary hearing body or chief law enforcement officer or his or her designee, and in no event shall a prisoner be held in disciplinary segregation for more than ten consecutive days as the result of any one hearing.

(f) Corporal punishment and physical restraint (e.g., handcuffs, leather restraints, and strait jackets) shall not be used as sanctions. Reasonable physical restraint when necessary for medical reasons shall be medically directed, except that in an emergency reasonable physical restraint may be used to control a grossly disturbed or violent prisoner, but the review and direction of the health care staff or local mental health professionals shall be promptly obtained.

NEW SECTION

WAC 289-19-230 GRIEVANCE PROCEDURES. (DETENTION AND CORRECTIONAL FACILITIES.) The department of corrections or chief law enforcement officer for each jail should develop and maintain procedures for the collection of prisoner grievances. Such procedures should provide for persons to whom grievances are to be directed, for timely review of grievances, and for written notification of action taken regarding the grievance. **ADVISORY.**

NEW SECTION

WAC 289-20-100 RESPONSIBLE PHYSICIAN AND LICENSED STAFF. (HOLDING FACILITIES.) (1) Written agreement/authority.

(a) A physician licensed in the state shall be responsible for the organization and operation of the jail's medical services pursuant to a written agreement between the governing unit responsible for the jail, the chief law enforcement officer or department of corrections, as designated by the governing unit, and the responsible physician or qualified medical authority. (30 day.)

(b) There shall be, on file in the jail, a written agreement which certifies that necessary medical services will be provided on call twenty-four hours a day by one of the following:

(i) A physician licensed in the state; or

(ii) A health care professional supervised by a physician licensed in the state; or

(iii) A hospital or clinic.

(72 hour, 4 hour.)

(2) Security. All providers of medical services in holding facilities shall observe the security regulations which apply to jail personnel. (30 day, 72 hour.) (Not applicable - 4 hour.)

(3) Report. The responsible physician or medical authority should submit a quarterly report on the health delivery system and health environment and an annual statistical summary to the chief law enforcement officer or department of corrections. (All holding facilities.) **ADVISORY.**

(4) Licensing and certification. Contracts for medical services shall be made only with state licensed or certified health care providers. (All holding facilities.)

NEW SECTION

WAC 289-20-105 HEALTH CARE POLICIES AND PROCEDURES. (HOLDING FACILITIES.) (1) Written standard operating procedures approved by the responsible physician and governing unit or official designated by it shall consist of, but not be limited to, the following (*indicates does not apply to the first seventy-two hours exclusive of weekends and holidays).

(a) Receiving screening;

(b) Health appraisal data collection;*

(c) Nonemergency medical services;*

- (d) Deciding the emergency nature of illness or injury;
- (e) Availability of dental referral, examination, and treatment;*
- (f) Provision of medical and dental prostheses;*
- (g) First aid;
- (h) Notification of next of kin or legal guardian in case of serious illness, injury or death;
- (i) Providing chronic care;*
- (j) Providing convalescent care;*
- (k) Providing medical preventive maintenance;* ADVISORY
- (l) Screening, referral and care of mentally ill and retarded inmates, and prisoners under the influence of alcohol and other drugs;
- (m) Implementing the special medical program;
- (n) Delousing procedures;
- (o) Detoxification procedures; and
- (p) Pharmaceuticals.
(30 day.)
- (2) Written standard operating procedures approved by the health care provider and governing unit or official designated by it shall consist of, but not be limited to, the following:
 - (a) Receiving screening;
 - (b) Deciding the emergency nature of illness or injury;
 - (c) First aid;
 - (d) Notification of next of kin or legal guardian in case of serious illness, injury or death;
 - (e) Screening, referral and care of mentally ill and retarded inmates;
 - (f) Implementing the special medical program;
 - (g) Delousing procedures;
 - (h) Detoxification procedures; and
 - (i) Pharmaceuticals.
(72 hour.)
- (3) Written standard operating procedures approved by the health care provider and governing unit or official designated by it shall consist of, but not be limited to, the following:
 - (a) Receiving screening;
 - (b) Deciding the emergency nature of illness or injury;
 - (c) First aid;
 - (d) Notification of next of kin or legal guardian in case of serious illness, injury or death; and
 - (e) Pharmaceuticals.
(4 hour.)

NEW SECTION

WAC 289-20-110 HEALTH SCREENING. (HOLDING FACILITIES.) (1) Receiving screening shall be performed on all prisoners upon admission to the facility before being placed in the general population or housing area, and the findings recorded on a printed screening form approved by the jail commission. (All holding facilities.)

(2) Health appraisal. The health professional who conducts sick call shall review the screening forms of all prisoners remaining in jail no later than the second sick call day following their admission. All such prisoners shall receive a standardized medical examination to include appropriate tests and examinations indicated by their health history. (30 day.) (Not applicable - 72 hour, 4 hour.)

(3) The results of such examinations shall be recorded. (30 day.) (Not applicable - 72 hour, 4 hour.)

NEW SECTION

WAC 289-20-120 ACCESS TO HEALTH CARE. (HOLDING FACILITIES.) (1) If medical services are delivered in the jail, adequate equipment, supplies and materials shall be provided for the performance of primary health care delivery. (30 day, 72 hour.) (Not applicable - 4 hour.)

(2) At the time of admission to the facility, prisoners shall receive a written communication explaining the procedures for gaining access to medical services. (30 day, 72 hour.) (ADVISORY - 4 hour.)

(3) Prisoners' medical complaints shall be collected daily and acted upon. An appropriate priority shall be established and treatment by qualified medical personnel follow. (30 day, 72 hour.) (Not applicable - 4 hour.)

(4) Work release prisoners should be allowed to see their own physician outside of the jail and to receive consistent care within the jail. (30 day.) ADVISORY. (Not applicable - 72 hour, 4 hour.)

(5) Sick call.

(a) Sick call shall be conducted by a physician and/or other qualified medical personnel and shall be available to each prisoner at least once per week. (30 day.)

(b) Routine medical care shall be available. (72 hour.) (Not applicable - 4 hour.)

(6) Medical and dental prostheses shall be accessible when the health of the inmate-patient would otherwise be adversely affected as determined by the responsible physician. (30 day.) (Not applicable - 72 hour, 4 hour.)

(7) Emergency care.

(a) Standard first aid kits shall be conveniently available in all jails. (All holding facilities.)

(b) Emergency medical and dental care shall be available on a twenty-four hour basis in accordance with a written plan which includes:

(i) Arrangements for the emergency evacuation of the prisoner from the jail;

(ii) Arrangements for the use of an emergency medical vehicle;

(iii) Arrangements for the use of one or more designated hospital emergency rooms or other appropriate health facilities;

(iv) Arrangements for emergency on-call physician and dentist services when an emergency health facility is not located in a nearby community. (All holding facilities.)

NEW SECTION

WAC 289-20-130 HEALTH CARE TRAINING. (HOLDING FACILITIES.) (1) Jail personnel shall be trained in standard first aid equivalent to that defined by the American Red Cross and usual emergency care procedures prior to employment or during the probationary period. Written standard operating procedures and training of staff shall incorporate the following steps:

(a) Awareness of potential medical emergency situations;

(b) Notification or observation-determination that a medical emergency is in progress;

(c) First aid and resuscitation;

(d) Call for help; and

(e) Transfer to appropriate medical provider. (All holding facilities.)

(2) At least one person per shift within sight or sound of the prisoner shall have training in receiving screening and basic life support cardiopulmonary resuscitation (CPR). (All holding facilities.)

(3) Jail personnel shall be given training regarding the recognition of general symptoms of mental illness and retardation. (All holding facilities.)

(4) All persons delivering medication shall have training from the responsible physician and the chief law enforcement officer or department of corrections responsible for the jail. (30 day, 72 hour.)

NEW SECTION

WAC 289-20-140 MEDICATIONS CONTROL. (HOLDING FACILITIES.) (1) If stock medication is maintained within the holding facility, standard operating procedures shall comply with WAC 289-20-240(1)(a) through (c). (30 day, 72 hour.) (Not applicable - 4 hour.)

(2) The standard operating procedures for medication dispensing and administration shall include, but not be limited to, policies regarding:

(a) Nonmedical jail personnel delivering medication(s) to prisoners (RCW 69.41.030);

(b) Disposition of medication(s) brought in by prisoners at the time of admission to the facility;

(c) The medications system shall insure that all medications shall be kept in containers which have been labeled securely and legibly by a pharmacist or the prescribing physician, or in their original container labeled by their manufacturer. Medications shall not be transferred from the original container except for the preparation of a dose administration. The packaging for clear labeling up to the time of distribution to the prisoner indicates the name of the patient, name of medication, and the directions for the time of administration.

(d) Disposition of unused medication(s). (All holding facilities.)

(3) The standard operating procedures should include a policy regarding the maximum security storage and weekly inventory of all controlled substances, nonprescription medication(s), and any syringes, needles and surgical instruments. Jails that do not have an on-site pharmacy should provide for a consulting pharmacist to determine that medication(s) have been properly managed. (30 day, 72 hour.) ADVISORY. (Not applicable - 4 hour.)

(4) The person delivering medication shall be accountable for following the order of medical staff. (30 day, 72 hour.) (Not applicable - 4 hour.)

NEW SECTION

WAC 289-20-150 HEALTH CARE RECORDS. (HOLDING FACILITIES.) (1) Prisoner file maintenance.

(a) The responsible physician shall be responsible for maintaining patient medical record files. Such files shall contain the completed receiving screening form, health appraisal data collection forms, all findings, diagnoses, treatments, dispositions, prescriptions and administration of medications, notes concerning patient education, notations of place, date and time of medical encounters and terminations of treatment from long term or serious medical or psychiatric treatment. (30 day.)

(b) Copies of completed receiving screening forms and a record of all medication deliveries shall be kept on file at the jail. (72 hour, 4 hour.)

(c) A record of the date, time, place and name of the health care provider shall be retained on file at the jail in the event of any health care services given to prisoners. (72 hour, 4 hour.)

(2) Prisoner file confidentiality.

(a) The responsible physician shall insure the confidentiality of each prisoner's medical record file and such file shall be maintained separately from and in no way be part of the prisoner's other jail records. (30 day.)

(b) Medical records shall not be released to other persons or agencies without the written authorization of the prisoner. (All holding facilities.)

(3) The responsible physician or medical care provider shall communicate information obtained in the course of medical screening and care to jail authorities when necessary for the protection of the welfare of the prisoner or other prisoners, management of the jail, or maintenance of jail security and order. (All holding facilities.)

(4) Information regarding serious health problems discovered in the course of health screening shall be communicated to any transferring officer or receiving jail or correctional institution at the time of such transfer. (All holding facilities.)

(5) The person delivering medications shall record the actual date and time of the delivery. (All holding facilities.)

NEW SECTION

WAC 289-20-160 SPECIAL MEDICAL ISSUES. (HOLDING FACILITIES.) (1) Informed consent. All examinations, treatments and procedures affected by informed consent standards in the community shall likewise be observed for prisoner care. (All holding facilities.)

(2) Special medical.

(a) Jail staff shall report any symptoms of prisoner mental illness to medical personnel for appropriate evaluation and treatment. (All holding facilities.)

(b) Appropriate medically supervised treatment in accordance with written procedures established under WAC 289-20-205(1)(l) shall be given in the jail to prisoners determined to be mentally ill or under the influence of alcohol, opiates, barbiturates, and similar drugs when such care is not provided in a community health facility. (30 day, 72 hour.) (Not applicable - 4 hour.)

NEW SECTION

WAC 289-20-165 ACCESS TO FACILITIES. (HOLDING FACILITIES.) (1) Regular bathing (shower) shall be permitted at least twice each week. (30 day.) (Not applicable - 72 hour, 4 hour.)

(2) Each prisoner shall have access to toilet, sink, drinking water, and adequate heat and ventilation. (All holding facilities.)

NEW SECTION

WAC 289-20-170 FOOD. (HOLDING FACILITIES.) (1) Meal service.

(a) At least three meals a day shall be served at regular intervals. The morning meal shall be served within fourteen hours of the previous day's evening meal. (30 day, 72 hour.) (Not applicable - 4 hour.)

(b) Jails may arrange for prepared meal service or serve frozen packaged meals, provided these meals conform to the other requirements of this section. (30 day, 72 hour.) (Not applicable - 4 hour.)

(2) Nutritional and caloric intake.

(a) Jail menus shall be reviewed by the local county health department, the county extension service, or other qualified nutrition consultant available in the community to insure that diets approximate the dietary allowances specified. (30 day, 72 hour.) (Not applicable - 72 hour, 4 hour.)

(b) Diets ordered by medical staff shall be strictly observed. (30 day, 72 hour.) (Not applicable - 4 hour.)

(3) Food service operations. If there is a food service operation within the holding facility, it shall comply with WAC 289-20-270(3). (30 day, 72 hour.) (Not applicable - 4 hour.)

NEW SECTION

WAC 289-20-180 CLOTHING, BEDDING AND PERSONAL ITEMS. (HOLDING FACILITIES.) (1) Clothing.

(a) Provision shall be made for separate insect proof clothing storage to prevent migration of lice from infested clothing. (30 day, 72 hour.) (Not applicable - 4 hour.)

(b) Each jail shall insure that prisoners' outer garments are laundered and made available to them at least once a week, and that prisoners' undergarments and socks are laundered and made available to them at least twice a week. (30 day.) (Not applicable - 72 hour, 4 hour.)

(c) If prisoners are required to wear clothing issued by the facility, detention and correctional facilities shall, if necessary, clean and sanitize personal clothing prior to storage. (30 day.) (Not applicable - 72 hour, 4 hour.)

(2) Bedding.

(a) Prisoners shall be issued clean bed linens upon arrival and at least once a week thereafter. Bed linens shall include:

(i) One detachable cloth mattress cover and one sheet; or

(ii) Two sheets; or

(iii) One double sized sheet.

(30 day.) (ADVISORY - 72 hour.) (Not applicable - 4 hour.)

(b) Mattresses shall have a washable cover and shall be sanitized at least semiannually. (30 day, 72 hour.)

(c) If mattresses are used, they shall have a washable cover and shall be sanitized at least semiannually. (4 hour.)

(d) Blankets shall be issued upon arrival and shall be washed at frequent intervals to maintain a clean condition, but at least once every sixty days, and always before reissue. (30 day, 72 hour.)

(e) If blankets are issued, they shall be washed at frequent intervals to maintain a clean condition, but at least once every sixty days, and always before reissue. (4 hour.)

(3) Personal care items.

(a) Personal care items issued to each prisoner shall include, but not be limited to, soap and towel. Female prisoners shall be supplied with necessary feminine hygiene items. (30 day, 72 hour.) (Not applicable - 4 hour.)

(b) Toothpaste or powder, toothbrush and comb shall be provided for all prisoners. Such items shall be available for purchase or shall be issued at booking and as needed thereafter: PROVIDED, That indigent prisoners shall have access to these minimum items without cost. (30 day, 72 hour.) (Not applicable - 4 hour.)

(c) Each prisoner should be permitted to have a reasonable number of additional personal items, the possession of which does not substantially impede jail management or security. (30 day, 72 hour.) (ADVISORY. (Not applicable - 4 hour.)

NEW SECTION

WAC 289-20-190 SANITATION. (HOLDING FACILITIES.) (1) General sanitation.

(a) All jails shall be kept in a clean and sanitary condition, free from any accumulation of dirt, filth, rubbish, garbage, or other matter detrimental to health. (All holding facilities.)

(b) The housekeeping program shall include a daily general sanitation inspection and daily removal of trash and garbage. (30 day.) (Not applicable - 72 hour, 4 hour.)

(c) Each prisoner shall clean his own living area daily. Convicted prisoners may be required to clean other space within the confinement area and pretrial detainees may be permitted to do so voluntarily. (30 day.) (Not applicable - 72 hour, 4 hour.)

(2) Insects, rodents, and pets.

(a) Insects and rodents shall be eliminated by safe and effective means. Prisoners shall be removed from areas in which insecticides and rodenticides are being used. (All holding facilities.)

(b) Pets shall not be allowed in jail facilities. (All holding facilities.)

(3) Laundry. Each jail shall have adequate laundry facilities which meet the standards of WAC 289-12-030(2)(a)(vi) or shall arrange for adequate laundry services. (30 day, 72 hour.) (Not applicable - 4 hour.)

NEW SECTION

WAC 289-20-200 RESPONSIBLE PHYSICIAN AND LICENSED STAFF. (DETENTION AND CORRECTIONAL FACILITIES.) (1) A physician licensed in the state shall be responsible for the organization and operation of the jail's medical services pursuant to a written agreement between the governing unit responsible for the jail, the chief law enforcement officer or department of corrections, as designated by the governing unit and the responsible physician or qualified medical authority.

(2) The physician shall be solely responsible for the practice of medicine within the jail; however, security regulations applicable to jail personnel shall also apply to the medical personnel.

(3) The responsible physician or medical authority should submit a quarterly report on the health delivery system and health environment and an annual statistical summary to the chief law enforcement officer or department of corrections. **ADVISORY.**

(4) State licensure and/or certification requirements and restrictions shall apply to health care personnel.

(5) All medical personnel shall practice within the scope of their license. Where applicable, treatment shall be performed pursuant to a written standing or direct order.

(6) Verification of current licensing and certification credentials should be on file in the jail. **ADVISORY.**

NEW SECTION

WAC 289-20-205 HEALTH CARE POLICIES AND PROCEDURES. (DETENTION AND CORRECTIONAL FACILITIES.)

(1) Written standard operating procedures approved by the responsible physician and governing unit or official designated by it shall consist of but not be limited to the following (*indicates does not apply to the first seventy-two hours exclusive of weekends and holidays):

- (a) Receiving screening;
- (b) Health appraisal data collection;*
- (c) Nonemergency medical services;*
- (d) Deciding the emergency nature of illness or injury;
- (e) Availability of dental referral examination, and treatment;*
- (f) Provision of medical and dental prostheses;*
- (g) First aid;
- (h) Notification of next of kin or legal guardian in case of serious illness, injury or death;
- (i) Providing chronic care;*
- (j) Providing convalescent care;*
- (k) Providing medical preventive maintenance;* **ADVISORY**
- (l) Screening, referral and care of mentally ill and retarded inmates, and prisoners under the influence of alcohol and other drugs;
- (m) Implementing the special medical program;
- (n) Delousing procedures;
- (o) Detoxification procedures; and
- (p) Pharmaceuticals.

(2) The work of qualified medical personnel shall be governed by written job descriptions which shall be approved by the responsible physician.

NEW SECTION

WAC 289-20-210 HEALTH SCREENING. (DETENTION AND CORRECTIONAL FACILITIES.) (1) Receiving screening shall be performed on all prisoners upon admission to the facility before being placed in the general population or housing area, and the findings recorded on a printed screening form approved by the jail commission. The screening shall include inquiry into:

- (a) Current illnesses and health problems including those specific to women;
- (b) Medications taken and special health requirements;
- (c) Screening of other health problems designated by the responsible physician;
- (d) Behavioral observation, including state of consciousness and mental status;
- (e) Notation of body deformities, trauma markings, bruises, lesions, ease of movement, jaundice, and other physical characteristics;

(f) Condition of skin and body orifices, including rashes and infestations; and

(g) Disposition/referral of inmates to qualified medical personnel on an emergency basis.

(2) The health appraisal data collection shall be completed for each prisoner within fourteen days after admission to the facility in accordance with the adopted standard operating procedures: **PROVIDED,** That this subsection does not apply to prisoners who are able to receive medical care in the community.

(3) A standardized medical examination with appropriate comments about mental and dental status shall also be completed within fourteen days. As appropriate, laboratory and diagnostic tests to detect communicable disease, including venereal diseases and tuberculosis, and other tests and examinations shall be included within such examination.

(4) Health history and vital signs shall be collected by medically trained or qualified medical personnel who are properly licensed, registered or certified as appropriate to their qualifications to practice. Collections of all other health appraisal data shall be performed only by qualified medical personnel. Review of the results of the medical examination, tests, and identification of problems shall be made by a physician or designated qualified medical personnel. All health appraisal data shall be recorded on the health data forms approved by the responsible physician.

NEW SECTION

WAC 289-20-220 ACCESS TO HEALTH CARE. (DETENTION AND CORRECTIONAL FACILITIES.) (1) If medical services are delivered in the jail, adequate equipment supplies and materials shall be provided for the performance of primary health care delivery.

(2) At the time of admission to the facility, prisoners shall receive a written communication consistent with the provisions of WAC 289-16-010(1)(f), explaining the procedures for gaining access to medical services.

(3) Prisoners' medical complaints shall be collected daily and acted upon by the medically trained personnel. An appropriate priority shall be established and treatment by qualified medical personnel follow.

(4) Work release prisoners should be allowed to see their own physicians outside of the jail and to receive consistent care within the jail.

(5) Sick call.

(a) Sick call shall be conducted by a physician and/or other qualified medical personnel and shall be available to each prisoner as follows:

(i) In facilities of less than fifty prisoners, at least once per week at a minimum;

(ii) Facilities of fifty to two hundred prisoners at least three times per week; and

(iii) Facilities of over two hundred prisoners at least five times per week: **PROVIDED,** That the average daily population may be calculated exclusive of work release prisoners when they receive their care in the community.

(b) When sick call is not conducted by a physician, the responsible physician shall arrange for the availability of a physician at least once each week to respond to prisoner complaints regarding services which they did or did not receive from other medical providers; further, regardless of complaints, the responsible physician shall review the medical services delivered, as follows:

(i) At least once per month in jails with less than fifty prisoners;

(ii) At least every two weeks in facilities of fifty to two hundred prisoners; and

(iii) At least weekly in facilities of over two hundred prisoners.

(6) Medical and dental prostheses shall be accessible when the health of the inmate-patient would otherwise be adversely affected as determined by the responsible physician.

(7) Emergency care.

(a) First aid kit(s) shall be conveniently available in all jails. The responsible physician should approve the contents, number, location and procedure for periodic inspection of the kit(s).

(b) Emergency medical and dental care shall be available on a twenty-four hour basis in accordance with a written plan which includes:

(i) Arrangements for the emergency evacuation of the prisoner from the jail;

(ii) Arrangements for the use of an emergency medical vehicle;

(iii) Arrangements for the use of one or more designated hospital emergency rooms or other appropriate health facilities;

(iv) Arrangements for emergency on-call physician and dentist services when an emergency health facility is not located in a nearby community.

NEW SECTION

WAC 289-20-230 HEALTH CARE TRAINING. (DETENTION AND CORRECTIONAL FACILITIES.) (1) Jail personnel shall be trained in standard first-aid equivalent to that defined by the American Red Cross and usual emergency care procedures prior to employment or during the probationary period. Written standard operating procedures and training of staff shall incorporate the following steps:

- (a) Awareness of potential medical emergency situations;
 - (b) Notification or observation determination that a medical emergency is in progress;
 - (c) "First aid" and resuscitation;
 - (d) Call for help; and
 - (e) Transfer to appropriate medical provider.
- (2) At least one person per shift within sight or sound of the prisoner shall have training in receiving screening and basic life support cardiopulmonary resuscitation (CPR).
- (3) Jail personnel shall be given training regarding the recognition of general symptoms of mental illness and retardation.
- (4) All persons delivering medication shall have training from the responsible physician and the chief law enforcement officer or department of corrections responsible for the jail.

NEW SECTION

WAC 289-20-240 MEDICATIONS CONTROL. (DETENTION AND CORRECTIONAL FACILITIES.) (1) The jail's standard operating procedures for the proper management of pharmaceuticals shall include:

- (a) A formulary specifically developed for the facility when stock medications are maintained within the jail. Such formulary shall be in accordance with WAC 360-16-070 (clinic dispensary);
 - (b) A policy that jails with an on-site pharmacy shall adhere to regulations established by the state board of pharmacy. Such policy shall require, as a minimum, a consulting pharmacist for the operation of the pharmacy or the dispensing shall be done by each prescribing physician in person (WAC 360-16-070);
 - (c) A policy regarding the prescription of all medications with particular attention to behavior modifying medications and those subject to abuse;
 - (d) A policy regarding medication dispensing and administration which shall include, but not be limited to:
 - (i) Nonmedical jail personnel delivering medication(s) to prisoners;
 - (ii) Disposition of medication(s) brought in by prisoners at the time of admission to the facility;
 - (iii) Packaging of medication(s): The medications system shall insure that all medications are kept in containers which have been labeled securely and legibly by a pharmacist or the prescribing physician, or in their original container labeled by their manufacturer. Medications shall not be transferred from the original container except for the preparation of a dose administration. The packaging for clear labeling up to the time of distribution to the prisoner indicates the name of the patient, name of medication, and the directions for the time of administration; and
 - (iv) Disposition of unused medication(s).
 - (e) A policy regarding the maximum security storage and weekly inventory of all controlled substances, nonprescription medication(s), syringes, needles and surgical instruments. Jails that do not have an on-site pharmacy shall provide for a consulting pharmacist to determine that medication(s) have been properly managed.
- (2) The person delivering medication(s) shall be accountable for following the orders of medical staff.

NEW SECTION

WAC 289-20-250 HEALTH CARE RECORDS. (DETENTION AND CORRECTIONAL FACILITIES.) (1) The responsible physician shall be responsible for maintaining patient medical record files. Such files shall contain the completed receiving screening form, health appraisal data collection forms, all findings, diagnoses, treatments, dispositions, prescriptions and administration of medications, notes concerning patient education, notations of place, date and time of

medical encounters and terminations of treatment from long term or serious medical or psychiatric treatment.

(2) The responsible physician shall insure the confidentiality of each prisoner's medical record file and such file shall be maintained separately from and in no way be part of the prisoner's other jail records.

(3) The responsible physician or medical staff designated by him shall communicate information obtained in the course of medical screening and care to jail authorities when necessary for the protection of the welfare of the prisoner or other prisoners, management of the jail, or maintenance of jail security and order.

(4) A copy or summary of the medical record file shall routinely be sent to any jail or correctional institution to which a prisoner is transferred at the time of such transfer. A copy of such file or parts thereof shall also be transmitted upon the written authorization of a prisoner to designated physicians and medical facilities.

(5) The person delivering medications shall record the actual time of the delivery in a manner and on a form approved by the responsible physician.

NEW SECTION

WAC 289-20-260 SPECIAL MEDICAL ISSUES. (DETENTION AND CORRECTIONAL FACILITIES.) (1) Informed consent.

(a) All examinations, treatments and procedures affected by informed consent standards in the community shall likewise be observed for prisoner care.

(b) No prisoner shall be given medical treatment against his will except as necessary to prevent the spread of communicable disease, to relieve imminent danger to the life of the prisoner, or, in the case of serious mental disorders, as provided for under chapter 71.05 RCW. All procedures required by chapter 71.05 RCW shall be followed in any case of involuntary commitment or involuntary treatment of mentally ill persons within jails.

(c) In the case of minors, the informed consent of parent, guardian or legal custodian applies where required by law.

(d) In all cases, the responsible physician shall give a clear statement to the prisoner patient of his diagnosis and treatment except where the physician determines such explanation would be detrimental to the patient's welfare.

(2) Special medical.

(a) Jail staff shall report any symptoms of prisoner mental illness or retardation to medical personnel for appropriate evaluation and treatment.

(b) A special program shall exist for prisoners requiring close medical supervision. A written individual treatment plan for each of these patients shall be developed by a physician which includes directions to medical and nonmedical personnel regarding their roles in the care and supervision of these patients.

(c) Programs for the prevention of suicide, to include early identification of risk, appropriate diagnosis and referral, and close observation as required by WAC 289-18-200(1) (c) and (d), should be developed by medical staff. **ADVISORY.**

(d) Appropriate medically supervised treatment in accordance with written procedures established under WAC 289-20-205(1)(l) shall be given in the jail to prisoners determined to be mentally ill or under the influence of alcohol, opiates, barbiturates and similar drugs when such care is not provided in a community health facility.

NEW SECTION

WAC 289-20-265 ACCESS TO FACILITIES. (DETENTION AND CORRECTIONAL FACILITIES.) (1) Regular bathing (shower) shall be permitted at least twice each week.

(2) Each prisoner shall have access to toilet, sink, drinking water, and adequate heat and ventilation.

NEW SECTION

WAC 289-20-270 FOOD. (DETENTION AND CORRECTIONAL FACILITIES.) (1) General food requirements.

(a) At least three meals a day shall be served at regular intervals. The morning meal shall be served within fourteen hours of the previous day's evening meal.

(b) Jails may arrange for prepared meal service or serve frozen packaged meals, provided these meals conform to the other requirements of this section.

(c) Meals shall be served in a reasonable manner, hot food served hot, cold food served cold.

(2) Nutritional and caloric intake.

(a) Jail menus shall be reviewed by the local county health department, the county extension service, or other qualified nutrition consultant available in the community to insure that diets approximate the dietary allowances specified.

(b) Diets ordered by medical staff shall be strictly observed.

(3) Food service operations.

(a) Food service operations in jails shall conform to the sanitation rules and regulations set forth in chapter 248-84 WAC.

(b) All prisoners and other persons working in the food service shall be free from infectious disease.

(c) In all jails, a paid staff member responsible for kitchen supervision and food preparation shall obtain a food and beverage workers permit (chapters 248-86 and 248-87 WAC). Under supervision of this staff member, prisoners may assist in the kitchen and need not acquire a food and beverage workers permit.

(d) Local health departments may have more stringent requirements which, if ordered by them, shall be followed.

NEW SECTION

WAC 289-20-280 CLOTHING, BEDDING AND PERSONAL ITEMS. (DETENTION AND CORRECTIONAL FACILITIES.)

(1) Clothing.

(a) Provision shall be made for separate insect proof clothing storage to prevent migration of lice from infested clothing.

(b) Each jail shall insure that prisoners' outer garments are laundered and made available to them at least once a week, and that prisoners' undergarments and socks are laundered and made available to them at least twice a week.

(c) If prisoners are required to wear clothing issued by the facility, detention and correctional facilities shall, if necessary, clean and sanitize personal clothing prior to storage.

(2) Bedding.

(a) Prisoners shall be issued clean bed linens upon arrival and at least once a week thereafter. Bed linens shall include:

(i) One detachable cloth mattress cover and one sheet; or

(ii) Two sheets; or

(iii) One double sized sheet.

(b) Mattresses shall have a washable cover and shall be sanitized at least semiannually.

(c) Blankets shall be issued upon arrival and shall be washed at frequent intervals to maintain a clean condition, but at least once every sixty days, and always before reissue.

(3) Personal care items.

(a) Personal care items issued to each prisoner in detention and correctional facilities shall include, but not be limited to soap and towel. Female prisoners shall be supplied with necessary feminine hygiene items.

(b) Toothpaste or powder, toothbrush and comb shall be provided for all prisoners. Such items shall be available for purchase or shall be issued at booking and as needed thereafter: PROVIDED, That indigent prisoners shall have access to these minimum items without cost.

(c) Each prisoner should be permitted to have a reasonable number of additional personal items, the possession of which does not substantially impede jail management or security. ADVISORY.

NEW SECTION

WAC 289-20-290 SANITATION. (DETENTION AND CORRECTIONAL FACILITIES.) (1) General.

(a) All jails shall be kept in a clean and sanitary condition, free from any accumulation of dirt, filth, rubbish, garbage, or other matter detrimental to health.

(b) The housekeeping program shall include a daily general sanitation inspection and daily removal of trash and garbage.

(c) Each prisoner shall clean his own living area daily. Convicted prisoners may be required to clean other space within the confinement area and pretrial detainees may be permitted to do so voluntarily.

(2) Insects, rodents, and pets.

(a) Insects and rodents shall be eliminated by safe and effective means. Prisoners shall be removed from areas in which insecticides and rodenticides are being used.

(b) Pets shall not be allowed in jail facilities.

(3) Laundry. Each jail shall have adequate laundry facilities which meet the standards of WAC 289-12-030(2)(a)(vi) or shall arrange for adequate laundry services.

NEW SECTION

WAC 289-22-100 SERVICES. (HOLDING FACILITIES.)

(1) Commissary.

(a) The department of corrections or chief law enforcement officer of each holding facility shall either establish, maintain, and operate a commissary, or provide prisoners with a list of approved items to be purchased at least once a week at local stores. (30 day.)

(b) The department of corrections or chief law enforcement officer may provide prisoners with a list of approved items to be purchased at cost. (72 hour.) ADVISORY. (Not applicable - 4 hour.)

(c) Commissary items shall include books, periodicals, and newspapers, or the facility will make arrangements to order any such items from publishers and/or local newsstands. (30 day.) (Not applicable - 72 hour, 4 hour.)

(d) Proceeds from a jail facility store shall be used for operation and maintenance of the commissary service and/or prisoner welfare expenses. (30 day.) (Not applicable - 72 hour, 4 hour.)

(e) If jail rules do not permit prisoners to keep money on their persons, payments for commissary purchases shall be made by debit on a cash account maintained for the prisoner. All expenditures from a prisoner's account shall be accurately recorded and received. (30 day, 72 hour.) (Not applicable - 4 hour.)

(2) Barber/beauty shop services. Reasonable arrangements should be made to provide basic hair care. (30 day.) ADVISORY. (Not applicable - 72 hour, 4 hour.)

(3) Library services. In conjunction with state and/or local library service units, each jail should make provision for library services. (30 day, 72 hour.) (Not applicable - 4 hour.)

(4) Legal assistance.

(a) When adequate professional legal assistance is not available to prisoners for purposes of preparing and filing meaningful legal papers, a jail shall provide access to necessary law books and reference materials. (30 day.) (Not applicable - 72 hour, 4 hour.)

(b) Facility rules shall not prohibit one prisoner from assisting another in the preparation of legal papers. (30 day.) (Not applicable - 72 hour, 4 hour.)

(5) Religious services.

(a) Upon request from a prisoner, the jail facility shall arrange for confidential religious consultation. (30 day.)

(b) Upon request from a prisoner, the jail facility should arrange for confidential religious consultation. (72 hour.) (Not applicable - 4 hour.)

(c) Holding facilities with an average daily population of twenty-five or more should arrange for weekly religious services. (30 day.) ADVISORY. (Not applicable - 72 hour, 4 hour.)

(d) Prisoners should be permitted to observe religious holidays and receive sacraments of their faith. (30 day.) ADVISORY. (Not applicable - 72 hour, 4 hour.)

(e) Attendance at religious services shall be voluntary, and prisoners who do not wish to hear or participate shall not be exposed to such services. (30 day.) (Not applicable - 72 hour, 4 hour.)

(6) Counseling, guidance, and ancillary services.

(a) Counseling services should be available to provide prisoners in holding facilities with an opportunity to discuss their problems. (30 day, 72 hour.) ADVISORY. (4 hour.)

(b) The department of corrections or chief law enforcement officer may utilize volunteer counseling resources available in the community. (30 day, 72 hour.) ADVISORY. (Not applicable - 4 hour.)

(c) Professionals should serve in an advisory capacity when jail facility personnel or community volunteers engage in counseling. (30 day, 72 hour.) ADVISORY. (Not applicable - 4 hour.)

(d) Counselors may submit written recommendations to the chief law enforcement officer or disciplinary review body. (30 day, 72 hour.) ADVISORY. (Not applicable - 4 hour.)

(e) Prisoners are not required to receive counseling services unless ordered by the appropriate court or the disciplinary review body. (30 day, 72 hour.) (Not applicable - 4 hour.)

(f) Prisoners being discharged should receive assistance in obtaining employment, housing, acceptable clothing, and transportation. (30 day.) ADVISORY. (Not applicable - 72 hour, 4 hour.)

NEW SECTION**WAC 289-22-110 PROGRAMS. (HOLDING FACILITIES.)**

(1) Each prisoner should be allowed three hours per week of physical exercise, which should be outdoors, weather permitting. Indoor or outdoor exercise areas should be equipped with appropriate equipment and supplies to permit varied exercise or recreation. (30 day.) ADVISORY. (Not applicable - 72 hour, 4 hour.)

(2) Work programs. The department of corrections or chief law enforcement officer may establish work programs. (30 day.) ADVISORY. (Not applicable - 72 hour, 4 hour.)

(3) Participation in work programs by pretrial detainees shall be voluntary. (30 day.) (Not applicable - 72 hour, 4 hour.)

(4) Education or training programs. The department of corrections or chief law enforcement officer may allow the prisoner to contact or be contacted by community representatives of educational or training programs. (30 day, 72 hour.) ADVISORY. (Not applicable - 4 hour.)

(5) Leisure time activity programs. Holding facilities should provide opportunities for all prisoners to participate in leisure time activities of their choice and abilities. Such activities may include athletic programs, hobbies and crafts, table games, radio and television, motion pictures, cards, puzzles, checkers and chess. (30 day, 72 hour.) ADVISORY. (Not applicable - 4 hour.)

(6) Volunteers. Volunteers may be used to plan and supervise exercise programs and other leisure time activities, but paid staff member(s) should have designated responsibility for supervision of such programs. (30 day, 72 hour.) ADVISORY. (Not applicable - 4 hour.)

(7) Alternative to confinement programs. With the concurrence of the department of corrections or chief law enforcement officer, the disciplinary hearing body may recommend an alternative to confinement to the court of jurisdiction. (30 day.) ADVISORY. (Not applicable - 72 hour, 4 hour.)

NEW SECTION**WAC 289-22-200 SERVICES. (DETENTION AND CORRECTIONAL FACILITIES.)** (1) Commissary.

(a) The department of corrections or chief law enforcement officer of each detention and correctional facility shall either establish, maintain, and operate a commissary, or provide prisoners with a list of approved items to be purchased at least once a week at local stores.

(b) Commissary items shall include books, periodicals, and newspapers, or the facility will make arrangements to order any such items from publishers and/or local newsstands.

(c) Proceeds from a jail facility store shall be used for operation and maintenance of the commissary service and/or prisoner welfare expenses.

(d) If jail rules do not permit prisoners to keep money on their persons, payments for commissary purchases shall be made by debit on a cash account maintained for the prisoner. All expenditures from a prisoner's account shall be accurately recorded and receipted.

(2) Barber/beauty shop services. All jails shall make reasonable arrangements to provide basic hair care.

(3) Library services. In conjunction with state and/or local library service units, each jail shall make provision for library services.

(4) Legal assistance.

(a) When adequate professional legal assistance is not available to prisoners for purposes of preparing and filing meaningful legal papers, a jail shall provide access to necessary law books and reference materials.

(b) Facility rules shall not prohibit one prisoner from assisting another in the preparation of legal papers.

(5) Religious services.

(a) Upon request from a prisoner, the jail facility shall arrange religious services or confidential religious consultation.

(b) Detention and correctional facilities with an average daily population of twenty-five or more shall arrange for weekly religious services.

(c) Prisoners should be permitted to observe religious holidays and receive sacraments of their faith. ADVISORY.

(d) Attendance at religious services shall be voluntary, and prisoners who do not wish to hear or participate shall not be exposed to such services.

(6) Counseling, guidance, and ancillary services.

(a) Counseling services should be available to provide prisoners in detention and correctional facilities with an opportunity to discuss their problems, interests, and program. ADVISORY.

(b) The department of corrections or chief law enforcement officer may utilize volunteer counseling resources available in the community. ADVISORY.

(c) Professionals should serve in an advisory capacity when jail facility personnel or community volunteers engage in counseling. ADVISORY.

(d) Counselors may submit written recommendations to the chief law enforcement officer or disciplinary review body. ADVISORY.

(e) Prisoners are not required to receive counseling services unless ordered by the appropriate court or the disciplinary review body.

(f) Prisoners being discharged should receive assistance in obtaining employment, housing, acceptable clothing, and transportation. ADVISORY.

NEW SECTION**WAC 289-22-210 PROGRAMS. (DETENTION AND CORRECTIONAL FACILITIES.)**

(1) Each prisoner shall be allowed three hours per week of physical exercise, which shall be outdoors, weather permitting. Indoor or outdoor exercise areas shall be equipped with appropriate equipment and supplies to permit varied exercise or recreation.

(2) Work programs. The department of corrections or chief law enforcement officer may establish work programs. ADVISORY.

(3) Participation in work programs by pretrial detainees shall be voluntary.

(4) Education and training programs.

(a) The department of corrections or chief law enforcement officer should arrange for the development of an education and training program, utilizing local school districts, colleges, trade schools, unions, industry, interested citizens, and other available community, state, and federal resources. ADVISORY.

(b) Paid staff member(s) should have designated responsibility for supervision of the education and training programs. ADVISORY.

(c) Approved correspondence courses should be available at the prisoner's request and expense. ADVISORY.

(d) Jails should provide courses to prepare qualified prisoners for the "General Education Development" test, and provide the opportunity to take the test. ADVISORY.

(5) Leisure time activity programs.

(a) Detention and correctional facilities should provide opportunities for all prisoners to participate in leisure time activities of their choice and abilities. Such activities may include athletic programs, hobbies and crafts, table games, radio and television, motion pictures, cards, puzzles, checkers and chess. ADVISORY.

(b) Volunteers may be used to plan and supervise exercise programs and other leisure time activities, but paid staff member(s) should have designated responsibility for supervision of such programs. ADVISORY.

(6) Alternative to confinement programs. With the concurrence of the department of corrections, or chief law enforcement officer, the disciplinary hearing body may recommend an alternative to confinement to the court of jurisdiction. ADVISORY.

NEW SECTION**WAC 289-24-100 TELEPHONE USAGE. (HOLDING FACILITIES.)**

(1) The governing unit shall establish and post rules which specify regular telephone usage times and the maximum length of calls (not to be less than five minutes). (30 day.) (Not applicable - 72 hour, 4 hour.)

(2) Telephone usage hours shall include time during the normal work day and the time during the evening, at least once a week per prisoner: PROVIDED, That established social telephone usage hours shall not preclude reasonable access to a telephone to contact the prisoner's attorney or legal representative. (30 day.) (Not applicable - 72 hour, 4 hour.)

(3) Calls shall be at the prisoner's expense or collect, except for a reasonable number of telephone calls to a prisoner's attorney, or immediate family. (30 day.) (Not applicable - 72 hour, 4 hour.)

(4) Location of telephone facilities shall insure reasonable privacy, and telephone conversations shall not be monitored, tape recorded, or spot-checked except by court order. (30 day.) (Not applicable - 72 hour, 4 hour.)

(5) Reasons for calls shall be the personal concern of the prisoner, except in consideration of requests for emergency calls beyond normal telephone hours. (30 day.) (Not applicable - 72 hour, 4 hour.)

NEW SECTION

WAC 289-24-110 MAIL. (HOLDING FACILITIES.) (1) Newspapers, books, periodicals, other printed materials, and photographs.

(a) Prisoners shall generally be permitted to receive books, newspapers, periodicals and other printed materials or photographs which may lawfully be delivered through the United States mails. Such materials shall be denied a prisoner only if such denial furthers a substantial governmental interest in jail security or the welfare of prisoners or staff. (30 day.) (Not applicable - 72 hour, 4 hour.)

(b) If such materials are withheld from a prisoner for the reasons set forth in (a) of this subsection, the facility shall comply with the procedures in WAC 289-24-210(1)(b). (30 day.) (Not applicable - 72 hour, 4 hour.)

(2) Correspondence.

(a) General.

(i) Incoming or outgoing mail shall be retained no more than one day. (30 day, 72 hour.) (Not applicable - 4 hour.)

(ii) Except in the case of prisoners without funds, prisoners shall be permitted to mail out any number of letters. Prisoners without funds shall be permitted to mail up to three letters per calendar week at public expense or with postage purchased from the prisoner welfare fund, provided upon proper showing the number may be increased. Each prisoner shall be permitted to mail out any number of letters to his attorney, the courts, and elected federal, state, county and city officials. (30 day, 72 hour.) (Not applicable - 4 hour.)

(iii) No restriction shall be placed on the number of letters a prisoner may receive or on the persons with whom he may correspond, except by order of a court of competent jurisdiction, or as provided under (c) of this subsection. (30 day, 72 hour.) (Not applicable - 4 hour.)

(iv) These rules shall not preclude a prisoner being required to place his name and a return post office address on outgoing mail. (30 day, 72 hour.) (Not applicable - 4 hour.)

(b) Opening or censoring mail.

(i) No general restriction of the number of letters prisoners may receive or of classes of persons with whom they may correspond shall be made by facility rule or policy. (30 day, 72 hour.) (Not applicable - 4 hour.)

(ii) Incoming mail should be opened in the presence of the addressee. (30 day, 72 hour.) ADVISORY. (Not applicable - 4 hour.)

(iii) Whenever mail is not delivered by the jail staff to the prisoner to whom it is addressed, it shall be resealed. (30 day, 72 hour.) (Not applicable - 4 hour.)

(iv) Except by order of a court of competent jurisdiction, outgoing mail shall not be opened unless the responsible staff person designated by the department of corrections or chief law enforcement officer has reasonable grounds to believe that the content of a letter may present a clear and present danger to institutional security, or violates state or federal law. (30 day, 72 hour.) (Not applicable - 4 hour.)

(v) Incoming mail shall not be read or censored, but may be opened and inspected for contraband, cash, and checks. (30 day, 72 hour.) (Not applicable - 4 hour.)

(c) Notice of disapproval of prisoner mail. If a prisoner is prohibited from sending a letter, the facility shall comply with the procedures in WAC 289-24-210(2)(c). (30 day, 72 hour.) (Not applicable - 4 hour.)

(d) Limitations.

(i) Incoming mail of postconviction prisoners that is clearly marked as coming from an attorney, court, or elected federal, state, county or city officials shall be opened only in the presence of the addressee. (30 day, 72 hour.) (Not applicable - 4 hour.)

(ii) Mail to or from attorneys, courts or elected federal, state, county or city officials shall not be read. (30 day, 72 hour.) (Not applicable - 4 hour.)

(iii) There shall be no additional restrictions on prisoner correspondence for disciplinary or punishment purposes, unless the prisoner has violated rules as to correspondence. Upon proper showing of the alleged violation, the prisoner's mail may be restricted for a limited time, but such restriction shall not apply to attorney-client mail or correspondence with the courts. (30 day, 72 hour.) (Not applicable - 4 hour.)

(3) Packages. If a facility allows prisoners to send or receive packages, the facility shall comply with the procedures in WAC 289-24-110(3). (30 day, 72 hour.) (Not applicable - 4 hour.)

(4) Contraband.

(a) Items which are not permitted by jail rules may be destroyed, placed in the prisoner's personal property box, or returned collect to the sender. (30 day, 72 hour.) (Not applicable - 4 hour.)

(b) A receipt for permissible items received in the mail, including money or checks shall be signed by a staff member and a copy thereof promptly delivered to the prisoner. (30 day, 72 hour.) (Not applicable - 4 hour.)

(c) Contraband, as defined in RCW 9A.76.010, shall be turned over to the proper authorities, for handling as evidence, for disciplinary action or possible prosecution under RCW 9A.76.140, 9A.76.150, or 9A.76.160, or other applicable statute(s). (30 day, 72 hour.) (Not applicable - 4 hour.)

NEW SECTION

WAC 289-24-120 VISITATION. (HOLDING FACILITIES.)

(1) Security.

(a) Open visitation should be provided for those prisoners determined to present a minimal degree of risk to the safety and security of the institution. (30 day.) ADVISORY. (Not applicable - 72 hour, 4 hour.)

(b) The degree of security required for each prisoner during visitation shall be determined by the person or persons responsible for classification under WAC 289-16-130. (30 day, 72 hour.) (Not applicable - 4 hour.)

(2) Social visits.

The department of corrections or chief law enforcement officer shall establish and post rules governing social visits and specifying times therefor, using WAC 289-24-220 as a guideline. (30 day, 72 hour.) (Not applicable - 4 hour.)

(3) Business and professional visits.

(a) Each prisoner shall be allowed confidential visits from his attorney or legal assistants and his pastor. (All holding facilities.)

(b) The department of corrections or chief law enforcement officer should allow confidential visits from business, educational and law enforcement professionals. (30 day, 72 hour.) ADVISORY. (Not applicable - 4 hour.)

(4) Visitor regulations.

(a) Signs giving notice that all prisoners and their accompanying possessions are subject to search shall be conspicuously posted at the entrances to the facility and at the entrance to the visiting area. (30 day, 72 hour.) (Not applicable - 4 hour.)

(b) Any person may refuse a search but, subsequent to such refusal, may then be denied entrance. (30 day, 72 hour.) (Not applicable - 4 hour.)

(c) Other reasons for denying entrance to visitors shall include but not be limited to:

(i) An attempt, or reasonable suspicion of an attempt to bring contraband into the facility. (30 day, 72 hour.) (Not applicable - 4 hour.)

(ii) Obvious influence or effect of alcohol or controlled substances. (30 day, 72 hour.) (Not applicable - 4 hour.)

(iii) Request from the prisoner's physician. (30 day, 72 hour.) (Not applicable - 4 hour.)

(iv) Request from the prisoner. (30 day, 72 hour.) (Not applicable - 4 hour.)

(v) Reasonable grounds to believe a particular visit would present a substantial danger to jail security, or management, or to the welfare of prisoners, staff, or other visitors. (30 day, 72 hour.) (Not applicable - 4 hour.)

(d) If a visitor is refused admittance during regular visiting hours, the facility shall comply with the procedures in WAC 289-24-220(4)(d).

NEW SECTION

WAC 289-24-200 TELEPHONE USAGE. (DETENTION AND CORRECTIONAL FACILITIES.) (1) The governing unit shall establish and post rules which specify regular telephone usage times and the maximum length of calls (not to be less than five minutes).

(2) Telephone usage hours shall include time during the normal work day and time during the evening, at least once a week per prisoner: PROVIDED, That established social telephone usage hours shall not preclude reasonable access to a telephone to contact the prisoner's attorney or legal representative.

(3) Calls shall be at the prisoner's expense or collect, except for a reasonable number of telephone calls to a prisoner's attorney, or immediate family.

(4) Location of telephone facilities shall insure reasonable privacy, and telephone conversations shall not be monitored, tape recorded, or spot-checked except by court order.

(5) Reasons for calls shall be the personal concern of the prisoner, except in consideration of requests for emergency calls beyond normal telephone hours.

NEW SECTION

WAC 289-24-210 MAIL. (DETENTION AND CORRECTIONAL FACILITIES.) (1) Newspapers, books, periodicals, other printed materials, and photographs.

(a) Prisoners shall generally be permitted to subscribe to and otherwise receive books, newspapers, periodicals and other printed materials or photographs which may lawfully be delivered through the United States mails. Such materials shall be denied a prisoner only if such denial furthers a substantial governmental interest in jail security or the welfare of prisoners or staff.

(b) When such materials are withheld from a prisoner for the reasons set forth in (a) of this subsection:

(i) The prisoner shall receive immediate written notice that the publication is being denied, accompanied by an explanation of the reason(s) for the denial;

(ii) The affected prisoner shall be promptly informed of his right to have such decision reviewed by the disciplinary hearing body, the department of corrections, or the chief law enforcement officer upon written request;

(iii) A written decision of the review of the denial, including reason(s), shall be given to the prisoner requesting review.

(2) Correspondence.

(a) General.

(i) Incoming or outgoing mail shall be retained no more than one day.

(ii) Except in the case of prisoners without funds, prisoners shall be permitted to mail out any number of letters. Prisoners without funds shall be permitted to mail up to three letters per calendar week at public expense or with postage purchased from the prisoner welfare fund, provided upon proper showing the number may be increased. Each prisoner shall be permitted to mail out any number of letters to his attorney, the courts, and elected federal, state, county, and city officials.

(iii) No restriction shall be placed on the number of letters a prisoner may receive or on the persons with whom he may correspond, except by court order of a court of competent jurisdiction, or as provided under (c)(i) of this subsection.

(iv) These rules shall not preclude a prisoner being required to place his name and a return post office address on outgoing mail.

(b) Opening or censoring mail.

(i) No general restriction of the number of letters prisoners may receive or of classes of persons with whom they may correspond shall be made by facility rule or policy.

(ii) Incoming mail should be opened in the presence of the addressee. **ADVISORY.**

(iii) Whenever mail is not delivered by the jail staff directly to the prisoner to whom it is addressed, it shall be resealed.

(iv) Except by order of a court of competent jurisdiction, outgoing mail shall not be opened unless the responsible staff person designated by the department of corrections or chief law enforcement officer has reasonable grounds to believe that the content of a letter may present a clear and present danger to institutional security, or violates state or federal law.

(v) Incoming mail shall not be read or censored, but may be opened and inspected for contraband, cash, and checks.

(c) Notice of disapproval of prisoner mail.

(i) When a prisoner is prohibited from sending a letter, the letter and a written and signed notice stating the reason for disapproval, and indicating the portion(s) of the letter causing disapproval, shall be given the prisoner.

(ii) When a prisoner is prohibited from receiving a letter, the letter and a written signed notice stating the reason(s) for denial and indicating the portion(s) of the letter causing the denial shall be given the sender. The prisoner shall be given notice in writing that the letter has been prohibited, indicating the reason(s) and the sender's name.

(iii) When a prisoner is prohibited from sending or receiving mail, the affected prisoner is entitled to have such decision reviewed by the disciplinary hearing body, the department of corrections, or the chief law enforcement officer upon written request and shall be promptly informed of this right.

(iv) A written decision of the review of such denial shall be promptly delivered to the prisoner.

(d) Limitations.

(i) Incoming mail of postconviction prisoners that is clearly marked as coming from an attorney, court, or elected federal, state, county or city official, shall be opened only in the presence of the addressee.

(ii) Mail to or from attorneys, courts or elected federal, state, county, or city officials shall not be read.

(iii) There shall be no additional restrictions on prisoner correspondence for disciplinary or punishment purposes, unless the prisoner has violated rules as to correspondence. Upon proper showing of the alleged violation, the prisoner's mail may be restricted for a limited time, but such restriction shall not apply to attorney-client mail or correspondence with the courts.

(3) Packages.

(a) Incoming.

(i) If a facility allows prisoners to receive packages, all packages shall be opened and inspected.

(ii) Packages may be received only if the contents conform to rules adopted by the department of corrections or chief law enforcement officer, and a witnessed receipt for permissible items shall be promptly delivered to the prisoner, unless such package is opened in the presence of the prisoner and all items are given directly to him.

(b) Outgoing. Outgoing packages of prisoner's personal property shall be inspected to insure ownership and compliance with United States postal regulations.

(4) Contraband. Items which are not permitted by jail rules may be destroyed upon the prisoner's written request, placed in the prisoner's personal property box, or returned collect to the sender. A receipt for permissible items received in the mail, including money or checks shall be signed by a staff member and a copy thereof promptly delivered to the prisoner. Contraband, as defined in RCW 9A.76.010, shall be turned over to the proper authorities, for handling as evidence, for disciplinary action or possible prosecution under RCW 9A.76.140, 9A.76.150, 9A.76.160, or other applicable statute(s).

NEW SECTION

WAC 289-24-220 VISITATION. (DETENTION AND CORRECTIONAL FACILITIES.) (1) General.

(a) Open visitation should be provided for those prisoners determined to present a minimal degree of risk to the safety and security of the institution. **ADVISORY.**

(b) The degree of security required for each prisoner during visitation shall be determined by the person or persons responsible for classification under WAC 289-16-230.

(2) Social visits.

(a) The department of corrections or chief law enforcement officer shall establish and post rules governing social visits and specifying times therefor.

(b) Each prisoner shall be allowed a minimum of three hours total visitation per week.

(c) Immediate family, i.e., wives, husbands, children, parents, brothers, sisters, grandparents, aunts, and uncles, and any person so related through marriage, shall be given preference for allowed visitation time unless the prisoner specifies otherwise.

(d) Except for immediate family members, visitors seventeen years of age and under shall be accompanied by a parent or guardian.

(e) The department of corrections or chief law enforcement officer or his designee may grant special visitation privileges to visitors who have traveled long distances, to visitors for hospitalized prisoners, and for other unusual circumstances.

(3) Business and professional visits.

(a) Each prisoner shall be allowed confidential visits from his attorney or legal assistants and his pastor.

(b) By prior arrangement with the department of corrections or the chief law enforcement officer or his designee, a prisoner shall be allowed confidential visits for business or educational reasons.

(c) Law enforcement professionals shall be allowed to interview prisoners at reasonable times and with prior notice, unless it appears circumstances do no permit delay.

(4) Visitor regulations.

(a) Signs giving notice that all visitors and their accompanying possessions are subject to search shall be conspicuously posted at the entrances to the facility and at the entrance to the visiting area.

(b) Any person may refuse a search but, subsequent to such refusal, may then be denied entrance.

(c) Other reasons for denying entrance to visitors shall include but not be limited to:

- (i) An attempt, or reasonable suspicion of an attempt to bring contraband into the facility;
- (ii) Obvious influence or effect of alcohol or controlled substances;
- (iii) Request from the prisoner's physician;
- (iv) Request from the prisoner;
- (v) Reasonable grounds to believe a particular visit would present a substantial danger to jail security or management or the welfare of prisoners, staff, or other visitors.

(d) Whenever a visitor is refused admittance during regular visiting hours, the prisoner shall receive notice of the refusal stating the reasons therefor. The affected prisoner is entitled to have such decision reviewed by the disciplinary hearing body, the department of corrections, or the chief law enforcement officer upon written request and shall be promptly informed of this right. A written decision of the reviewing body's determination stating the reason(s) therefor, shall be furnished the prisoner who requested such review.

WSR 80-15-033

ADOPTED RULES

DEPARTMENT OF REVENUE

[Order PT 80-2—Filed October 9, 1980]

I, Charles W. Hodde, director of Revenue, do promulgate and adopt at Olympia, Washington, the annexed rules relating to:

- | | | |
|-----|----------------|--|
| New | WAC 458-60-002 | Real estate excise tax—Definitions. |
| New | WAC 458-60-045 | Payment of the excise tax on real estate sales—Recording instrument of conveyance. |
| New | WAC 458-60-046 | Real estate excise tax affidavit—Contents—Oath requirement—Signatures—Affidavit. |
| New | WAC 458-60-048 | Real estate excise tax affidavit—When required—When not required. |

This action is taken pursuant to Notice No. WSR 80-11-020 filed with the code reviser on August 12, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated pursuant to RCW 82.45.120, (section 1, chapter 134, Laws of 1980) and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 9, 1980.

By Charles W. Hodde
Director

NEW SECTION

WAC 458-60-002 REAL ESTATE EXCISE TAX — DEFINITIONS. (1) Sale price, gross sale price, or selling price, as used in this chapter, shall mean the consideration, including money or anything of value, paid or delivered or contracted to be paid or delivered in return for the transfer of the real property or estate or interest therein, and shall include the amount of any lien, mortgage, contract indebtedness, or other incumbrance, either given to secure the purchase price of any

part thereof, or remaining unpaid on such property at time of sale, but shall not include the amount of any lien or encumbrance for taxes, special benefits or improvements owing to the United States, the state or a municipal corporation thereof.

(2) Convey shall mean and be used interchangeably with sale, transfer, grant, assign, quitclaim, or warrant.

(3) Grantor shall mean and be used interchangeably with seller, transferor, or assignor.

(4) Grantee shall mean and be used interchangeably with purchaser, transferee, or assignee.

NEW SECTION

WAC 458-60-045 PAYMENT OF THE EXCISE TAX ON REAL ESTATE SALES — RECORDING INSTRUMENT OF CONVEYANCE. The tax imposed under the provisions of chapter 28A.45 RCW and chapter 458-60 WAC shall be paid to the county in which the property being conveyed is located and shall be collected by the county treasurer or similar county official charged with this responsibility, who shall cause a stamp evidencing satisfaction of the lien to be affixed to the instrument of conveyance. If no tax is due on the conveyance, the treasurer or similar official shall cause a stamp to be affixed to the instrument of conveyance stating the conveyance is not subject to the excise tax.

To determine if the conveyance is subject to the excise tax, a real estate excise tax affidavit, as defined by WAC 458-60-046, shall be filed with the county treasurer or other similar county official for each conveyance, except as provided otherwise in WAC 458-60-048.

The county auditor or recorder, as the case may be, shall not accept any instrument of conveyance for filing or recording until the instrument is stamped evidencing that the excise tax has been paid or that the conveyance is not subject to the excise tax.

In addition, no instrument of conveyance shall be filed or recorded by the county auditor or recorder if such property is classified or designated as forest land under chapter 84.33 RCW or classified as open space land, farm and agricultural land, or timber land under chapter 84.34 RCW unless the compensating or additional tax has been paid, or the new owner shall have signed a notice of continuance which shall either be on the excise tax affidavit or attached thereto.

NEW SECTION

WAC 458-60-046 REAL ESTATE EXCISE TAX AFFIDAVIT — CONTENTS — OATH REQUIREMENT — SIGNATURES — AFFIDAVIT. The real estate excise tax affidavit, as required by WAC 458-60-045, shall contain, (1) under oath and signature of the grantor, the following:

- (a) the full name and address of the grantor;
- (b) the legal description of the real property being conveyed;
- (c) the tax parcel or account numbers of said real property as assigned by the county assessor;
- (d) date of closing;
- (e) type of instrument conveying said property;
- (f) nature of conveyance;

(g) if exemption from the 1% excise tax is claimed, a full explanation thereof;

(h) gross conveyance or sales price as defined in WAC 458-60-002(1), RCW 28A.45.030 and RCW 82.45.030;

(i) an estimate of the value of any personal property involved in conveyance as agreed to by both parties;

(j) whether or not the land is classified or designated as forest land under chapter 84.33 RCW;

(k) whether or not the land is classified as open space land, farm or agricultural land, or timber land under chapter 84.34 RCW.

(2) under oath and signature of the grantee, the following:

(a) the full name and address of the grantee;

(b) the date of closing;

(c) type of instrument conveying said property;

(d) nature of conveyance;

(e) gross conveyance or sales price as defined in WAC 458-60-002(1), RCW 28A.45.030 and RCW 82.45.030;

(f) an estimate of the value of any personal property involved in the conveyance as agreed to by both parties;

(g) whether or not the grantee is acting as a nominee for a third party.

(3) a notice of continuance, signed by all new owners, for classified forest land (RCW 84.33.120), designated forest land (RCW 84.33.180) or classified open space land, farm and agricultural land or timber land (RCW 84.34.108) shall be attached to those affidavits conveying land subject to the provisions of chapters 84.33 and 84.34 RCW, if the new owner(s) desire(s) to continue said classification or designation. The notice of continuance shall be on a form prescribed by the department of revenue.

(4) the following optional questions which are not under oath of either the grantee or grantor, but are requested pursuant to the authority granted in RCW 84.41.041:

(a) Is this property at the time of sale exempt from property tax under RCW 84.36.____ (church, hospital, etc.)?

(b) Is this property at the time of sale subject to elderly, disability, or physical improvement exemption?

(c) Does building, if any, have a heat pump or solar heating or cooling system?

(d) Does this conveyance divide a current parcel of land?

(e) Does sale include current crop or merchantable timber?

(f) Does conveyance involve a trade, partial interest, corporate affiliates, related parties, trust, receivership, or an estate?

(g) Is this property land only, land with new building (new construction), or land with a previously used building?

(h) Is the principal use either agricultural, apartments (four or more units), commercial, condominium, industrial, mobile home site, recreational, residential, growing timber?

(5) the following two statements:

(a) If transfer is a gift, gift taxes are due and payable to the state of Washington by April 15th of the following year;

(b) If this land is classified or designated as forest land or current use land, a notice of continuance must be attached to this affidavit or the additional or compensating tax must be paid by the seller at the time of sale. See the notice of continuance for a definition of forest land and current use land.

(6) an affidavit of the grantor and grantee subscribed and sworn to before any state authorized notary public, except as provided otherwise in WAC 458-60-048. Said affidavit shall be worded as follows:

"The (Grantee) (Grantor) being first sworn on oath, says that the foregoing information, to the best of my knowledge, is a true and correct statement of the facts pertaining to the transfer of the above described real estate. Any person willfully giving false information in this affidavit shall be subject to the perjury laws of the state of Washington."

(7) a properly executed power of attorney granted by the grantee or grantor which will suffice for the signature of either, but the grantor of said power of attorney shall be liable for any penalties as if he had signed the affidavit himself.

Reviser's Note: Errors of punctuation or spelling in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

NEW SECTION

WAC 458-60-048 REAL ESTATE EXCISE TAX AFFIDAVIT — WHEN REQUIRED — WHEN NOT REQUIRED. (1) The real estate excise tax affidavit shall be required for the following, but the signature, under oath, will be required of either the grantee or grantor, but not both:

(a) conveyance from one spouse to the other as a result of a decree of divorce or dissolution of a marriage or in fulfillment of a property settlement agreement incident thereto;

(b) conveyance made pursuant to an order of sale by the court in any mortgage or lien foreclosure proceeding;

(c) conveyance made pursuant to the provisions of a deed of trust;

(d) conveyance of an easement in which consideration passes;

(e) a seller's assignment of deed and contract;

(f) a fulfillment deed;

(g) conveyance to the heirs in the settlement of an estate;

(h) conveyance to or from the United States, the state of Washington, or any political subdivision or municipal corporation of this state, except as provided for in subsection 2 of this section.

(2) The real estate excise tax affidavit shall not be required for the following:

(a) conveyance of cemetery lots or graves;

(b) conveyance for security purposes only and the instrument states on the face of it:

(i) for security only

(ii) to secure a debt

(iii) assignment of a debt

(iv) satisfaction of a debt

- (v) for collateral purposes only
- (vi) release of collateral
- (vii) to release security
- (c) conveyance to or from the United States, the state of Washington, or any political subdivision or municipal corporation of this state provided the following information regarding the conveyance is furnished to the appropriate county assessor and treasurer:
 - (i) the name of the grantor;
 - (ii) the name and address of the grantee;
 - (iii) the sales price;
 - (iv) the legal description of the property.
- (d) a lease of real property that does not contain an option to purchase;
- (e) a mortgage or satisfaction of a mortgage;
- (f) conveyance of an easement in which no consideration passes or an easement to the United States, the state of Washington, or any political subdivision or municipal corporation of this state.
- (g) a recording of a contract that changes only the contract terms and not the legal description, purchaser, or sales price, if the affidavit number of the previous transaction is reported.

WSR 80-15-034
ADOPTED RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Public Assistance)
 [Order 1554—Filed October 9, 1980]

I, N. Spencer Hammond, Ex. Asst. of the Department of Social and Health Services do promulgate and adopt at Olympia, Washington, the annexed rules relating to the amending of chapters 388-82, 388-83, 388-84, 388-85, 388-86, 388-87 and 388-91 WAC relating to medical assistance.

The action is taken pursuant to Notice No. WSR 80-11-063 filed with the code reviser on August 20, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated under the general rule-making authority of the secretary of Department of Social and Health Services as authorized in RCW 74.08.090.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 2, 1980.

By N. S. Hammond
 Executive Assistant

AMENDATORY SECTION (Amending Order 1402, filed 5/16/79)

WAC 388-82-020 MEDICAL CARE SERVICES. An individual eligible for medical care services (MS) under ~~((the fully))~~ a state-financed program is one who

cannot meet the eligibility requirements under any medical assistance (MA) program, but does meet either (1)((;)) or (2) ~~((and (3)))~~ of the requirements below:

- (1) Is eligible to receive a continuing general assistance grant or is a dependent other than a spouse included in a federal grant. Medical care service is limited to a major medical program as defined in WAC 388-86-120.
- (2) Is in need of medical care only (MO) ~~((, and has satisfied a deductible of \$200 over a twelve month period from the date of application, and meets financial criteria according to WAC 388-83-035 through 388-83-055))~~ by reason of an acute and emergent condition (see WAC 388-86-120), and has satisfied a deductible of one thousand dollars over a twelve month period and meets financial criteria according to WAC 388-83-045. Certification covers the acute and emergent condition only. See WAC 388-85-015(3) and 388-86-032.

~~((3)) Is medically eligible by reason of an acute and emergent condition (see WAC 388-86-120(2)). Certification covers the acute and emergent condition only, see WAC 388-85-015(3) and 388-86-032.)~~

AMENDATORY SECTION (Amending Order 1479, filed 1/18/80)

WAC 388-83-045 ALLOCATION OF AVAILABLE INCOME AND NONEXEMPT RESOURCES.

(1) For AFDC-related, H and MO recipients available income according to WAC 388-83-030 shall be allocated in the following order to:

(a) Maintenance needs of the applicant/recipient living in his own home, or of legal dependents living in the family home if the applicant/recipient is in an institution.

The maintenance standards in WAC 388-83-035 shall apply unless the legal dependents are applying for or receive public assistance ~~((when the grant standards in chapters 388-28 and 388-30 WAC shall apply))~~.

(b) ~~((Maintenance))~~ Personal needs allowance according to WAC ~~((388-83-040))~~ 388-92-035 for an applicant or recipient in an institution.

(c) Maintenance of the home of an individual who has been certified by a physician to need nursing home care (SNF, ICF, ICF/MR) for no more than six consecutive months.

(i) Income thus exempted must be used to retain the independent living situation of an individual with no dependents through payment of such requirements as rent or mortgages, real estate taxes, insurance, gas, electricity, oil, water or sewer necessary to maintain the home.

(ii) Up to one hundred eighty dollars per month may be exempted from the individual's actual income based on the verified actual cost to retain the home during six consecutive months.

(iii) The six-month period begins on the first of the month following date of admission for medicaid eligible recipients or the date of eligibility for individuals changing from private to medicaid and ceases when patient is discharged to an independent living arrangement or at the end of six months if the recipient has not been discharged.

(iv) CSO social service staff shall document initial need for the income exemption and review the individual's circumstances after ninety days.

(d) Supplementary medical insurance premiums for a FAMCO recipient related to Title XVI and not in a nursing home who is eligible for medicare during the month of authorization and the month following if not withheld from the RSI/RR benefit (see WAC 388-81-060).

(e) Health and accident insurance premiums for policies in force at time of application.

(f) Costs not covered under this program for medical or remedial care as determined necessary by the attending physician or, where appropriate, a dentist (see WAC 388-91-016(1)(a)), except that costs for services denied as medically inappropriate or not medically necessary, covered by medicare or other benefits or denied because of poor justification or late billing may not be exempted.

(g) Payments made or being made for covered or noncovered medical care incurred within three months prior to month of application (FAMCO recipient only).

(h) See WAC 388-92-025 for allocation of income for SSI-related recipients.

(2) Participation in cost of care shall apply to

(a) ~~((The monthly excess income multiplied by six or the anticipated excess income that will be available within a six-month period, whichever is greater))~~ Excess income, which is regular, anticipated, and income in kind available within a six-month period minus the monthly maintenance standard multiplied by six, if the individual is living outside an institution.

(b) Lump sum income which is applied in the month it is received or prorated over the period for which it is intended. The monthly maintenance standard is deducted for the month(s) for which it is considered, if the individual is living outside an institution.

~~((b))~~ (c) The monthly excess income of a person in an institution must not exceed the department rate for type of care provided after allowing for ((clothing and personal incidentals)) personal needs allowance. See WAC 388-92-035.

~~((c))~~ (d) The resources in excess of those listed in WAC 388-28-430(2)(a); WAC 388-83-055 and 388-83-060.

~~((d))~~ (e) Additional cash resources that come into possession of the recipient during a period of certification.

~~((e))~~ (f) For recipients of medical only (MO) ((and of noncontinuing general assistance who cannot be categorically related to Title XVI, and)) who are not undergoing detoxification for an acute alcoholic condition, participation with excess income or nonexempt resources is applicable after allowance is made for mandatory deductions of employment, union dues, the monthly maintenance standard and a ((200)) one thousand dollars deductible per family. The ((200)) one thousand dollars deductible per family shall be applied no more than once during a twelve-month period ((and is effective with the date of application)). ((The seven day rule in WAC 388-86-120(2)(h) applies to the accrual of the deductible. The \$200 deductible is the minimum amount

~~of participation during the twelve-month period. Participation from excess income is applied as in subdivision (2)(a) less any deductible.))~~ The one thousand dollars deductible is the minimum amount of participation during the twelve-month period. Participation from excess income is applied plus the deductible.

~~((f))~~ (g) For recipients of medical only (MO) ((and of noncontinuing general assistance who cannot be related to Title XVI,)) who are undergoing detoxification for an acute alcoholic condition, the ((200)) one thousand dollars deductible will not be required as an eligibility factor for the covered period of detoxification. There is no participation for the person undergoing detoxification. Applicants with income and resources in excess of the monthly maintenance standard are not eligible for detoxification. Continued hospitalization for a concurrent acute and emergent condition beyond the number of days approved for detoxification as a single diagnosis will require the application of the ((200)) one thousand dollars deductible.

(3) The twenty percent increase in social security benefits shall be considered exempt income when determining eligibility and participation for:

(a) Persons who in August 1972 received OAA, AFDC, AB or DA and also received RSI benefits and who became ineligible for OAA, AFDC, AB or DA solely because of the twenty percent increase in social security benefits under Public Law 92-336, and

(b) Current applicants for AFDC or FAMCO who were entitled to RSI benefits in August 1972 and would have been eligible for OAA, AFDC, AB or DA in August 1972 but are not currently eligible solely because of the twenty percent increase in social security benefits under Public Law 92-336.

AMENDATORY SECTION (Amending Order 1359, filed 12/8/78)

WAC 388-84-020 DENIAL OF APPLICATION.

(1) An application for medical care shall be denied when:

(a) An applicant for medical only does not have an acute and emergent medical condition or has not satisfied the ((200)) one thousand dollars deductible,

(b) The amount of excess income will exceed the cost of medical care,

(c) The applicant possesses nonexempt resources in excess of the standard.

(2) When an application is denied, the applicant shall be notified in writing of the specific reason(s) for the denial and shall be informed of the right to a fair hearing. See WAC 388-38-172.

AMENDATORY SECTION (Amending Order 1233, filed 8/31/77)

WAC 388-85-015 PERIOD OF CERTIFICATION. (1) For the recipient of federal aid medical care only (FAMCO), the period of certification may be up to six months, depending upon the anticipated duration of medical need, except that FAMCO related to aid to families with dependent children-employable (AFDC-

E), may be certified only to a maximum of three months. (~~((See WAC 388-83-027(5) for exception.))~~)

(2) For ~~((such))~~ a recipient in ~~((a skilled nursing home, state mental hospital, state school for the retarded, intermediate care facility, or tuberculosis sanatorium))~~ an institution with which the department has an agreement to provide care, no termination date is shown on the certification document; eligibility however, must be received within one year.

(3) For medical care services the period of certification shall be for one condition and not to exceed three months. The recipient of continuing general assistance who cannot be related to a federal aid category continues to be eligible for ~~((full scope medical care as long as the grant continues but is not eligible for out-of-state care))~~ major medical within program limitations as defined in WAC 388-86-120 for as long as the grant continues. Out-of-state care is not provided for recipients of continuing general assistance.

(4) ~~((A recipient of noncontinuing general assistance who cannot be related to a federal aid category and))~~ An applicant for medical only shall not be authorized medical care unless an acute and emergent condition exists as defined in WAC 388-86-032 and 388-86-120(2)(a), and until a deductible of ~~(((\$100))~~ one thousand dollars per family per year has been satisfied ~~((subsequent to initial application))~~. The certification period for medical only shall be for only as long as the acute and emergent condition is estimated to exist but the period of certification shall not exceed three months.

AMENDATORY SECTION (Amending Order 1299, filed 6/1/78)

WAC 388-86-005 SERVICES AVAILABLE TO RECIPIENTS OF MEDICAL ASSISTANCE. (1) For recipients of medical assistance (MA), the department shall authorize ~~((ambulance service and other means of transportation for medical reasons.))~~ early and periodic screening diagnosis and treatment services including dental, vision, and hearing services, to eligible individuals under twenty-one years of age, family planning services, home health agency services, inpatient and outpatient hospital care, other laboratory and x-ray services, skilled nursing home care, and physicians' services in the office or away from the office as needed for necessary and essential medical care. The department may authorize medically justified ambulance service and other approved transportation.

(2) The following additional services shall also be authorized when medically necessary: anesthetization services; blood; limited dental services; drugs and pharmaceutical supplies; eyeglasses and examination; hearing aids and examinations; ~~((medical-social services.))~~ oxygen; physical therapy services; special-duty nursing services; surgical appliances, prosthetic devices, and certain other aids to mobility.

(3) Treatment, transplants, dialysis, equipment and supplies for acute and chronic nonfunctioning kidneys are provided in the home, hospital and kidney center. ~~((See WAC 388-86-050(5)(7)).~~

(4) Organ transplants, other than kidney transplants are not provided as a part of physician services or hospital care authorized under the medical assistance program.

(5) Treatment to detoxify narcotic addiction cases in a hospital or on an outpatient basis is not provided as a part of the medical care program. The department will provide treatment for concurrent diseases and complications.

(6) Detoxification of an acute alcoholic condition will be provided only in a certified detoxification center or in a general hospital with certified detoxification facilities.

(7) Orthodontic treatment is not provided except for EPSDT recipients. See WAC 388-86-020(7).

(8) Treatment for obesity is not provided as part of the medical care program. The department will provide treatment for concurrent diseases and complications.

(9) Where evidence is obtainable to establish medical necessity, as defined in WAC 388-80-005, the department shall approve the request if the recipient or provider submits sufficient objective clinical information (including, but not limited to, a physiological description of the disease, injury, impairment or other ailment; pertinent laboratory findings; x-ray reports; and patient profiles).

~~((8))~~ (10) A request for medical services may be denied by the department if the requested service is not medically necessary as defined by WAC 388-80-005, is generally regarded by the medical profession as experimental in nature or as unacceptable treatment, unless the recipient can demonstrate through sufficient objective clinical evidence the existence of particular circumstances which render the requested service medically necessary.

~~((9))~~ (11) The department shall approve or deny all requests for medical services within fifteen days of the receipt of the request, except that if additional justifying information is necessary before a decision can be made, the request shall be neither approved nor denied but shall be returned to the provider within five working days of the original receipt. If additional justifying information is not returned within thirty days of the date it was returned to the provider, then the original request shall be approved or denied. However, if such information is returned to the department, the request shall be acted upon within five working days of the receipt of the additional justifying information.

~~((10))~~ (12) Whenever the department denies a request for medical services the department shall, within five working days of the decision, give written notice of the denial to the recipient and the provider. In order to fully inform the recipient, the notice shall state:

- (a) The specific reasons for the department's conclusion to deny the requested service.
- (b) If a fair hearing is requested, a medical assessment other than that of the person or persons involved in making the original decision may be obtained at the expense of the department of social and health services, and instructions on how to obtain such assessment.

- (c) The recipient has a right to a fair hearing if the request is made within ~~((thirty))~~ ninety days of receipt of the denial, with the instruction on how to request the hearing.
- (d) The recipient may be represented at the hearing by legal counsel or other representative.
- (e) That upon request, the ~~((ESSO))~~ CSO shall furnish the recipient the name and address of the nearest legal services office.

AMENDATORY SECTION (Amending Order 1402, filed 5/16/79)

WAC 388-86-020 DENTAL SERVICES. (1) The department shall provide dental care subject to limitations and conditions set forth below and further defined in current departmental memoranda and dental schedule of maximum allowances. For out-of-state dental care, see WAC 388-86-115(5).

~~(2) ((Prior authorization is required for nonessential dental services for recipients of medical assistance (MA) and for continuing general assistance (GAU). Prior authorization is not required for essential dental services, as defined in the current departmental memoranda and schedule of allowances. For dental services provided to recipients of EPSDT see WAC 388-86-027(1)(c) and (3). For out-of-state dental care see WAC 388-86-115(5).~~

~~(3) Dental services for recipients of medical only (MO) who have satisfied the deductible are subject to the following limitations:~~

~~(a) No care is provided outside the state of Washington except in border situations as specified in WAC 388-82-030(4).~~

~~(b) Dental treatment is limited to the relief of pain, which may or may not involve extraction, and surgical repair of the maxilla and/or mandible.~~

~~(4) Dentures and all other nonessential services, as designated in departmental memoranda and schedule of allowances, require prior approval.)~~ Dental coverage for recipients of medical assistance and continuing general assistance, who are not eligible for EPSDT, is limited to the following services:

(a) Restorative care will include:

- (i) fractured, new or lost fillings,
- (ii) repair or replacement of broken dentures,
- (iii) relines of dentures.

(b) Prophylaxis and topical application of fluoride are provided.

(c) Oral surgery with prior approval to correct extreme conditions.

(d) Treatment for pain and infection, including gingivitis and extractions.

(e) Dentures, full or partial with prior approval.

(f) Initial and periodic oral examinations are provided.

(3) EPSDT dental services include treatment necessary for the relief of pain and infection, restoration of teeth, and maintenance of dental health. See subsection (7) of this section.

(4) Dental services for recipients of Medical Only (M.O.) who have satisfied the deductible are subject to the following limitations:

(a) Dental treatment is limited to the relief of pain, which may or may not involve extraction, and surgical repair of the maxilla and/or mandible.

(b) No care is provided outside the state of Washington except in border situations as specified in WAC 388-82-030(4).

(5) Dentures provided by the department but subsequently lost will not be replaced except where medical necessity is clearly demonstrated and prior approval given by the chief of the office of medical assistance or his designee.

(6) Hospitalization for dental conditions, other than acute and emergent, requires prior approval of the chief of the office of medical ((assistance)) policy and procedure or his designee. Hospitalization for acute and emergent dental conditions requires approval.

~~(7) ((Orthodontia and fixed prostheses are not provided.))~~ Orthodontic treatment is defined as the use of any appliance, intraoral or extraoral, removable or fixed, or any surgical procedure designed to move teeth. The service is not provided except for EPSDT recipients. The following limitations apply to EPSDT related orthodontic treatment:

(a) Prior approval must be obtained from the office of medical policy and procedure.

(b) Treatment is limited to medically necessary services. See WAC 388-86-005.

(8) Recipients residing in nursing homes are eligible for dental care subject to the same regulations as those in the general recipient population with the following additional qualifications:

(a) The patient's attending physician will initiate a referral for dental care when a significant dental problem is identified by that physician, the patient, family, nursing home staff or nursing care consultant.

(b) The patient shall have freedom of choice of dentists, including referral to a dentist who has provided services to the patient in the past. The staff dentist may be called when the patient has no choice of dentists and concurs with the request.

(c) The department ((will provide transportation to a private dental office for treatment but)) may approve bedside dental care when sufficient justification exists to show transporting the patient is inappropriate.

(d) ((Examination or)) Treatment of a nonemergent nature in a nursing home, congregate care facility or group home requires prior approval for each patient. Payment for multiple screening examinations of patients in these settings will not be made.

AMENDATORY SECTION (Amending Order 1265, filed 1/13/78)

WAC 388-86-023 CHIROPRACTIC SERVICES.

(1) Services of a chiropractor, licensed by the state of Washington to perform within the scope of his license, shall be authorized.

(2) Services shall be subject to the following:

~~(a) ((Services shall be confined to treatment of recipients of continuing state or federal aid grants or federal aid medical care only.~~

~~(b))~~ Treatment shall be restricted to adjustment by hand any subluxation of the spine.

~~((c))~~ (b) X-rays shall be limited only to the following spinal areas:

(i) Cervical, anterior-posterior and lateral,

(ii) Thoracic (dorsal), anterior-posterior and lateral,

(iii) Lumbar and/or lumbo-sacral, anterior-posterior and lateral.

~~((d))~~ (c) Chiropractic consultation requires prior approval by the state office except that three treatments for acute and emergent conditions may be given out of state without prior approval for recipients related to federal programs.

(3) An eligible recipient desiring the services of a chiropractor shall have free choice of such services.

(4) Limitations specified in preceding subsections of this rule and in WAC 388-87-047 are absolute; no deviation will be permitted.

AMENDATORY SECTION (Amending Order 1457, filed 11/26/79)

WAC 388-86-027 EARLY AND PERIODIC SCREENING, DIAGNOSIS AND TREATMENT OF ELIGIBLE INDIVIDUALS UNDER TWENTY-ONE YEARS OF AGE. (1) The department will make available to individuals under twenty-one years of age (~~((see WAC 388-86-005))~~) who are recipients of medical assistance (MA), early and periodic screening and diagnosis to ascertain their physical and/or mental defects, and preventive health care and treatment to correct or ameliorate the defects and chronic conditions discovered thereby, to the extent provided under these rules. There will be freedom of choice in obtaining screening services from among participating providers. The following services are included in the program:

(a) Screening by providers of screening services that have been authorized by the division of medical assistance (~~(division)~~) to provide at least the following items in an unclothed physical examination:

(i) medical history

(ii) assessment of physical growth and nutritional status

(iii) developmental assessment (physical and mental)

(iv) inspection for obvious defects

(v) inspection of ears, nose, mouth, teeth and throat

(vi) visual screening; auditory testing

(vii) screening for cardiac abnormalities

(viii) screening for anemia

(ix) urine screening

(x) blood pressure (children twelve years of age or older)

(xi) assessment of immunization status and updating immunization

(xii) referral to a dentist for diagnosis and treatment for children three years of age and over.

(b) When indicated by screening findings, providers of screening services will provide, or refer eligible children for more definitive diagnostic study and/or treatment.

~~(c) ((Treatment shall be limited to the same amount, duration, and scope of care available to other recipients of medical assistance (MA), except regardless of any such limitations, eyeglasses, hearing aids and other kinds of treatment for visual and hearing defects, and at least such dental care as is necessary for relief of pain and infection and for restoration of teeth and maintenance of dental health shall be provided for those determined to be in need of such care, subject, however, to such utilization controls as may be imposed by the department.)) See WAC 388-86-005(7) and 388-86-020(3) and (7) for limitations of the dental program. See WAC 388-86-040(4) for management of hearing defects.~~

(2) The EPSDT requirement applies to all individuals under twenty-one years of age who are determined to be eligible for medical assistance (MA).

~~((3) EPSDT represents an exception to the requirement for comparability of services under Title XIX. EPSDT services to individuals under twenty-one years of age may be provided without providing similar services for those over twenty-one.))~~

AMENDATORY SECTION (Amending Order 1265, filed 1/13/78)

WAC 388-86-040 HEARING AIDS. (1) The department shall provide to recipients who are eligible for ~~((continuing assistance))~~ federal assistance grants or FAMCO:

(a) One new hearing aid under the following conditions:

(i) On prescription of an otolaryngologist, or the attending physician where no otolaryngologist is available in the community, within six months prior to receiving hearing aid dispenser services, and

(ii) With a minimum of 50 decibel loss in the better ear based on auditory screening at 500, 1000, 2000 and 4000 Hertz (Hz) with effective masking as indicated, and

(iii) When covered by a one year warranty, and/or

(b) One-time repair of a state purchased or privately owned hearing aid when covered by a ninety day warranty.

(2) Prior approval is required for the purchase or trial period rental of hearing aids and for one-time repair of a state purchased or privately owned hearing aid.

(3) After expiration of warranties, the owner is responsible for repairs and for purchase of batteries, any attachments and replacements.

(4) Individuals under age twenty-one must be referred to the Crippled Children's Service Conservation of Hearing Program.

(5) Individuals twenty-one years of age and over may sign a waiver statement declining the medical evaluation for religious or personal beliefs that preclude consultation with a physician.

(6) Hearings aids are not provided to recipients of continuing general assistance grants or medical only (M.O.).

AMENDATORY SECTION (Amending Order 1402, filed 5/16/79)

WAC 388-86-075 OUTPATIENT AND EMERGENCY CARE. (1) No authorization is required for recipients of ~~((continuing grants or))~~ federal assistance grants or federal aid medical care only to receive outpatient service, acute and emergent outpatient surgical care and other emergency care performed on an outpatient basis in a hospital. Justification for the service must be presented for payment.

(2) Local medical consultant approval is required for all services provided to recipients of medical only and continuing general assistance.

AMENDATORY SECTION (Amending Order 1402, filed 5/16/79)

WAC 388-86-085 PATIENT TRANSPORTATION. ~~((1))~~ ~~The department shall provide to eligible individuals transportation for necessary medical or remedial care purposes. (See also WAC 388-87-035).~~

~~(2) Ambulance transportation shall be provided when the medical necessity is such that the use of any other method of transportation is inadvisable.~~

~~(3) Transportation by private automobile furnished by a friend, relative or by the individual is payable at rates established by the department.~~

~~(4) The recipient of medical only must have satisfied the deductible of \$200 before transportation is provided for medical reasons.~~

~~(5) Providers of ambulance, cabulance, taxi and private automobile transportation service must show medical necessity justification on the billing document.)~~ (1) The department will assure the availability of necessary transportation for recipients to and from medical care providers.

(2) Ambulance or cabulance transportation shall be provided when medical necessity is clearly demonstrated or the physical condition of the recipient is such that the use of any other method of transportation is inadvisable.

(3) Transportation by taxi will be provided only when approved by the local medical consultant.

(4) Transportation by private automobile other than owned by recipient is payable at rates established by the department.

(5) The recipient of medical only must have satisfied the deductible of one thousand dollars before transportation is provided for medical reasons.

(6) Providers of ambulance, cabulance and private automobile transportation must show medical necessity justification on the billing document.

AMENDATORY SECTION (Amending Order 1346, filed 9/27/78)

WAC 388-86-095 PHYSICIANS' SERVICES. The department shall purchase the services of physicians participating in the program on a fee-for-service or contract basis subject to the exceptions and restrictions listed below.

(1) Physicians' services are provided through contract agreements for certain voluntary child care agencies and maternity homes according to WAC 388-86-105.

(2) Cost of a physical examination is authorized only for recipients related to federal programs under the following circumstances:

(a) For admission to skilled nursing facility if within 48 hours of admission or change of status from a private-pay to a Medicaid-eligible patient.

(b) Given as a screening under the EPSDT program; see WAC 388-86-027.

(c) For physical examination not covered by Medicaid, see the following:

(i) AFDC incapacity, see WAC 388-24-065~~((3)(c))~~(2)

(ii) Determination of whether an individual's health will or will not permit his return to his home, see WAC 388-28-420(4)(b)

(iii) Request by the claimant or examiner in a fair hearing procedure, see WAC 388-08-503

(iv) Foster home placement, see chapter 388-70 WAC

(v) Adoptive home placement, see WAC 388-70-440~~((d))~~

(vi) Employability for WIN program, see WAC 388-24-107(1)(b)

(vii) Incapacity for GAU program, see WAC 388-37-032(4).

~~(3) ((Combined dosage immunizations are authorized only when not otherwise available through local health facilities at no cost or as part of EPSDT screening.~~

~~(4))~~ When covered services of a consultant or specialist are necessary, approval need not be obtained from the medical consultant. Payment shall be made in accordance with local medical bureau practices.

(a) A fee for consultation shall not be paid when the specialist subsequently performs surgery or renders treatment for which flat fees or fees-for-service accrue.

~~((a))~~ (b) On initial or subsequent visits for the purpose of establishing a diagnosis and when services of a specialist or consultant are required, payment shall be limited to not more than two such services. Any additional specialist or consultant requests shall be justified by the attending physician and approved by the medical consultant.

~~((5))~~ (4) Limitations on payment for physicians' services:

(a) Payment for physicians' calls for nonemergent conditions in the office, home, intermediate care facility, nursing home, or outpatient department of a hospital is limited to one call per month except for screening under the EPSDT program if such screening is an additional visit during the month. Requests for payment for additional visits must be justified on form DSHS 525-100 at the time the billing is submitted by the physician.

(b) Payment for physicians' calls in a skilled nursing facility shall be limited to two calls per month. Requests for payment for additional visits must be justified on form DSHS 525-100 as in subdivision ~~((5)(a))~~ (4)(a).

(c) Payment for treatment of new and acute conditions with necessary x-ray, laboratory and consultative services shall be limited to two calls. Requests for payment for additional calls must be justified on form DSHS 525-100.

(d) On occasion, the physician may treat several members of a family in one office visit. An initial office fee is paid for the first member; payment for the remaining visits will be based on equitable adjustment determined by the medical director.

(e) Payment for hospital calls is limited to one call per day. This is applicable to other than flat fee care.

(f) Treatment for psychiatric or mental conditions by a psychiatrist shall be limited to one hour a month individual psychotherapy or equivalent combinations. When the individual is in an acute phase, however, up to a maximum of two hours psychotherapy may be authorized, when justified, during the first month of treatment. Subdivisions ~~((5)(a))~~ (4)(a) through ~~((5)(c))~~ (4)(e) also apply unless other rules take precedence. See WAC 388-86-067(1) for service provided by a contracting mental health center.

~~((6))~~ (5) All surgical procedures require approval by the medical consultant.

(a) Nonemergent surgical procedures require prior approval by the chief of the office of medical ~~((assistant))~~ policy and procedure or his designees ~~((including medical consultants employed full time by the department))~~.

(b) Minor surgery and diagnostic procedures performed in a physician's office do not require prior approval. ~~((Surgery for cosmetic and self-limiting conditions and))~~

(c) CAT scans must have prior approval.

(6) No payment will be made for cosmetic, reconstructive or plastic surgery which is defined as surgery performed to revise or change the texture, configuration or relationship of structure with continuous structure when the purpose is primarily psychological and will not correct or materially improve body function, or is intended to alter any part of the body which could be considered to be "normal" within broad range of variation for function, age, ethnic, or familial origin.

(7) A recipient of public assistance is not required to obtain medical care in the county of his residence. ~~((f))~~ See also WAC 388-83-025. ~~((g))~~

(8) For limitations on out-of-state physicians' services see WAC 388-86-115.

AMENDATORY SECTION (Amending Order 1402, filed 5/16/79)

WAC 388-86-120 STATE FINANCED MEDICAL CARE SERVICES. ~~((1))~~ A recipient of continuing general assistance who cannot be related to a federal aid category is eligible to receive the same scope of care as a recipient of medical assistance, except that no care will be provided outside the state of Washington other than in bordering states as specified in WAC 388-82-030(4).

(2) A recipient of medical only shall be authorized for treatment of acute and emergent conditions only. A deductible of \$200 per family over a twelve month period from date of a denied application for medical care shall be required before a positive determination of eligibility for medical only may be made. (See WAC 388-83-045(2)(c)).

(a) Citizenship is not a requirement of eligibility.

~~(b) All treatment and drugs must be approved by the medical consultant (see WAC 388-87-025(1)).~~

~~(c) Recipients undergoing detoxification for an acute alcoholic condition are not required to incur the \$200 deductible as an eligibility factor for the covered period of detoxification.~~

~~(d) Care for mental or psychiatric conditions is limited to hospitalization for an acute and emergent condition. Voluntary admission and involuntary commitment by the court are covered by the program for eligible recipients (see WAC 388-86-050(3)(a) and (b) for other limitations on stay).~~

~~(e) Hearing aids, chiropractic services and eyeglasses are not provided. Dental service is limited to relief of pain (see WAC 388-86-020).~~

~~(f) Care outside the state of Washington is not provided except in bordering states as specified in WAC 388-82-030(4).~~

~~(g) An "acute condition" is defined as having a short and relatively severe course, not chronic, and "emergent condition" is defined as occurring unexpectedly and demanding immediate action. In programs in which care is limited to the treatment of acute and emergent conditions it is understood that:~~

~~(i) The condition must be justified as acute and emergent, except that~~

~~(A) included will be those conditions of less urgency where medical experience indicates a failure to treat will usually result in the rapid development of an emergent situation;~~

~~(B) family planning and obstetrical care will be provided;~~

~~(C) when other care, including necessary drugs, is requested by the attending physician and approved by the local medical consultant as medically necessary, approval may be granted for service that might otherwise be excluded. See WAC 388-86-032.~~

~~(D) detoxification for an acute alcoholic condition will be provided only in a certified detoxification center or in a general hospital with certified detoxification facilities.~~

~~(ii) Once care is initiated, it is continued to a logical completion; that is, the provided care is complete in amount, duration, and scope within the limitations of the medical care program.~~

~~(iii) In addition, an acute and emergent condition will be assumed to exist when an applicant for medical care indicates he has an undefined medical condition. Provided financial eligibility has been established, at least one office call will be allowed for diagnosis. Treatment will be contingent upon the criteria for acute and emergent being met.~~

~~(h) If the department is notified within seven days of the date medical care began or within seven days after an individual who is admitted in a coma to a hospital or other treatment facility becomes rational, certification shall cover this period if all eligibility factors have been met. The three month retroactive certification period referred to in WAC 388-84-005(2) does not apply to the fully state funded medical program. If notification is received in the local office subsequent to the seventh day of initiation of service, certification shall begin on the date notification is received, with allowance for mail delivery.~~

~~Seven days shall include the date of initiation of services but shall not include Saturday, Sunday or legal holidays:))~~ (1) A recipient of a continuing general assistance grant who cannot be related to a federal aid category and a recipient of medical only shall be eligible for treatment of acute and emergent conditions only which requires medical consultant approval. Coverage for the recipient of continuing general assistance shall be termed "major medical."

(a) An "acute condition" is defined as having a short and relatively severe course, not chronic; and an "emergent condition" is defined as occurring unexpectedly and demanding immediate action, either of which includes:

(i) Rabies prevention inoculation. Initial treatment may be started on an emergency basis; however, the approval of the medical consultant must be requested within fourteen days, including date treatment was initiated. Rabies serum shall be requested from the epidemiology section of the department's division of health services, Olympia.

(ii) Hospitalization for acute and/or emergent psychiatric or mental conditions. Voluntary admissions in an acute or emergent phase of psychiatric or mental illness and involuntary commitments by the court are covered by the program for eligible recipients. (See WAC 388-86-050(3)(a) and (b) for limitations of stay).

(b) Major medical coverage includes service in response to an acute and emergent need applicable to the recipient of a continuing general assistance grant and includes those conditions of less urgency where medical experience indicates a failure to treat will usually result in the rapid development of an emergent condition. Certain nonacute and nonemergent conditions that are covered and may be approved by the medical consultant are:

(i) Specific maintenance drugs.

(A) Certain necessary drugs for conditions such as cardiovascular disease, diabetes, mental illness, epilepsy, nephritis, and carcinoma may be prescribed subject to approval by the local medical consultant. Examples of such drugs are cardiac control agents, insulin and oral antidiabetic tablets, anticonvulsant agents, psychotropic drugs, urinary antiinfective agents.

(B) Drugs for former patients of state mental institutions. Tranquilizers, antidepressants, antiepileptics, and agents used for treatment of drug-induced Parkinsonism may be provided to former patients of state hospitals and schools for the mentally retarded. The attending physician prescribes the necessary drugs on Form 6-02 mental hospitals for the mentally retarded and mails the prescription directly to the institution.

(ii) Nonemergent care, subject to approval of the medical consultant, if such care:

(A) Will avoid the need for hospitalization, or

(B) Is medically indicated in unusual circumstances by the attending physician and concurred with by the medical consultant.

(2) Limitations on medical services for eligible recipients of a continuing general assistance grant:

(a) Hearing aids are not provided.

(b) Care outside the state of Washington is not provided except in bordering states as specified in WAC 388-82-030(4).

(c) All treatment and drugs must be approved by the medical consultant. See WAC 388-87-025(1).

(d) Dental coverage as is described in WAC 388-86-020.

(e) Mental health services are provided only in local community mental health centers.

(3) One physician office call a month will be provided.

(4) When an applicant indicates that an urgent undefined medical illness exists, the condition will be regarded as acute and emergent and one office visit for diagnosis will be allowed, provided all financial eligibility criteria have been met. Treatment will be contingent upon the criteria for acute and emergent having also been met.

(5) Eligibility factors applicable to the recipient of medical only are:

(a) The applicant must have acquired one thousand dollars in unpaid medical expenses over a twelve-month period.

(b) The one thousand dollars in unpaid medical expenses is the deductible. This amount plus any participation is the responsibility of the recipient of medical only.

(c) Recipients undergoing detoxification for an acute alcohol condition are not required to incur the one thousand dollars deductible as an eligibility factor for the covered period of detoxification. When any other medical need is identified, the requirements for acute and emergent need and one thousand dollars deductible shall apply.

(d) Citizenship is not a requirement of eligibility.

(6) Additional factors applicable to the recipient of medical only are:

(a) Maternity care is covered for persons not categorically relatable or eligible under the "H" program. This will usually apply only to nonresidents who have no medical coverage through the state of residence and for out-of-state child welfare service cases. Care may include prenatal, delivery, post partum, and such ancillary medical services as may be requested by the attending physician and approved by the medical consultant.

(b) Hospitalization is covered for acute and/or emergent psychiatric or mental conditions. Voluntary admissions in an acute or emergent phase of psychiatric or mental illness and involuntary commitments by the court are covered by the program for eligible recipients. (See WAC 388-86-050(3) (a) and (b) for limitations on stay.)

(c) Hearing aids and eyeglasses are not provided.

(d) Care outside the state of Washington is not provided except in bordering states as specified in WAC 388-82-030(4).

(e) All treatment and drugs must be approved by the medical consultant. (See WAC 388-87-025(1).)

(f) Dental service is limited to the relief of pain.

(g) Mental health clinic services are not provided.

(h) Certification covers the acute and emergent condition (including specified exceptions) only.

REPEALER

The following sections of the Washington Administrative Code are hereby repealed:

(1) WAC 388-86-010 ANESTHETIZATION SERVICES.

(2) WAC 388-86-032 EXCEPTIONS—TREATMENT FOR ACUTE AND EMERGENT CONDITIONS.

(3) WAC 388-86-065 MEDICAL—SOCIAL SERVICES.

AMENDATORY SECTION (Amending Order 1402, filed 5/16/79)

WAC 388-87-025 SERVICES REQUIRING APPROVAL OF MEDICAL CONSULTANT. (1) All services rendered recipients of continuing general assistance and medical only require approval of the local medical consultant. When a medical emergency is alleged but not apparent, the otherwise eligible applicant for medical only may be referred to a participating physician for diagnosis and medical treatment if indicated. Such applicant may not be authorized this one office call unless ~~(((\$200))~~ one thousand dollars in unpaid medical ((costs)) bills have been accrued ((within seven days)) prior to application. Subsequent to such denial a medical only applicant has twelve months ~~((from the date of application))~~ to incur ~~(((\$200))~~ one thousand dollars in medical costs. For this one office call only, the signature on the authorization form may be by a CSO designee whose signature is on file in the ~~((professional audit section))~~ office of provider services.

(2) Services to recipients of medical assistance and continuing general assistance requiring approval are

(a) All surgical procedures require approval by the local medical consultant – see WAC 388-86-095(6) and 388-86-110. The requesting physician shall submit form 525-100 to the CSO. Only the surgeon need obtain written approval for surgery. The services of the surgical assistant and the anesthesiologist or anesthetist do not require approval. Their billings for payment, however, must show the patient's diagnosis and a cross reference to the surgeon. For approval of nonemergent surgery see WAC 388-87-027.

~~((i) Prior approval for all nonemergent surgical procedures shall be obtained from the chief of the office of medical assistance, from his professional designee, or from the full-time medical consultant in the CSO or regional office where such is employed.))~~

(b) Requests for medical appliances and prosthetic devices must have prior approval with the following exceptions:

(i) External braces involving neck, trunk and/or extremities.

(ii) Other nonreusable items costing less than \$150 if provision of the item will expedite a recipient's release from a hospital.

(c) All requests for reusable medical equipment and requests for surgical appliances provided, other than as described in subdivision (b), must be submitted on form 525-101 for the medical consultant's approval. If approval is received and the material to be supplied is to be

billed by another provider of service it is necessary for the physician to transmit the approved form 525-101 to the provider for billing purposes – see WAC 388-86-100.

(d) Requests for allergy testing shall be submitted on appropriate state form for prior approval by the local medical consultant. The extent of service to be provided shall be indicated. In the event an independent laboratory bills for the allergy testings, the requesting physician shall send the approved state form to the laboratory as the billing authority.

(e) Drugs not listed in the department's formulary or any single prescription exceeding the maximum limit established – see WAC 388-91-020.

(f) Admission to a hospital – see WAC 388-87-070 and 388-86-050(2).

(g) Initial provision of oxygen service for a recipient under sixty-five years of age in his own home. Repeat deliveries of oxygen for the same illness do not require medical consultant approval – see 388-86-080(1) and 388-87-080.

(h) Approval of physical therapy on an outpatient basis or in a nursing home when prescribed by the attending physician – see WAC 388-86-090.

(i) For certain border situations and out-of-state medical care – see WAC 388-82-030(4) and (5), and 388-86-115.

(j) All major appliances – see WAC 388-86-100.

(k) For consultant or specialist referral when such referrals exceed two such consultants or specialists – see WAC 388-86-095(4).

(l) Respiratory therapy in excess of five treatments requires approval.

(m) Speech therapy requires an initial evaluation; both the evaluation and subsequent therapy require prior approval – see WAC 388-86-098.

(n) Psychological evaluation provided in connection with medical diagnosis and treatment (see WAC 388-87-012(6)).

(o) Requests for audiometric evaluation require prior approval. See WAC 388-86-012.

(p) Requests for taxi transportation.

AMENDATORY SECTION (Amending Order 1359, filed 12/8/78)

WAC 388-87-070 PAYMENT—HOSPITAL CARE. (1) The department will pay hospital costs of eligible persons who are patients in general hospitals when such hospitals meet the criteria as defined in RCW 70.41.020. ~~((These persons))~~ Except for nonallowable revenue codes, reimbursable cost will be determined according to Medicare cost reimbursement methods. Recipients of Medicaid funded hospital services must have been approved as financially and medically eligible for hospitalization. They are:

(a) Recipients of federal aid grants, including essential persons,

(b) Children in foster care for whom the department is making payment, who are eligible for medical assistance,

(c) Recipients of continuing general assistance,

(d) Recipients of federal aid medical care only,

(e) Recipients of medical only who cannot be categorically related and who have satisfied the ~~((\\$200))~~ one thousand dollars deductible as specified by WAC 388-83-045(2)(e).

(2) Payment shall be based on the satisfaction of the criteria for the minimum deductible of ~~((\\$200))~~ one thousand dollars for recipients of medical only.

AMENDATORY SECTION (Amending Order 1473, filed 1/9/80)

WAC 388-91-010 DRUGS—PERSONS ELIGIBLE. (1) A drug formulary will list all drug preparations which are provided without prior approval of medical consultant. It will include a description of program limitations, rules and program policy and penalties. The decision to place drugs in the division of medical assistance program drug formulary is based on these criteria:

(a) The drug must be established as a part of necessary and essential care for the condition for which it is to be used.

(b) The drug must be in general use by the physicians practicing in Washington.

(c) The drug must be of moderate cost. Generic forms will be used when listed under DSHS or federal maximum allowable cost (MAC) programs. When two preparations of equal effectiveness but disparate costs are presented, the less expensive one will be selected for the formulary.

(d) Drugs must not be classified "ineffective" or "possibly effective" by the food and drug administration.

(e) The drug must not be experimental.

(2) The following process is used to determine the acceptability of a drug preparation for possible listing in the formulary((-):

(a) Objective, scientific information and utilization data is reviewed for appropriateness according to the criteria in subsection (1) of this section, by the program medical staff, or,

(b) The secretary may appoint an advisory committee in accordance with RCW 43.20A.360 to review and advise the division of medical assistance on the acceptability of the drug preparation.

(c) The medical director or his designee may make appropriate changes in the formulary consistence with subsection (1) of this section, and may accept recommendations of the advisory committee providing that action is in compliance with regulations governing the program and with acceptable management policies.

(d) Acceptable drugs will be included in the next subsequent edition of the formulary.

(3) In accordance with the department's rules and regulations drugs are provided for:

(a) The necessary and essential medical care of recipients of ~~((continuing assistance and of recipients of))~~ federal assistance grant or federal aid medical care only (FAMCO).

(b) The treatment of acute and emergent conditions of recipients of medical only who cannot be categorically related. These persons are identified by the notation "MEDICAL SERVICES LIMITED" on their medical identification coupons. Recipients of continuing general

assistance will have the notation "GAU—major medical—A/E" on their coupons. All drugs provided to such recipients require the approval of the local office medical consultant.

(c) Certain necessary drugs such as cardiac control agents, insulin and oral antidiabetic agents, anticonvulsant agents, urinary anti-infective agents, broncho-dilator agents and antineoplastics may be provided to recipients of continuing general assistance and medical only ~~((who have satisfied the \$200 deductible))~~. All such drugs provided require approval of the local office medical consultant.

WSR 80-15-035
PROPOSED RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Public Assistance)
[Filed October 9, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Social and Health Services, intends to adopt, amend, or repeal rules concerning AFDC—Eligibility, amending chapter 388-24 WAC;

and that the adoption, amendment, or repeal of such rules will take place at 9:00 a.m., Friday, October 17, 1980, in William B. Pope's office, 4th floor, J-24, Office Building #2, Olympia, Washington.

The authority under which these rules are proposed is RCW 74.08.090.

This notice is connected to and continues the matter noticed in Notice Nos. WSR 80-11-065 and 80-15-004 filed with the code reviser's office on 8/20/80 and 10/2/80.

Dated: October 6, 1980

By: N. S. Hammond
Executive Assistant

WSR 80-15-036
PROPOSED RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Public Assistance)
[Filed October 9, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Social and Health Services, intends to adopt, amend, or repeal rules concerning Individual and family grant program—Appeal process, amending WAC 388-53-100.

Correspondence concerning this notice and proposed rules attached should be addressed to:

N. Spencer Hammond
Executive Assistant
Department of Social and Health Services
Mailstop OB-44 C
Olympia, WA 98504

Interpreters for people with hearing impairments and brailled or taped information for people with visual impairments can be provided. Please contact William B. Pope, Chief, Office of Administrative Regulations, at State Office Building #2, 12th and Jefferson, Olympia, Washington, Phone (206) 753-7015, by November 12, 1980. The meeting site is in a location which is barrier free;

that such agency will at 10:00 a.m., Wednesday, November 26, 1980, in the Auditorium, State Office Building #2, 4th floor, 12th and Franklin, Olympia, WA, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 9:00 a.m., Tuesday, December 2, 1980, in William B. Pope's office, 4th Floor, 12th and Franklin, Olympia, WA.

The authority under which these rules are proposed is RCW 38.52.050.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to November 26, 1980, and/or orally at 10:00 a.m., Wednesday, November 26, 1980, Auditorium, Office Building #2, 12th and Franklin, Olympia, WA.

Dated: October 8, 1980

By: N. S. Hammond
Executive Assistant

STATEMENT OF PURPOSE

This statement is filed pursuant to RCW 34.04.045.

Amend WAC 388-53-100

Purpose of the rule or rule change is to eliminate the right to a fair hearing in the individual and family grant program. The federal government does not require fair hearings in this program and other existing appeals processes are thought to be sufficient.

The reason(s) these rules are necessary is to simplify administration.

Statutory authority for this action is found in RCW 38.52.050.

Summary of the rule or rule change:

The right to a fair hearing in the above program is eliminated.

Person or persons responsible for the drafting implementation and enforcement of the rule:

Name of initiator: Frances Van Parys

Title: Program Manager

Office: Bureau of Income Maintenance

Phone: 3-4374 Mail Stop: OB-31 C

The person or organization (if other than DSHS) who proposed these rules is: None

These rules are not necessary as a result of federal laws, federal court decisions or state court decisions.

dissatisfied with the administrative panel's determination of his/her eligibility and/or grant amount may request a reconsideration ((and Oral Hearing)). A request for a reconsideration ((and Oral Hearing)) shall be in writing and must state the reasons for the appellant's dissatisfaction with the administrative panel's determination. The appellant must mail a request for reconsideration ((and Oral Hearing)) as soon as possible not to exceed 15 days from receipt of the administrative panel's determination by certified mail to: ((Chief, Office of Hearings, P.O. Box 2465,)) Grant Coordinating Officer, Bureau of Income Maintenance, MS OB 31C, Olympia, WA 98504.

(2) When an applicant has requested a reconsideration ((and Oral Hearing)), the GCO or designee shall examine the appellant's file and any additional information received or presented for review of the administrative panel's determination. The GCO or designee shall make a decision affirming, modifying, or reversing the administrative panel's decision and mail the written decision to the appellant within 15 days of the GCO's receipt of the appeal; this period may be extended if both the appellant and the GCO agree. ((If the appellant is satisfied with the GCO or designee's decision he/she should withdraw the request for an oral hearing.

(3) ~~Unless the appellant withdraws his/her request for an oral hearing the hearing will be conducted and decided by the secretary's designee, the state appeal panel.~~

(4) ~~The state appeal panel hearing shall be conducted in accordance with chapter 388-08 WAC.~~

(5) ~~The state appeal panel shall consist of three hearings examiners selected by the Chief, Office of Hearings. One of the panel members shall preside at the hearing. A majority of the members shall render the final decision.~~

(6) ~~The state appeal panel shall render their decision within 60 days of their receipt of the request for hearing. The decision rendering time shall be extended by continuances assented to or delays caused by an appellant.)~~ The decision of the GCO/designee is final.

WSR 80-15-037

ADOPTED RULES

COMMISSION FOR VOCATIONAL EDUCATION

[Order 80-3, Resolution 80-42-2—Filed October 9, 1980]

Be it resolved by the Commission for Vocational Education, acting at Spokane Opportunities Industrialization Center, North 852 Summit Boulevard, Spokane, WA 99201, that it does promulgate and adopt the annexed rules relating to:

Amd	WAC 490-600-045	Exemptions.
Amd	WAC 490-600-050	Application, annual renewal and amendments.
Amd	WAC 490-600-071	Minimum cancellation and refund policy.
Amd	WAC 490-600-075	Complaints and violations.

This action is taken pursuant to Notice No. WSR 80-09-048 filed with the code reviser on July 14, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated pursuant to chapter 28B.05 RCW and is intended to administratively implement that statute.

This rule is promulgated pursuant to RCW 28B.05.050(3) which directs that the Commission for Vocational Education has authority to implement the provisions of Educational Services Registration Act.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as

AMENDATORY SECTION (Amending Order 1494, filed 3/20/80)

WAC 388-53-100 APPEAL PROCESS—GCO RECONSIDERATION(~~—STATE APPEAL PANEL~~). (1) An applicant who is

appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED September 25, 1980.

By Homer J. Halverson
Executive Director.

AMENDATORY SECTION (Amending Order 79-2, filed 12/21/79)

WAC 490-600-045 EXEMPTIONS. Organizations and institutions claiming exemption under the provisions of section 4, chapter 188, Laws of 1979 1st ex. sess. ((f))(RCW 28B.05.040)((+)), as now or hereafter amended, shall meet the following additional provisions:

(1) To be considered exempt under the ((Act))act, charitable organizations must be recognized by the United States Internal Revenue Service as being exempt under Section 501(c)(3) of the Internal Revenue Code as charitable organizations.

(2) Educational institutions that are candidates for accreditation or are on probation concerning their accreditation status are not considered eligible for exemption under the provision of section 4(5), chapter 188, Laws of 1979 1st ex. sess. ((f))(RCW 28B.05.040(5)((+))).

(3) Educational institutions exempted as accredited shall, not later than January 31 of each calendar year, notify the Commission of its operating in the state of Washington and shall furnish the Commission with one copy of its current catalog.

(4) Educational institutions requesting exemption under the hardship provision of section 13, chapter 188, Laws of 1979 1st ex. sess. ((f))(RCW 28B.05.130)((+)) shall make a request in writing which shall include:

(a) Name, address and telephone number of the institution,

(b) Name, title, address and telephone number of the chief administrative officer,

(c) Reference to the specific section or subsection for which the exemption is requested, and

(d) Statements and related probative documents which clearly identify the nature of the hardship and the institution's inability to meet the requirements of the section or subsection of the Act or of this rule and for which the exemption is requested, together with substantiation that such exemption will not unnecessarily frustrate the purposes of the Act or of this rule.

(5) Institutions offering instruction on federal installations solely to personnel employed by the Federal government, and their dependents, shall not be required to have separate institutional accreditation in order to qualify for exemption.

(6) Institutions not otherwise exempt that are of a religious character, but only as to those educational programs exclusively devoted to religious or theological objectives, and that are represented in an accurate manner in institutional catalogs or other official publications.

(a) The executive director shall ask the chief administrative office of any institution that may qualify for an exemption on religious grounds to forward to the Commission office a copy of the institution's catalog and/or any other official publications that describes the nature

of the institution and its programs. This information shall be used to verify the exempt status of the institution.

(b) For purposes of this subsection, "education programs exclusively devoted to religious or theological objectives" shall mean a program that has as its sole stated objective training in the religious beliefs of the controlling religious organization and/or preparation of students for occupations that are primarily church related.

(c) In the case of an institution that offers both religious and secular programs of instruction, the requirements of RCW 28B.05 and WAC 490-600 shall pertain only to the secular programs of the institution.

(d) If the executive director has reasonable cause to believe that the religious or theological programs offered by a religious institution are not represented in a materially accurate manner in the institution's catalog and/or other official publications the executive director shall proceed in accordance with the provisions of WAC 490-600-075.

(7) Educational institutions that are certified by the Federal Aviation Administration under 14 CFR 141 and those educational institutions certified under CFR 61 which offer instruction solely for avocational or recreational purposes.

(a) The executive director shall ask the chief administrative officer of any institution that is certified by the Federal Aviation Administration under 14 CFR 141 to provide evidence of current certification in order to verify the exempt status of the institution.

(b) Flight schools certified by the Federal Aviation Administration under 14 CFR 141 that collect payment(s) in advance for any flight training shall prepare and execute with each student paying in advance a contract containing at least:

(i) A description of the services to be rendered;

(ii) The terms under which the payments are to be made, and,

(iii) The terms of an equitable policy governing the refund of unused tuition charges that will occur in the event the student withdraws or is discontinued from training prior to completion of the contracted service.

To be considered exempt under the Act, such schools shall submit to the Commission for its approval a copy of such contract form together with notification to the Commission of its operating in the state of Washington. Initial notification shall be made in the instance of existing schools by no later than July 1, 1980 or in the instance of new schools in no less than 15 days prior to the commencement of its operation. In any instance, such notification and submission of document(s) shall occur annually not later than January 31 of each calendar year.

(c) Flight schools certified by the Federal Aviation Administration under 14 CFR 61 to be considered for exemption on the basis of offering instruction solely for avocational or recreational purposes must submit documentation supporting such a sole intent.

Reviser's Note: RCW 34.04.058 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

Reviser's Note: Errors of punctuation or spelling in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

Reviser's Note: The typographical errors in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

AMENDATORY SECTION (Amending Order 79-2, filed 12/21/79)

WAC 490-600-050 APPLICATION, ANNUAL RENEWAL AND AMENDMENTS. (1) At the time an educational institution initially registers it shall file with the commission a statement of organization in a form determined by that agency, which shall include the following:

(a) Name and address of the institution and a statement of whether it is a "private vocational school" or "dual purpose institution(²)." "

(b) Name and address of the owners of the institution, if the institution is incorporated then the names and addresses of the directors, officers and of any shareholders holding more than a ten percent interest shall be listed, or members of the governing board in the case of non-profit institutions.

(c) Name and address of the chief administrative officer and all agents of the institution.

(d) A copy of each of the materials that the institution is required to supply prospective students prior to enrollment in accordance with section 6(4), chapter 188, Laws of 1979 1st ex. sess. ((f))RCW 28B.05.060(4)(⁷), including a list, with addresses, of all locations at which instruction is offered.

(e) A signed written statement from the chief administrative officer of the institution attesting to the truth and accuracy of the information provided in the statement of organization and any amendments thereto and pledging that the institution will comply with all of the requirements of the act and the rules adopted thereunder.

(f) A surety bond, cash or other negotiable security as described in section 11, chapter 188, laws of 1979 1st ex. sess.

(g) ((Copies)) A copy of enrollment agreement and/or student contract used by the institution.

(h) ((Copies)) A copy of current balance sheet ((and)) or income statement (owner's equity analysis) covering preceding year's operations and clearly identifying the preceding year's gross tuition charges derived from students reporting a Washington residence. Institutions just starting operations at the time of initial registration may substitute a proposed operating budget for the succeeding twelve months period in lieu of an income statement.

(i) The name of a bank or other financial institution that may be consulted as a financial reference for the institution.

(2) At the time of each annual renewal, the institution shall file an amended statement of organization indicating any changes from the information previously submitted, as well as evidence of continued compliance with the bonding or security requirement of the act and the certification statement of the chief administrative officer.

The time of annual renewal shall be established as January 31 of each year.

(3) Additionally, any change of circumstances which would require amendment to the information reported in the statement of organization must be filed with the commission within thirty days of the change along with a recertification statement by the chief administrative officer.

Reviser's Note: RCW 34.04.058 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

Reviser's Note: The typographical errors in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

AMENDATORY SECTION (Amending Order 79-2, filed 12/21/79)

WAC 490-600-071 MINIMUM CANCELLATION AND REFUND POLICY. The intent of the minimum cancellation and refund policy, is to see that each applicant/student is assured minimum conditions of refund, and that the school will be assured of its integrity if it meets these minima. Many schools, however, have more liberal practices and the commission encourages such practices.

The school must state its policy and schedule of refunds in clear language that can be easily understood. The policy must apply to all terminations, for any reason, by either party.

(1) Enrollment agreements. The enrollment agreement form must clearly outline the obligations of both the school and the student, and provide details of the cancellation and refund policy of the school. A copy of the enrollment agreement and other data covering student costs must be furnished the applicant before any payment is made. No enrollment agreement is binding until it has been accepted in writing by an appropriate official at the school.

(2) Termination date. The termination date for resident schools for refund computation purposes is the last date of actual attendance by the student. The school may require notice of cancellation or withdrawal to be given by certified mail provided this requirement is stated in the enrollment agreement. The school may require that notice be made by parent or guardian if the student is below legal age.

If a student fails, without written explanation to proper institutional authorities, to attend classes for a period of thirty days during which resident classes are in session, the institution shall officially terminate the student from the program or course of instruction, and refund tuition and fees according to its published refund policy.

(3) Refund policy: Resident schools. Details of the school's own definite and established refund policy for cancellations and terminations must, as a minimum, comply with the following requirements:

(a) Rejection. An applicant rejected by the school shall be entitled to a refund of all moneys paid, less any standard application fee, not to exceed twenty-five dollars.

(b) Three-day cancellation. All moneys paid by an applicant will be refunded if requested within three business days after signing an enrollment agreement and making an initial payment.

(c) Other cancellation. Any applicant subsequently requesting cancellation, but before entering school and starting the course, shall be entitled to a refund of all moneys paid minus a fee of ten percent of the contract price of the course, but in no event may the school retain more than one hundred dollars.

(d) (~~First week~~) Initial participation. For a student terminating training after entering school and starting the course but within the first week, or first 10 percent of the program, whichever is less, the tuition charges made by the school shall not exceed ten percent of the contract price of the course plus the registration fee not to exceed one hundred dollars, but in no event more than three hundred dollars.

(e) After first week or 10 percent of the program. For a student terminating training after completing one week, or 10 percent of the program, whichever is less, but within the first twenty-five percent of the course, the tuition charges made by the school shall not exceed twenty-five percent of the contract price of the course plus a registration fee not to exceed one hundred dollars.

(f) After twenty-five percent. For a student terminating training after completing twenty-five percent but less than fifty percent of the course, the tuition charges made by the school shall not exceed fifty percent of the contract price of the course plus the registration fee of not more than one hundred dollars, and thereafter,

(g) The institution may retain one hundred percent of the stated tuition plus the registration fee which may not exceed one hundred dollars.

(h) Special cases. In case of student prolonged illness or accident, death in the family, or other circumstances that make it impractical to complete the course, the school shall make a settlement which is reasonable and fair to both.

(4) Application of policy. A school year for resident schools is defined by the period of time that the required learning experiences are fully available to the student. The definition of a "school year" must be established by resident schools for refund computation purposes and be published in the school's catalog.

(a) For courses longer than one school year in length, the cancellation and refund policy shall apply to the state course price attributable to each school year.

(b) All of the stated course price attributable to the period beyond the first year will be refunded when the student terminates during the first year.

(c) Percentage of course completion shall be computed on the basis of the amount of time in the course as expressed in clock, quarter, or semester hours or other academic periods as listed in the catalog.

(d) Any moneys due the applicant or student shall be refunded within thirty days after cancellation or termination.

(5) Extra expenses. Items of extra expense to the student, such as housing, board, instructional supplies or equipment, tools, student activities, laboratory fees, service charges, rentals, deposits, and all other extra

charges for which the student has contracted or paid in advance need not be considered in tuition refund computations provided they are separately shown in the enrollment agreement, catalog, or in other published data furnished to the student before enrollment, and provided further that the student was actually enrolled. When items of major extra expense are separately shown for this purpose the school must also state its policy for reasonable settlement of such charges in the event of early termination of the student and in no event shall the charges be more than the actual value of the materials or services used by the student.

(6) If promissory notes or contracts for tuition are sold or discounted to third parties, students or their financial sponsors must sign a statement authorizing such sales, and the school must comply with its cancellation and refund policy. Schools must notify all third parties of the cancellation and refund policy of the school.

(7) Institutions shall modify a student's contract and provide a pro rata refund to the student for any arbitrary and unilateral change by the institution that reduces contracted training time, which reduces course content, or other actions which adversely affect the training time or course content. The burden of proof that such changes did not adversely affect the student rests with the school if any dispute arises over a failure to apply such pro rata refund.

(8) For correspondence and/or home study schools the following applies as minimum refund policies:

(a) An enrollment may be canceled by an applicant student within three days from the day on which the enrollment agreement is signed. An applicant student requesting cancellation in whatever manner within this time shall be given a refund of all money paid to the school or its representatives.

(b) From three days after the day on which the enrollment agreement is signed and until the time the school receives the first completed lesson assignment from the student, upon cancellation, the school is entitled to the registration fee of either twenty-five dollars or fifteen percent of the tuition up to one hundred dollars, whichever is less.

(c) After receipt of the first completed lesson assignment, if the student requests cancellation, the school shall be entitled to a tuition charge which shall not exceed the following:

(i) Up to and including the first ten percent of the course, the registration fee plus ten percent of the tuition.

(ii) After completing ten percent of the course and up to and including the completion of twenty-five percent of the course, the registration fee plus twenty-five percent of the tuition.

(iii) After completing twenty-five percent of the course and up to and including completion of fifty percent of the course, the registration fee plus fifty percent of the tuition.

(iv) If the student completes more than half of the course, the full tuition. The amount of the course completed shall be the completed lesson assignments received for service by the school as compared to the total lesson assignments in the course.

(d) Upon cancellation, all money due the student shall be refunded within thirty days.

Reviser's Note: RCW 34.04.058 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

Reviser's Note: The typographical errors in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

AMENDATORY SECTION (Amending Order 79-2, filed 12/21/79)

~~WAC 490-600-075 ((DENIAL OR DISCONTINUANCE OF CERTIFICATION. If the Commission shall determine that any school is not maintained and operated, or cannot be reasonably maintained and operated, in compliance with the minimum standards prescribed in the Act and by this rule, the Commission after notice and an opportunity for a hearing may deny the issuance or continuance of a certificate of registration or may establish conditions in conformity with these provisions which shall be met by said school prior to issuance or continuance of such a certificate. If the Commission finds that the public health, safety or welfare imperatively requires emergency action, and incorporates a finding to that effect in its order, a summary suspension of a certificate of registration may be ordered pending proceedings for revocation or other actions.~~

COMPLAINTS AND VIOLATIONS. (1) Upon receipt of complaint or other allegation that institution has failed or is failing to comply with the provisions of the act or this chapter, the executive director shall notify the institution by mail of the nature of such allegations and shall investigate the facts surrounding the allegations, or allegation may be initiated by the executive director.

(2) If preliminary findings indicate that a violation or violations may have occurred or are occurring, the executive director shall attempt, through mediation and conciliation to effect compliance and, in the case of a complaint, bring about a settlement between the institution and the complainant.

(3) If no agreement is reached through the mediation and conciliation process, the executive director shall file a formal complaint with the Commission and notify the institution of the conduct which warrants the complaint. Based upon a finding pursuant to RCW 34.04.170, the complaint may include an order for a summary suspension of registration, pending procedures for revocation, suspension or other action under the hearing procedure provided for in WAC 490-600-077.

(4) Nothing in this section shall be construed to require a complainant to exhaust the remedies of this section prior to proceeding under any other remedies available under the law.

Reviser's Note: The typographical errors in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

WSR 80-15-038
EMERGENCY RULES
DEPARTMENT OF FISHERIES
[Order 80-150—Filed October 9, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is this closure is necessary to ensure the accuracy of run size updates from scheduled chum evaluation fisheries.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 9, 1980.

By Gordon Sandison
Director

NEW SECTION

WAC 220-28-01000S CLOSED AREA. Effective 12:01 a.m. October 12 through 5:00 p.m. October 19 and from 9:00 p.m. (Pacific Daylight Time) October 20 through 5:00 a.m. (Pacific Standard Time) October 27, 1980, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes in Puget Sound Salmon Management and Catch Reporting Area 10.

NEW SECTION

WAC 220-28-01100G CLOSED AREA. Effective 12:01 a.m. October 12 through 5:00 p.m. October 19 and from 9:00 p.m. (Pacific Daylight Time) October 20 through 5:00 a.m. (Pacific Standard Time) October 27, 1980, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes in Puget Sound Salmon Management and Catch Reporting Area 11.

WSR 80-15-039
EMERGENCY RULES
DEPARTMENT OF FISHERIES
 [Order 80-148—Filed October 9, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to personal use fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is the water level is extremely low due to insufficient rainfall and this closure is necessary to protect migrating salmon.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 9, 1980.

By Gordon Sandison
 Director

NEW SECTION

**WAC 220-57-34000A NEMAH RIVER—
 NORTH FORK.** *Notwithstanding the provisions of WAC 220-57-340, effective 11:59 p.m. October 10, 1980 until further notice, it shall be unlawful to take, fish for or possess salmon for personal use from the waters of the North Fork of the Nemah River.*

WSR 80-15-040
EXECUTIVE ORDER
OFFICE OF THE GOVERNOR
 [EO 80-16]

Conflicts of Interest

WHEREAS, Chapter 42.18 RCW cited as the "Executive Conflict of Interest Act" has as its purpose the objective of preserving the integrity of state government within the executive branch; and

WHEREAS, RCW 42.18.240 provides for appropriate standards to be promulgated by the Governor to protect against actual or potential conflicts of interest on the part of state employees, in their employment; and

WHEREAS, it does not appear that such standards have heretofore been proposed although most all of the

state agencies have adopted in-house regulations pursuant to RCW 42.18.250; and

WHEREAS, it would be to the best interests of the state of Washington and its employees that the provisions of Chapter 48.18 RCW be implemented by the adoption of executive standards of conduct.

NOW, THEREFORE, I, Dixy Lee Ray, Governor of the state of Washington, by virtue of the power vested in me direct that the following standards be followed as a base of conduct for all state agencies and their employees.

I

AUTHORITY. These regulations are promulgated pursuant to the authority granted to the Governor of the state of Washington by Chapter 42.18 RCW the "Executive Conflict of Interest Act."

II

STATEMENT OF POLICY.

1. The proper operation of state government requires that state employees be independent and impartial; that government decisions be made in the proper channels of the governmental structure; that public office or employment not be used for personal gain; and that the public have confidence in the integrity of its government. The attainment of one or more of these ends is impaired whenever there exists an actual or potential conflict between the private interests and public duties of a state employee. The public interest therefore requires that appropriate ethical standards be established with respect to employee conduct in situations where actual or potential conflict exists.
2. It is also fundamental that, to the maximum extent possible, the most qualified individuals in the society serve its government. Accordingly, the standards of conduct prescribed in these regulations are to be construed so as to not unnecessarily or unreasonably impede the recruitment and retention by the state of those men and women who are most qualified to serve it. An essential principle underlying the staffing of state agencies is that its employees should not be denied the opportunity, available to all other citizens to acquire and to retain private economic and other interests, except where actual or potential conflicts with the responsibility of such employees to the public cannot be avoided.

III

DEFINITIONS. All terms used herein which are defined in RCW 42.18.030 through RCW 42.18.150 shall have the same meaning here as there.

IV

"SUBSTANTIAL ECONOMIC INTEREST." The term "substantial economic interest" as used in Chapter 42.18 RCW and in these regulations shall mean:

1. A direct and significant economic interest and shall not include remote or theoretical interests shared with the public generally, or a specific segment of the public; or
2. Economic holdings or business transactions with profit-making entities including any kind of contract, whether it be of debt, employment, loan, lease, option, purchase, sale, mortgage, insurance or other contracts that can squarely raise the conflict of interest issue; or
3. Economic interests in the form of stock, land, partnership interest, or inheritance which should require a state employee to be disqualified in transactions involving the state.

The most important principle to be applied in interpreting "substantial economic interest" is that a state employee's judgment in official matters may be affected by circumstances of personal interest.

In a particular situation, identification of the disqualifying interest shall hinge on all the facts, including the agency, the position, the government action, the impact of that action, the kind and amount of the employee's personal interest, its relation to the employee's job and in some instances the kind and amount of the employee's other interests.

V

OUTSIDE EMPLOYMENT. Outside employment may be appropriate when it will not (1) adversely affect performance of a state employee's official duties, (2) discredit the state or the employing agency, and (3) result in a conflict of interest. Such work may include civic, charitable, religious and community undertakings. It may include paid outside work, provided that any compensation paid shall bear a reasonable relationship to the services performed. Agency heads should develop and publish criteria on outside employment pertinent to each individual agency.

VI

EXCEPTIONS TO RCW 42.18.190. Exceptions to RCW 42.18.190 are as follows:

1. Anything of economic value received by a regular state employee prior to or subsequent to employment by the state shall be presumed, in the absence of a showing to the contrary by a clear preponderance of evidence, not to be for or in consideration of, personal services rendered or to be rendered to or for the state.
2. A regular state employee's continuation in a bona fide pension, retirement, group life, health or accident insurance, or other employee welfare or benefit plan maintained by

a former employer but to which such former employer makes no contributions on behalf of such employee in respect of the period of his state employment.

3. A regular state employee's continuation in a bona fide plan maintained by a former employer and to which the former employer makes contribution on behalf of such employee in cases of:
 - a. A pension or retirement plan qualified under provision of the Internal Revenue Code, or
 - b. a group life, health, or accident insurance plan: PROVIDED, that the contributions by such employer are not made for a period longer than five consecutive years of state employment (or an aggregate of five years out of the preceding ten).
4. A regular state employee's rights acquired under a bona fide profit-sharing or stock bonus plan maintained by a former employer and qualified under the provisions of the Internal Revenue Code: PROVIDED, that no contributions are made by such former employer on behalf of the employee based on profits attributable to any portions of the period of state employment.

VII

EXCEPTIONS TO RCW 42.18.200. Exceptions to the provisions of RCW 42.18.200 are as follows:

1. Where obvious family or personal relationships (such as those between the parents, children or spouse of the employee) and circumstances make it clear that it is those relationships rather than the business of the persons concerned which are the motivating factors.
2. Acceptance of food and refreshment in the ordinary course of a luncheon or dinner meeting or other meeting where an employee may properly be in attendance.
3. Negotiation and acceptance of loans from banks or other financial institutions on customary terms to finance proper and usual activities of employees, such as home mortgage loans.
4. Acceptance of unsolicited advertising or promotional material such as pens, pencils, note pads, calendars, and other items of nominal value.
5. Acceptance of bona fide reimbursement for expenses of travel and such other necessary subsistence as is compatible with this part for which no state payment or reimbursement is made. However, this paragraph does not allow an employee to be reimbursed or

payment to be made on his or her behalf, for excessive personal living expenses, gifts, entertainment or other personal benefits.

VIII

REGULATIONS ISSUED BY AGENCY.

1. Each agency head may issue regulations implementing the provisions of Chapter 42.18 RCW and these regulations may provide for such further exceptions or restrictions therein as may be necessary and appropriate in view of the nature of the agency's work and the duties and responsibilities of its employees. Such regulations may also provide for a procedure for waiver or exemption with respect to conflict of interest situations involving employees of the agency where such waiver or exemption is deemed to be appropriate. Copies of all such regulations and amendments thereto shall be filed with the Office of the Governor.
2. Each agency head shall be responsible for the administration and enforcement within the agency of the Executive Conflict of Interest Act, the regulations herein and any regulations adopted by the agency head.

This Executive Order shall take effect immediately.

IN WITNESS WHEREOF, I have hereunto set my hand and caused the seal of the state of Washington to be affixed this 8th day of October, 1980.

Dixy Lee Ray

Governor of Washington

BY THE GOVERNOR:

Bruce K. Chapman

Secretary of State

WSR 80-15-041

EMERGENCY RULES

SUPERINTENDENT OF PUBLIC INSTRUCTION

[Order 80-37—Filed October 10, 1980]

I, Frank B. Brouillet, Superintendent of Public Instruction, do promulgate and adopt at Olympia, Washington, the annexed rules relating to limitation of dollar amount of school district excess general fund property tax levies.

I, Frank B. Brouillet, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would

be contrary to public interest. A statement of the facts constituting such emergency is this rule is necessary to implement RCW 84.52.0531 and establish dollar limits on excess general fund property tax levies for collection in 1981. Pursuant to RCW 84.52.020, first-class school districts and educational service district superintendents on behalf of second-class school districts must certify to boards of county commissioners on or before the Wednesday next following the first Monday in October in each year the amounts to be raised by taxation on the assessed valuation of the property in the district. The board of county commissioners of each county, on or before the second Monday in October in each year, certifies to the county assessor the amount of taxes to be levied upon the property of the county for district purposes. It is necessary that these rules be in effect for such certification.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 84.52-.0531 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 8, 1980.

By Frank B. Brouillet
Superintendent of Public Instruction

AMENDATORY SECTION (Amending Order 13-78, filed 12/8/78)

WAC 392-139-005 PURPOSE. The purpose of WAC 392-139-010 through 392-139-((045)) 036 is to establish the exclusive means for fixing the maximum dollar amount of taxes which may be levied on property and collected ((in)) on behalf of any school district in a given tax year for general fund maintenance and operation purposes pursuant to RCW 84.52.053 and 84.52-.0531. These rules shall be effective for calculation of taxes collected in 1981 and thereafter.

AMENDATORY SECTION (Amending Order 13-78, filed 12/8/78)

WAC 392-139-010 ESTABLISHMENT OF THE MAXIMUM DOLLAR AMOUNT OF SCHOOL DISTRICT LEVIES—GENERAL. (1) Notwithstanding such larger dollar amount as may be approved by the electorate of a school district pursuant to RCW 84-.52.053, the maximum dollar amount which may be levied and collected by or for any school district for general fund maintenance and operation support in a given tax year ((or in a given school year, as the case may be,)) shall be established annually as follows:

(a) Only figures and data gathered and approved by the superintendent of public instruction, or his or her designee, shall be used.

~~(b) ((Approved current information and data shall be applied to Schedules I, II, III, IV, V and VI of the Form F-780 as set forth in WAC 392-139-020 through 392-139-045 in order to compute the permissible dollar amount that may be levied by or for a school district.)) Pursuant to this chapter, the division of financial services, superintendent of public instruction, shall annually during the month of September compute and notify school districts of the maximum excess general fund property tax levy capacity of each school district for taxes to be collected during the immediate succeeding calendar year. All definitions of time periods are used in this chapter in the context of such annual September Action.~~

~~(c) ((The official maximum dollar amount for a given tax year shall be the amount computed by the superintendent of public instruction, or his or her designee, as of the September immediately preceding the tax year of collection. (d)) Notice of the levy amount for each school district arrived at pursuant to this ((section)) chapter shall be provided to each affected school district, ((and)) county assessor and ((auditor)) chairman of the board of county commissioners prior to ((October 1 of each year)) the date specified in RCW 84.52.020.~~

(2) The superintendent of public instruction, or his or her designee, shall annually provide all districts with the appropriate calculation procedures for the purposes of this ((section)) chapter.

NEW SECTION

WAC 392-139-016 DEFINITIONS. As used in this chapter, the terms:

(1) "Accounts 1000, 1030, 1040 and 3170" shall mean general fund revenue classifications as designated in Form F-195 (school district annual budget) published and distributed by the superintendent of public instruction as follows: Account 1000—total local property tax revenue; Account 1030—local property taxes collected from excess levies; Account 1040—joint district local property taxes collected from excess levies; and Account 3170—timber excise tax Fund A.

(2) "County assessor's report" shall mean the report completed by county assessors each year depicting the basic assessed valuation, regular levy senior citizen exemption, one hundred percent timber roll, excess general fund levy senior citizen exemption, and total assessed valuation data for individual school districts. County assessors provide these data annually to the superintendent of public instruction via Report 1038S.

(3) "County treasurer's monthly report" shall mean the financial statement issued to the school districts by the county treasurers each month from September through August. This report includes data concerning the school district general fund consisting of beginning and ending cash balances, investment income and expenditure, warrants outstanding, revenues in the form of cash increases credited to the various accounts and the current balance of the general fund. To determine the prior year's local property tax, joint district property tax and timber tax collections for calculating a school district's additional levy authority, cash increase data are

reported in items 20, 21, 22, 23, 24, 25 and 35 of this report.

(4) "F-195" (the budget for fiscal year 19__-__) shall mean the annual school district budget document officially adopted by each school district pursuant to chapter 28A.65 RCW for each year's operations. This document contains estimates of revenues to be received from state sources and excess general fund levy revenues to be collected during the school year.

(5) "R-1191" (estimated funding required to guarantee one hundred percent of basic education allocation for 19__-__ school year) shall mean the monthly report prepared and distributed by the superintendent of public instruction which includes the number of basic education allocation formula derived certificated and classified staff units, the compensation entitlement amounts for such staff, the basic education allocation provided for each average annual full-time-equivalent student, the basic education allocation, the amount of state-funded support and any final adjustments made for the current school year for each school district. These data are used to calculate the basic levy limitation amount pursuant to WAC 392-139-021 and the additional levy capacity, if any, pursuant to WAC 392-139-026 for calendar year tax collections.

(6) "R-1191E" (full-time enrollments used to calculate staff units) shall mean the report prepared and distributed by the superintendent of public instruction which includes the number of basic certificated, formula certificated and formula classified staff units computed on the basis of the number of students enrolled in a school district as reported by the district converted to full-time-equivalent (FTE) students. The enrollment data are reported for each of the following grade levels: kindergarten, grades 1-6, 7-8, and 9-12, excluding secondary vocational students. Vocational secondary FTE students are reported separately for private and public schools. The staff unit calculations provide for an additional number of certificated units due to a significant decrease in student enrollment as provided in the biennial appropriations acts.

(7) "R-1197" (statement of apportionment) shall mean the monthly report prepared and distributed by the superintendent of public instruction which includes the annual allotment of state funds to each school district for each of the state-funded programs which the district operates.

(8) "Spring tax collection percentage" shall mean that portion of property tax payments received by county treasurers for each school district from February 1 through August 31 expressed in terms of a percent. The superintendent of public instruction shall determine an average tax collection percentage based on a three-year period of tax collections. If a school district requests that the superintendent of public instruction review the tax collection percentage, the superintendent may choose another tax collection period on which to base the tax collection percentage.

(9) "Fall tax collection percentage" shall mean that portion of property tax payments received by county treasurers for each school district from September 1 through January 31 of the next ensuing year expressed

in terms of a percent. The superintendent of public instruction shall determine an average tax collection percentage based on a three-year period of tax collections. If a school district requests that the superintendent of public instruction review the tax collection percentage, the superintendent may choose another tax collection period on which to base the tax collection percentage.

(10) "Total property tax collections" shall mean all property tax payments received by county treasurers for each school district from February 1 through January 31 of the next ensuing year. The sum of the spring tax collection percentage and the fall tax collection percentage shall always equal one hundred percent.

NEW SECTION

WAC 392-139-017 **ADDITIONAL DEFINITIONS.** As used in this chapter, the terms:

(1) "P-213" shall mean the form entitled Report of High School Students Residing in Nonhigh Districts. The P-213 is printed and distributed annually by the superintendent of public instruction to school districts educating students residing in other school districts not maintaining an educational program for grades seven through twelve. Data from this report are used to determine, in part, the amount of excess general fund levy capacity which shall be transferred from the nonresident high school district to the resident nonhigh school district pursuant to WAC 392-139-036.

(2) "P-223NR" shall mean the form entitled Monthly Report of School District Enrollment of Nonresident Students Enrolled in an Approved Interdistrict Cooperative. The P-223NR is printed and distributed annually by the superintendent of public instruction to school districts educating students residing in other school districts. Data from this report are used to determine the authorized levy capacity to be shifted from the nonresident school district to the resident school district.

(3) "Basic education allocation" shall mean the amount of state funds calculated by the superintendent of public instruction which is the basis for the superintendent to distribute funds to school districts for the operation of a basic program of education pursuant to RCW 28A.58.750, et seq., 28A.41.130, 28A.41.140 and chapter 392-121 WAC. This amount is also known as the total guaranteed entitlement for basic education. In cases where a school district operates more than one small high school, the basic education allocation shall be increased by the amount calculated pursuant to the small high school formula set forth in the biennial appropriations act for each of the high schools.

(4) "Average annual full-time equivalent (AAFTE)" shall have the same meaning as this term is given in WAC 392-121-105.

(5) "Enrollment decline" shall have the same meaning as this term is given in WAC 392-121-105.

(6) "Current school year" shall mean the school year which is in session at the time the levy limitation calculations are made pursuant to this chapter and county commissioners certify to the county assessors the amount of taxes to be levied on property pursuant to RCW 84.52.070.

(7) "Prior school year" shall mean the school year immediately preceding the current school year.

(8) "Next tax collection year" shall mean the immediate succeeding calendar year referenced in WAC 392-139-010(1)(b).

(9) "Current tax collection year" shall mean the current calendar year.

(10) "Mandated restricted cash" shall mean an amount of funds from excess general fund levy collections in the fall of calendar year 1979 equal to eight percent of the school district's 1979-80 basic education allocation multiplied by the district's fall tax collection percentage rate or the amount of the district's fall 1979 collections, whichever is less, which shall be held in an unencumbered status for expenditure for excess general fund levy relief in a subsequent school year pursuant to section 107 of chapter 270, laws of 1979, 1st extraordinary session (the biennial appropriations act).

NEW SECTION

WAC 392-139-018 **ADDITIONAL DEFINITIONS.** As used in this chapter, the terms:

(1) "Account 3020" shall mean the school district general fund budget classification in which are recorded state funds received by school districts for reimbursement for operation of a student transportation program approved by the superintendent of public instruction pursuant to RCW 28A.41.160 and chapter 392-141 WAC.

(2) "Account 3021" shall mean the school district general fund budget classification in which are recorded state funds received by school districts for reimbursement for cost of depreciation of transportation equipment pursuant to RCW 28A.41.160 and chapter 392-141 WAC.

(3) "Account 3030" shall mean the school district general fund budget classification in which are recorded state funds received by school districts for the operation of a program to educate handicapped students, such program approved by the superintendent of public instruction pursuant to chapter 28A.13 RCW, RCW 28A.41.053 and chapter 392-171 WAC.

(4) "Account 3220" shall mean the school district general fund budget classification in which are recorded state funds received by school districts for the operation of urban, rural, racial, disadvantaged (URRD) educational programs pursuant to RCW 28A.41.270 and chapter 392-161 WAC.

(5) "Account 3243" shall mean the school district general fund budget classification in which are recorded state funds which a school district receives for the operation of an education program for gifted students, such program approved by the superintendent of public instruction pursuant to RCW 28A.16.020 and WAC 180-68-100.

(6) "Account 3244" shall mean the school district general fund budget classification in which are recorded state funds received by a school district for the operation of a remedial assistance program pursuant to RCW 28A.41.404 and WAC 392-161-170, et seq.

(7) "Account 3245" shall mean the school district general fund budget classification in which are recorded

state funds received by a school district for the operation of a transitional biligual instruction program pursuant to RCW 28A.58.810 and chapter 392-160 WAC.

NEW SECTION

WAC 392-139-021 DETERMINATION OF EXCESS GENERAL FUND LEVY CAPACITY ATTRIBUTABLE TO BASIC EDUCATION ALLOCATION. The dollar amount of each school district's general fund excess levy authorized for the next tax collection year shall be determined by multiplying the prior school year's basic education allocation as of August 31 by ten percent.

NEW SECTION

WAC 392-139-026 DETERMINATION OF ADDITIONAL EXCESS GENERAL FUND LEVY CAPACITY. (1) *General.* The dollar amount of each school district's general fund excess levy authorized for the next tax collection year may be increased over the amount determined in WAC 392-139-021 to the extent that the total of the estimated basic education allocation for the current school year as of August 31, plus the estimated current school year general fund excess levy property tax collections which would otherwise be placed in accounts 1000 and 3170 as limited pursuant to WAC 392-139-021, plus the mandated restricted cash, is less than the estimated potential current school year dollar level for basic education as established in subsection (2) of this section.

(2) Establishment of a school district's potential current school year dollar level for basic education for purposes of additional excess general fund levy capacity. The establishment of the potential current school year dollar amount for purposes of determining whether or not a school district is authorized additional general fund excess levy capacity shall be calculated as follows:

(a) Determine the district's current school year dollar level per student by dividing the total of amounts in prior school year general fund revenue accounts 1000 and 3170 plus prior school year basic education allocation as of August 31 less mandated restricted cash by the prior school year's AAFTE and multiplying the quotient obtained by one hundred six percent.

(b) Determine the district's potential aggregate current school year dollar level by (i) multiplying the district's estimate of current school year's AAFTE by current school year dollar level per student calculated in (a) above;

(ii) multiplying the enrollment decline students by the total obtained by adding the prior school year's dollar amounts in general fund revenue accounts 1000 and 3170 plus the prior school year's basic education allocation as of August 31 less the mandated restricted cash; and

(iii) adding the products obtained in (i) and (ii) above.

(c) Determine the district's current school year revenue level in relevant budget accounts without funds from additional levy capacity calculated pursuant to this section by combining the district's estimated total dollars in

the current school year's general fund revenue accounts 1000 and 3170 with the district's estimate of current school year basic education allocation as of October 1 and the mandated restricted cash.

(d) Determine the district's additional potential current school year dollar level by subtracting the total obtained in subsection (c) of this section from the total obtained in subsection (b) of this section.

(e) Determine the district's additional excess general fund levy capacity, if any, by dividing the amount obtained in subsection (d) of this section, if greater than zero, by the spring tax collection percentage.

NEW SECTION

WAC 392-139-031 DETERMINATION OF EXCESS GENERAL FUND LEVY CAPACITY ATTRIBUTABLE TO STATE-FUNDED CATEGORICAL PROGRAMS. The dollar amount of each school district's general fund excess levy authorized for the next tax collection year pursuant to this chapter shall be determined by summing the prior school year's allocations made from the state general fund to the school district by the superintendent of public instruction in school district general fund revenue accounts 3020, 3021, 3030, 3220, 3243, 3244 and 3245 as reported on the August 31 R-1197 and multiplying the total obtained by ten percent.

NEW SECTION

WAC 392-139-036 DETERMINATION OF EXCESS GENERAL FUND LEVY CAPACITY TO BE TRANSFERRED FROM THE NONRESIDENT SCHOOL DISTRICT TO THE RESIDENT SCHOOL DISTRICT. In cases where a student resides in one school district (resident school district) but attends school in another school district (nonresident school district) pursuant to chapter 28A.44 RCW, RCW 28A.58-.075 or RCW 28A.58.245 and chapter 392-135 WAC, the nonresident school district's excess general fund levy capacity for the next tax collection year shall be reduced and the resident school district's general fund excess levy capacity for the next tax collection year shall be increased by the same amount which shall be determined as follows:

(1) Determine the nonresident school district's prior school year basic education allocation per AAFTE as of August 31.

(2) Multiply the amount obtained in subsection (1) of this section by ten percent.

(3) For each AAFTE student enrolled in a nonresident school district, deduct the amount obtained in subsection (2) of this section from the nonresident school district's excess general fund levy capacity for the next tax collection year and add that same amount to the resident school district's excess general fund levy capacity for the next tax collection year.

REPEALER

The following sections of the Washington Administrative Code are repealed:

- (1) WAC 392-139-015 DEFINITIONS.
 (2) WAC 392-139-020 SCHEDULE I—CALCULATION OF BASIC LEVY LIMITATION FOR CALENDAR YEAR 19__.
 (3) WAC 392-139-025 SCHEDULE II—CALCULATION OF ADDITIONAL LEVY AUTHORITY (EXCEEDING BASIC LEVY LIMITATION FOR 19__ CALENDAR YEAR).
 (4) WAC 392-139-030 SCHEDULE III—PRIOR YEAR 100% FORMULA FUNDING.
 (5) WAC 392-139-035 SCHEDULE IV—ESTIMATED CURRENT YEAR BASIC EDUCATION FUNDING.
 (6) WAC 392-139-040 SCHEDULE V—SMALL SCHOOL FACTORS.
 (7) WAC 392-139-045 SCHEDULE VI—SMALL HIGH SCHOOL FACTORS.

WSR 80-15-042
EMERGENCY RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Public Assistance)

[Order 1556—Filed October 10, 1980]

I, N. Spencer Hammond, Ex. Asst. of the Department of Social and Health Services do promulgate and adopt at Olympia, Washington, the annexed rules relating to emergency nonresident transportation, new section WAC 388-29-195.

I, N. Spencer Hammond, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is this program will be of substantial benefit to needy families who are ineligible for other programs.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated under the general rule-making authority of the secretary of Department of Social and Health Services as authorized in RCW 74.08.090.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 10, 1980.

By N. S. Hammond
 Executive Assistant

NEW SECTION

WAC 388-29-195 EMERGENCY NONRESIDENT TRANSPORTATION. (1) *The cost of transportation to the state of legal residence may be paid:*

(a) *As an additional requirement for families eligible for AFDC.*

(b) *For needy families meeting the degrees of relationship in WAC 388-24-125, but not eligible for AFDC, as an emergent requirement of emergency non-resident transportation.*

(2) *The cost standard shall be the least expensive common carrier rate for fare and other necessary expenses enroute unless other means of transportation are advisable because of circumstances in the specific situation.*

WSR 80-15-043
PROPOSED RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Public Assistance)
 [Filed October 10, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Social and Health Services, intends to adopt, amend, or repeal rules concerning congregate care, amending chapter 388-15 WAC.

It is the intention of the secretary to adopt these rules on an emergency basis effective November 1, 1980.

Correspondence concerning this notice and proposed rules attached should be addressed to:

N. Spencer Hammond
 Executive Assistant
 Department of Social and Health Services
 Mailstop OB-44 C
 Olympia, WA 98504

Interpreters for people with hearing impairments and brailled or taped information for people with visual impairments can be provided. Please contact William B. Pope, Chief, Office of Administrative Regulations, at State Office Building #2, 12th and Jefferson, Olympia, Washington, Phone (206) 753-7015, by November 12, 1980. The meeting site is in a location which is barrier free;

that such agency will at 2:00 p.m., Wednesday, November 26, 1980, in the Auditorium, Office Building #2, 12th and Franklin, Olympia, Washington, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 9:00 a.m., Wednesday, December 10, 1980, in William B. Pope's office, 4th floor, Office Building #2, 12th and Franklin, Olympia.

The authority under which these rules are proposed is RCW 74.08.044.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to November 26, 1980 and/or orally at 10:00 a.m., Wednesday, November 26, 1980, Auditorium, Office Building #2, 12th and Franklin, Olympia, Washington.

Dated: October 10, 1980

By: N. S. Hammond
 Executive Assistant

STATEMENT OF PURPOSE

This statement is filed pursuant to RCW 34.04.045.

Amend chapter 388-15 WAC.

Purpose of the rule or rule change is to restrict payment for congregate care to facilities having DSHS contracted beds.

The reason(s) these rules are necessary is to meet budgetary limitations.

Statutory authority for this action is found in RCW 74.08.044.

Summary of the rule or rule change (1) The congregate care program is restricted to those facilities having DSHS contracted beds (2) Nonresidents are explicitly excluded from the program.

Person or persons responsible for the drafting implementation and enforcement of the rule:

Name of initiator: Bill Hodgson

Title: Program Manager

Office: Bureau of Community & Residential Care

Phone: 3-4647 Mail Stop: OB-42 A

The person or organization (if other than DSHS) who proposed these rules is: None.

These rules are not necessary as a result of federal laws, federal court decisions or state court decisions.

AMENDATORY SECTION (Amending Order 1238, filed 8/31/77)

WAC 388-15-560 CONGREGATE CARE-DEFINITION. A congregate care facility is a licensed boarding home or ((~~alcoholism treatment facility~~)) a private establishment which has entered into a congregate care contract with the department.

AMENDATORY SECTION (Amending Order 1238, filed 8/31/77)

WAC 388-15-562 CONGREGATE CARE-ELIGIBLE PERSONS. (1) Persons are eligible to receive congregate care who:
((+)) (a) Are beneficiaries of supplemental social security and state supplementation or who are recipients of continuing general assistance;

((+)) (b) do not require medical or nursing services;

((+)) (c) are unable to maintain a safe environment in an independent living arrangement, or ((~~minimal supervision is required and~~)) the person requires assistance ((with)) and supervision related to activities of daily living in order to achieve independent self care.

(2) Placement is limited to facilities having available DSHS contracted beds.

NEW SECTION

WAC 388-15-563 CONGREGATE CARE-RESIDENTS OF OTHER STATES. Benefits of the congregate care program shall not be available to residents of other states who enter the state of Washington for the primary purpose of obtaining congregate care. However, when a person can no longer be considered a resident of another state and/or expresses his intention to remain permanently in Washington, his eligibility shall be determined as a resident of Washington, see WAC 388-26-055. If there is evidence that the person is maintaining a home in another state, see WAC 388-28-420(4) about sale of resource.

AMENDATORY SECTION (Amending Order 1238, filed 8/31/77)

WAC 388-15-566 CONGREGATE CARE-PLACEMENT IN FACILITY. Selection of a congregate care facility is to be made by the individual, or his/her relatives or others acting on his/her behalf from those facilities having available contracted beds.

WSR 80-15-044

PROPOSED RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Public Assistance)

[Filed October 10, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Social and Health Services intends to adopt, amend, or repeal rules concerning emergency nonresident transportation, new section WAC 388-29-195.

It is the intention of the secretary to adopt these rules on an emergency basis prior to the hearing.

Correspondence concerning this notice and proposed rules attached should be addressed to:

N. Spencer Hammond
Executive Assistant
Department of Social and Health Services
Mailstop OB-44 C
Olympia, WA 98504

Interpreters for people with hearing impairments and brailled or taped information for people with visual impairments can be provided. Please contact William B. Pope, Chief, Office of Administrative Regulations, at State Office Building #2, 12th and Jefferson, Olympia, Washington, Phone (206) 753-7015, by November 12, 1980.

The meeting site is in a location which is barrier free; that such agency will at 10:00 a.m., Wednesday, November 26, 1980, in the Auditorium, Office Building #2, 12th and Franklin, Olympia, Washington, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 9:00 a.m., Wednesday, December 3, 1980, in William B. Pope's office, 4th Floor, Office Building #2, 12th and Franklin, Olympia, Washington.

The authority under which these rules are proposed is RCW 74.08.090.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to November 26, 1980, and/or orally at 10:00 a.m., Wednesday, November 26, 1980, Auditorium, Office Building #2, 12th and Franklin, Olympia, Washington.

Dated: October 10, 1980

By: N. S. Hammond
Executive Assistant

STATEMENT OF PURPOSE

This statement is filed pursuant to RCW 34.04.045.

New section WAC 388-29-195

Purpose of the rule or rule change is to establish a program for emergency nonresident transportation.

The reason(s) these rules are necessary is to replace the transportation program formerly codified in WAC 388-29-190 which has been repealed.

Statutory authority for this action is found in RCW 74.08.090.

Summary of the rule or rule change:

Establishes a program to pay the cost of transportation to the state of legal residence for needy families wishing to move.

Person or persons responsible for the drafting implementation and enforcement of the rule: Dave Andersen, Program Manager, Bureau of Income Maintenance, Phone: 3-7137, Mailstop: OB-31 C

The person or organization (if other than DSHS) who proposed these rules is: None
These rules are not necessary as a result of federal laws, federal court decisions or state court decisions.

3, 1980, in William B. Pope's Office, 4th Floor, Office Building #2, 12th and Franklin, Olympia, Washington.

The authority under which these rules are proposed is RCW 74.08.090.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to November 26, 1980, and/or orally at 10:00 a.m., Wednesday, November 26, 1980, Auditorium, Office Building #2, 12th and Franklin, Olympia, Washington.

Dated: October 10, 1980

By: N. S. Hammond
Executive Assistant

STATEMENT OF PURPOSE

This statement is filed pursuant to RCW 34.04.045.

Amend WAC 388-88-050

Purpose of the rule or rule change is clarification.

The reason(s) these rules are necessary is to eliminate confusion.

Statutory authority for this action is found in RCW 74.08.090.

Summary of the rule or rule change: The subsection on billings for nonreusable medical supplies for patients in nursing homes is clarified.

Person or persons responsible for the drafting implementation and enforcement of the rule: Rita Longthorpe, Program Coordinator, Medical Assistance Division, Phone: 3-7313, Mailstop: LK-11

The person or organization (if other than DSHS) who proposed these rules is: None
These rules are not necessary as a result of federal laws, federal court decisions or state court decisions.

NEW SECTION

WAC 388-29-195 EMERGENCY NONRESIDENT TRANSPORTATION. (1) The cost of transportation to the state of legal residence may be paid:

(a) As an additional requirement for families eligible for AFDC.

(b) For needy families meeting the degrees of relationship in WAC 388-24-125, but not eligible for AFDC, as an emergent requirement of emergency nonresident transportation.

(2) The cost standard shall be the least expensive common carrier rate for fare and other necessary expenses enroute unless other means of transportation are advisable because of circumstances in the specific situation.

**WSR 80-15-045
PROPOSED RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Public Assistance)
[Filed October 10, 1980]**

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Social and Health Services, intends to adopt, amend, or repeal rules concerning adequate nursing home care, amending WAC 388-88-050.

Correspondence concerning this notice and proposed rules attached should be addressed to:

N. Spencer Hammond
Executive Assistant
Department of Social and Health Services
Mailstop OB-44 C
Olympia, WA 98504

Interpreters for people with hearing impairments and brailled or taped information for people with visual impairments can be provided. Please contact William B. Pope, Chief, Office of Administrative Regulations, at State Office Building #2, 12th and Jefferson, Olympia, Washington, Phone (206) 753-7015, by November 12, 1980. The meeting site is in a location which is barrier free;

that such agency will at 10:00 a.m., Wednesday, November 26, 1980, in the Auditorium, Office Building #2, 12th and Franklin, Olympia, Washington, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 9:00 a.m., Wednesday, December

AMENDATORY SECTION (Amending Order 1257, filed 12/21/77)

WAC 388-88-050 ADEQUATE NURSING HOME CARE. (1) Care and services rendered must be justified as essential to patient health care needs, with the overall goal of restoration, maintenance at the highest possible level of independence, and/or terminal care. The nursing home is obligated to provide adequate nursing home care which includes, but is not limited to:

- (a) Medical supervision,
- (b) Nursing care and supervision,
- (c) Administration of medications and treatments,
- (d) Medically justified consultant services where defined in chapter 388-86 WAC.

- (e) Patient record system,
- (f) Meeting medically related social and emotional needs,
- (g) Nutritionally adequate and varied diet,
- (h) Safe and comfortable environment,
- (i) Safeguarding the patient's rights and personal possessions.

(2) The nursing home is obligated to provide items and supplies which are routinely and relatively uniformly used for all patients, and which are essential for the provision of adequate health care services. Such items include but are not limited to:

- (a) Patient gowns,
- (b) Pitchers, basins,
- (c) Bedpans, urinals,
- (d) Soaps, lotions, shampoos, toothpaste and powder,
- (e) Alcohol sponges, applicators, tongue depressors, band-aids,
- (f) Approved nonlegend stock drugs and solutions,
- (g) Physician ordered dietary supplements,

- (h) Linen and nonpersonal laundry.
- (3) Reuseable equipment to be available for periodic use includes:
 - (a) Ice bags, hotwater bottles,
 - (b) Bedrails, canes, crutches,
 - (c) Walkers, wheelchairs, traction equipment,
 - (d) Emergency tray and aspirator, and oxygen tank,
 - (e) Other durable medical equipment.
- (4) Surgical appliances, prosthetic devices, and aides to mobility required for the exclusive use of an individual patient are available to the recipient directly through WAC 388-86-100.
- (5) Nonreuseable supplies ((not usually provided for)) required in excess of those routinely and relatively uniformly used for all patients may be individually ordered ((through WAC 388-86-005(2))) per patient need when authorized by a department nursing care consultant. These items may include medically justified suction catheters, enterostomy supplies, urinary catheters and drainage equipment. ((Requests for such supplies must be authorized by a department representative.)) Billings shall be on department Medical Vendor Invoice (525-101) and will include the signature of the nursing care consultant. Reimbursement is made to the original vendor of approved items.

WSR 80-15-046
EMERGENCY RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Public Assistance)
 [Order 1553—Filed October 10, 1980]

I, N. Spencer Hammond, Ex. Asst. of the Department of Social and Health Services do promulgate and adopt at Olympia, Washington, the annexed rules relating to:

- Rep ch. 388-35 WAC Noncontinuing general assistance.
- Rep WAC 388-29-190 Transportation to state of legal residence.

I, N. Spencer Hammond, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is

WHEREAS, the Department of Social and Health Services is subject to Executive Order 80-14 requiring that the state operate with a balanced budget keeping expenditures from exceeding revenue for the biennium; and

WHEREAS, at the current rate of expenditure, appropriated funds will be exhausted by the Department of Social and Health Services prior to the end of Fiscal Year 1981; and

WHEREAS, the state's forecasted revenues must be revised downward from earlier estimates.

NOW, THEREFORE, I, Gerald J. Thompson, Secretary of the Department of Social and Health Services, by virtue of the authority vested in and required of me by chapters 43.88 and 43.20A RCW, do hereby find that the emergency adoption of rules eliminating the noncontinuing general assistance program is necessary for the public health, safety and welfare, as prescribed by RCW 34.04 030.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated under the general rule-making authority of the secretary of Department of Social and Health Services as authorized in RCW 74.08.090.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 10, 1980.
 By N. S. Hammond
 Executive Assistant

REPEALER

The following sections of the Washington Administrative Code are each hereby repealed.

- (1) WAC 388-35-010 Conditions of Eligibility
- (2) WAC 388-35-020 Determination of financial need
- (3) WAC 388-35-030 Certification period
- (4) WAC 388-35-050 Assistance units—Eligible persons
- (5) WAC 388-35-060 Reapplication
- (6) WAC 388-35-070 Noncontinuing general assistance—Requirements
- (7) WAC 388-29-190 Transportation to state of legal residence

WSR 80-15-047
PROPOSED RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Public Assistance)
 [Filed October 10, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Social and Health Services intends to adopt, amend, or repeal rules concerning:

- Rep ch. 388-35 WAC Noncontinuing general assistance.
- Rep WAC 388-29-190 Transportation to state of legal residence.

It is the intention of the secretary to adopt these rules on an emergency basis prior to the hearing.

Correspondence concerning this notice and proposed rules attached should be addressed to:

N. Spencer Hammond
 Executive Assistant
 Department of Social and Health Services
 Mailstop OB-44 C
 Olympia, WA 98504

Interpreters for people with hearing impairments and brailled or taped information for people with visual impairments can be provided. Please contact William B. Pope, Chief, Office of Administrative Regulations, at State Office Building #2, 12th and Jefferson, Olympia, Washington, Phone (206) 753-7015, by November 12,

1980. The meeting site is in a location which is barrier free;

that such agency will at 10:00 a.m., Wednesday, November 26, 1980, in the Auditorium, Office Building #2, 4th Floor, 12th and Franklin, Olympia, Washington, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place 9:00 a.m., Wednesday, December 3, 1980, in William B. Pope's office, 4th Floor, Office Building #2, 12th and Franklin, Olympia, Washington.

The authority under which these rules are proposed is RCW 74.08.090.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to November 26, 1980, and/or orally at 10:00 a.m., Wednesday, November 26, 1980, Auditorium, Office Building #2, 12th and Franklin, Olympia, Washington.

Dated: October 10, 1980

By: N. S. Hammond
Executive Assistant

STATEMENT OF PURPOSE

This statement is filed pursuant to RCW 34.04.045

Repeal chapter 388-35 WAC and repeal WAC 388-29-180

Purpose of the rule or rule change is to implement a gubernatorial executive order.

The reason(s) these rules are necessary is to balance the budget.

Statutory authority for this action is found in RCW 74.08.090.

Summary of the rule or rule change: The noncontinuing general assistance program is abolished.

Person or persons responsible for the drafting implementation and enforcement of the rule: David Andersen, Community Services Program Manager II, Bureau of Income Maint., Phone: 3-4373, Mail Stop: OB-31 C

The person or organization (if other than DSHS) who proposed these rules is: None
These rules are not necessary as a result of federal laws, federal court decisions or state court decisions.

REPEALER

The following sections of the Washington Administrative Code are each hereby repealed.

- | | | |
|-----|----------------|---|
| (1) | WAC 388-35-010 | Conditions of eligibility |
| (2) | WAC 388-35-020 | Determination of financial need |
| (3) | WAC 388-35-030 | Certification period |
| (4) | WAC 388-35-050 | Assistance units—Eligible persons |
| (5) | WAC 388-35-060 | Reapplication |
| (6) | WAC 388-35-070 | Noncontinuing general assistance—Requirements |
| (7) | WAC 388-29-190 | Transportation to state of legal residence |

WSR 80-15-048

EMERGENCY RULES

DEPARTMENT OF FISHERIES

[Order 80-149—Filed October 10, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is this order is necessary to correct technical error in Order 80-83. This order allows tribal fishing to continue.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 10, 1980.

By Gordon Sandison
Director

NEW SECTION

WAC 220-28-01100H **CLOSED AREA.** *Effective 12:01 a.m. October 12 through 5:00 p.m. October 19 and from 9:00 p.m. (Pacific Daylight Time) October 20 through 5:00 a.m. (Pacific Standard Time) October 27, 1980, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes in that portion of Puget Sound Salmon Management and Catch Reporting Area 11 westerly of a line projected from Browns Point to the ASARCO smelter stack.*

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 220-28-01100G **CLOSED AREA.** (80-150)

NEW SECTION

WAC 220-47-40300C **REEF NET—DAILY HOURS.** *Notwithstanding the provisions of WAC 220-47-403, it shall be unlawful during any open day to take, fish for or possess salmon taken with reef net gear except during the daily open hours hereinafter designated:*

October 10 through October 25 – 5:00 a.m. to 9:00 p.m. Pacific Daylight Time.

October 26 through November 1 - 5:00 a.m. to 8:00 p.m. Pacific Standard Time.

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 220-47-40300B REEF NET—DAILY HOURS. (80-119)

WSR 80-15-049
EMERGENCY RULES
DEPARTMENT OF FISHERIES
[Order 80-151—Filed October 10, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is there is a harvestable surplus of coho salmon in Areas 7 and 7A and a harvestable surplus of chum salmon in Area 7B. A harvestable surplus of coho salmon still remains to be taken in the Hoko River.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 10, 1980.

By Gordon Sandison
Director

NEW SECTION

WAC 220-28-00510C CLOSED AREA. Effective immediately until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear from that portion of the Hoko River upstream of the Highway 112 Bridge.

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 220-28-00510B CLOSED AREA. (80-147)

NEW SECTION

WAC 220-47-31200E PURSE SEINE—WEEKLY PERIODS. Notwithstanding the provisions of WAC 220-47-312, effective October 12 through October 18, 1980, it shall be unlawful to take, fish for or possess salmon with purse seine gear except during the weekly open periods hereinafter designated in the following Puget Sound Salmon Management and Catch Reporting Areas:

Areas 7 and 7A - Week beginning October 12: Monday, Tuesday and Wednesday.

Area 7B - Week beginning October 12: Monday, Tuesday, Wednesday, Thursday and Friday.

NOTE: Purse Seine fishing in Area 7B closes at 4:00 p.m. on Friday October 17, 1980.

NEW SECTION

WAC 220-47-40200C REEF NET—WEEKLY PERIODS. Notwithstanding the provisions of WAC 220-47-402, effective October 12 through October 18, 1980, it shall be unlawful to take, fish for or possess salmon with reef net gear except during the weekly open periods hereinafter designated in the following Puget Sound Salmon Management and Catch Reporting Areas:

Areas 7 and 7A - Week beginning October 12: Sunday, Monday and Tuesday.

NEW SECTION

WAC 220-47-41200H GILL NET—WEEKLY PERIODS. Notwithstanding the provisions of WAC 220-47-412, effective October 12 through October 18, 1980, it shall be unlawful to take, fish for or possess salmon with gill net gear except during the weekly open periods hereinafter designated in the following Puget Sound Salmon Management and Catch Reporting Areas:

Areas 7 and 7A - Week beginning October 12: Monday, Tuesday and Wednesday nights.

Area 7B - Week beginning October 12: Sunday, Monday, Tuesday, Wednesday and Thursday nights.

NEW SECTION

WAC 220-47-41400C GILL NET—MESH SIZES. Notwithstanding the provisions of WAC 220-47-414, effective October 12 through October 18, 1980, it shall be unlawful to take, fish for or possess salmon for commercial purposes in Puget Sound Salmon Management and Catch Reporting Area 7B with gill net gear having a mesh size smaller than 5 inches.

REPEALER

The following sections of the Washington Administrative Code are repealed effective October 12, 1980:

WAC 220-47-31200D PURSE SEINE—WEEKLY PERIODS. (80-144)

WAC 220-47-40200C REEF NET—WEEKLY PERIODS. (80-144)

WAC 220-47-41200G GILL NET—WEEKLY PERIODS. (80-144)

WSR 80-15-050
EMERGENCY RULES
DEPARTMENT OF FISHERIES
 [Order 80-152—Filed October 10, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to personal use fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is these streams were scheduled to open in October, since it was expected that the water flow conditions would be sufficient at that time to allow for normal salmon movement. The water levels are extremely low in these streams and they will remain closed in order to protect salmon that are present.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 10, 1980.

By Gordon Sandison
 Director

NEW SECTION

WAC 220-57-20500B DOSEWALLIPS RIVER. Notwithstanding the provisions of WAC 220-57-205, effective October 15, 1980 until further notice, it shall be unlawful to take, fish for or possess salmon for personal use from the waters of the Dosewallips River.

NEW SECTION

WAC 220-57-21000B DUCKABUSH RIVER. Notwithstanding the provisions of WAC 220-57-210, effective October 15, 1980 until further notice, it shall be unlawful to take, fish for or possess salmon for personal use from the waters of the Duckabush River.

NEW SECTION

WAC 220-57-21500B DUNGENESS RIVER. Notwithstanding the provisions of WAC 220-57-215,

effective October 15, 1980 until further notice, it shall be unlawful to take, fish for or possess salmon for personal use from the waters of the Dungeness River.

NEW SECTION

WAC 220-57-24000D ELWHA RIVER. Notwithstanding the provisions of WAC 220-57-240, effective October 15, 1980 until further notice, it shall be unlawful to take, fish for or possess salmon for personal use from the waters of the Elwha River.

NEW SECTION

WAC 220-57-26500B HAMMA HAMMA RIVER. Notwithstanding the provisions of WAC 220-57-265, effective October 15, 1980 until further notice, it shall be unlawful to take, fish for or possess salmon for personal use from the waters of the Hamma Hamma River.

NEW SECTION

WAC 220-57-38000B QUILCENE (BIG QUILCENE) RIVER. Notwithstanding the provisions of WAC 220-57-380, effective October 15, 1980 until further notice, it shall be unlawful to take, fish for or possess salmon for personal use from the waters of the Quilcene (Big Quilcene) River.

NEW SECTION

WAC 220-57-40500C SAMISH RIVER. Notwithstanding the provisions of WAC 220-57-405, effective October 15, 1980 until further notice, it shall be unlawful to take, fish for or possess salmon for personal use from the waters of the Samish River.

NEW SECTION

WAC 220-57-41000A SAMMAMISH RIVER. Notwithstanding the provisions of WAC 220-57-410, effective October 15, 1980 until further notice, it shall be unlawful to take, fish for or possess salmon for personal use from the waters of the Sammamish River.

NEW SECTION

WAC 220-57-49500C WASHOUGAL RIVER. Notwithstanding the provisions of WAC 220-57-495, effective October 16, 1980 until further notice, it shall be unlawful to take, fish for or possess salmon for personal use from those waters of the Washougal River upstream from Steel Bridge.

NEW SECTION

WAC 220-57-51000B WILLAPA RIVER. Notwithstanding the provisions of WAC 220-57-510, effective October 15, 1980 until further notice, it shall be unlawful to take, fish for or possess salmon for personal use from those waters of the Willapa River upstream from the Highway 6 Bridge approximately 2 miles below the mouth of Trap Creek.

REPEALER

The following sections of the Washington Administrative Code are repealed effective October 15, 1980:

- WAC 220-56-10500A RIVER MOUTH Definition—WASHOUGAL RIVER. (80-90)
- WAC 220-57-50400B SAMISH RIVER. (80-102)

**WSR 80-15-051
EMERGENCY RULES
DEPARTMENT OF FISHERIES
[Order 80-153—Filed October 10, 1980]**

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is analysis of test fishing results in Area 10B indicates coho management needs prevail. The eastern shore is closed to protect beach spawning sockeye. The Cedar River is closed to protect sockeye and chinook salmon.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 10, 1980.
By Gordon Sandison
Director

NEW SECTION

WAC 220-28-010B0T CLOSED AREA. Effective immediately until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in that portion of Puget Sound Salmon Management and Catch Reporting Area 10B inside and easterly of a line 250 yards out from and parallel to the eastern shore between the float plane dock at Kenmore and the Evergreen Point Floating Bridge.

NEW SECTION

WAC 220-28-010G0B CLOSED AREA. Effective immediately through December 31, 1980, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial

purposes with any type of gear from the waters of the Cedar River.

REPEALER

The following sections of the Washington Administrative Code are repealed:

- WAC 220-28-010B0S CLOSED AREA. (80-144)
- WAC 220-28-010G0A CLOSED AREA. (80-62)

**WSR 80-15-052
ADOPTED RULES
DEPARTMENT OF PERSONNEL
(Personnel Board)
[Order 148—Filed October 13, 1980]**

Be it resolved by the State Personnel Board, acting at Department of Personnel, 600 South Franklin, Olympia, WA 98504, that it does promulgate and adopt the annexed rules relating to Temporary employment—Exempt service, amending WAC 356-30-080.

This action is taken pursuant to Notice No. WSR 80-12-033 filed with the code reviser on 8/29/80. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated pursuant to RCW 41.06.150(17) and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 9, 1980.
By Leonard Nord
Secretary

AMENDATORY SECTION (Amending Order 126, filed 11/15/78)

WAC 356-30-080 TEMPORARY EMPLOYMENT—EXEMPT SERVICE. Appointments to temporary positions as defined in WAC 356-06-020(15) are exempt from these Rules provided:

- (1) There is no involvement in federal grant-in-aid.
- (2) Positions have been reported to the Director of Personnel.
- (3) Compensation and minimum qualifications of appointees are consistent with those for comparable classified positions.
- (4) That the appointment lasts for no more than nine months for single appointments, or no more than nine cumulative months for multiple appointments within a ~~((calendar year))~~ twelve month period, except when a temporary employee replaces a permanent employee who has been granted a leave of absence without pay in accordance with WAC 356-18-140 and WAC 356-39-120 and 130. In such cases, the temporary appointment may extend to the date the employee on leave is scheduled to return.

(5) That a two-month break in service has occurred since the last temporary appointment of the same person in the same agency, except for multiple appointments as indicated in (4) above.

Established registers, certification, and referral service are available for use in filling temporary positions. A temporary employee, appointed following certification from the register, may enter a probationary period and subsequently gain permanent status, when a change in agency needs results in the permanent availability of the position.

WSR 80-15-053
EMERGENCY RULES
DEPARTMENT OF PERSONNEL
(Personnel Board)

[Order 149—Filed October 13, 1980]

Be it resolved by the State Personnel Board, acting at Department of Personnel, 600 South Franklin, Olympia, WA 98504, that it does promulgate and adopt the annexed rules relating to Salaries—Reduction-in-force register appointments, new section WAC 356-14-085.

We, the Washington State Personnel Board, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is to avoid the possible confusion in setting the salaries of the several employees we anticipate will be returning to state work via the lay off rules which could result in adverse morale and, in turn, the lowering of service to the citizens of the state.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 41.06.150(17) and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 9, 1980.

By Leonard Nord
Secretary

NEW SECTION

WAC 356-14-085 SALARIES—REDUCTION-IN-FORCE REGISTER APPOINTMENT. When an eligible is appointed from a certification off of a reduction-in-force register, his/her salary will be set as follows:

(1) The salary will be the basic dollar amount the employee was being paid at the time he/she left the range to which he/she is being appointed, plus, whatever the periodic increases and the salary adjustments that would have been made had the employee remained in that classification and range. Separations due to reduction-in-force will not be regarded as a break in service, but time during which employees are off the payroll will not be used in computing periodic increases. The employee will not be entitled to increases based on promotion.

(2) Such increases above the basic dollar amount in (1) above shall not place the employee higher than the maximum salary for the range, except general salary increase specifically granted to Y-rated employees.

WSR 80-15-054
PROPOSED RULES
DEPARTMENT OF PERSONNEL
(Personnel Board)
[Filed October 13, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025 and 41.06.040, that the State Personnel Board intends to adopt, amend, or repeal rules concerning:

Amd	WAC 356-15-120	Special assignment pay provisions.
Amd	WAC 356-18-050	Sick leave credit—Purpose—Accrual—Conversion.
Amd	WAC 356-18-110	Vacation leave—Allowance.
Amd	WAC 356-18-150	Leave—Newborn or adoptive child care—Provision.
Amd	WAC 356-26-060	Certification—General methods.
Amd	WAC 356-34-180	Subpoenas—Issuance—Content—Service.
Amd	WAC 356-34-220	((Orders-for)) Discovery;

that such agency will at 10:00 a.m., Thursday, December 11, 1980, in the Board Hearing Room, 600 South Franklin, Olympia, WA 98504, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 10:00 a.m., Thursday, December 11, 1980, in the Board Hearing Room, 600 South Franklin, Olympia, WA 98504.

The authority under which these rules are proposed is RCW 41.06.040 and 41.06.050.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to December 9, 1980, and/or orally at 10:00 a.m., Thursday, December 11, 1980, Board Hearing Room, 600 South Franklin, Olympia, WA 98504.

This notice is connected to and continues the matter noticed in Notice Nos. WSR 80-12-033 and 80-13-046 filed with the code reviser's office on August 29 and September 16, 1980.

Dated: October 10, 1980
By: Leonard Nord
Secretary

WSR 80-15-055
EMERGENCY RULES
DEPARTMENT OF FISHERIES
 [Order 80-154—Filed October 13, 1980]

I, Gordon Sandison, director of State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to personal use fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is test fishing has shown there are no harvestable numbers of fall chinook and coho salmon in these areas.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 13, 1980.

By Gordon Sandison
 Director

NEW SECTION

WAC 220-57-13000A BOGACHIEL RIVER. Notwithstanding the provisions of WAC 220-57-130, effective immediately through October 31, 1980, it shall be unlawful to retain salmon greater than 24 inches in length taken for personal use from the waters of the Bogachiel River.

NEW SECTION

WAC 220-57-13500A CALAWAH RIVER. Notwithstanding the provisions of WAC 220-57-135, effective immediately through October 31, 1980, it shall be unlawful to retain salmon greater than 24 inches in length taken for personal use from the waters of the Calawah River.

NEW SECTION

WAC 220-57-27000F HOH RIVER. Notwithstanding the provisions of WAC 220-57-270, effective immediately through October 31, 1980, it shall be unlawful to retain salmon greater than 24 inches in length taken for personal use from the waters of the Hoh River.

NEW SECTION

WAC 220-57-38500C QUILLAYUTE RIVER. Notwithstanding the provisions of WAC 220-57-385, effective immediately through October 31, 1980, it shall

be unlawful to retain salmon greater than 24 inches in length taken for personal use from the waters of the Quillayute River.

NEW SECTION

WAC 220-57-46000E SOLEDUCK RIVER. Notwithstanding the provisions of WAC 220-57-460, effective immediately through October 31, 1980, it shall be unlawful to retain salmon greater than 24 inches in length taken for personal use from the waters of the Soleduck River, except that in that portion of the Soleduck River from the concrete pump station at the Soleduck Hatchery downstream to the confluence of Lake Creek, up to two coho salmon over 24 inches in length may be retained as part of the daily bag limit.

REPEALER

The following sections of the Washington Administrative Code are repealed:

WAC 220-57-27000E HOH RIVER. (80-132)
WAC 220-57-46000D SOLEDUCK RIVER.
(80-114)

WSR 80-15-056
EMERGENCY RULES
DEPARTMENT OF
EMERGENCY SERVICES
[Order 80-021—Filed October 14, 1980]

I, Edward Chow, Jr., director of the Department of Emergency Services, do promulgate and adopt at 4220 East Martin Way, Olympia, Washington, the annexed rules relating to Mt. St. Helens closure—Rules for permitted entry and/or occupation, chapter 118-03 WAC.

I, Edward Chow, Jr., find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is on October 1, 1980 the Governor issued EO 80-15 closing an area of approximately 20 miles in radius from the center of Mt. St. Helens from all persons with certain exceptions. These rules are to implement the Governor's Executive Order EO 80-15.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to chapters 43.06 and 38.52 RCW and is intended to administratively implement that statute.

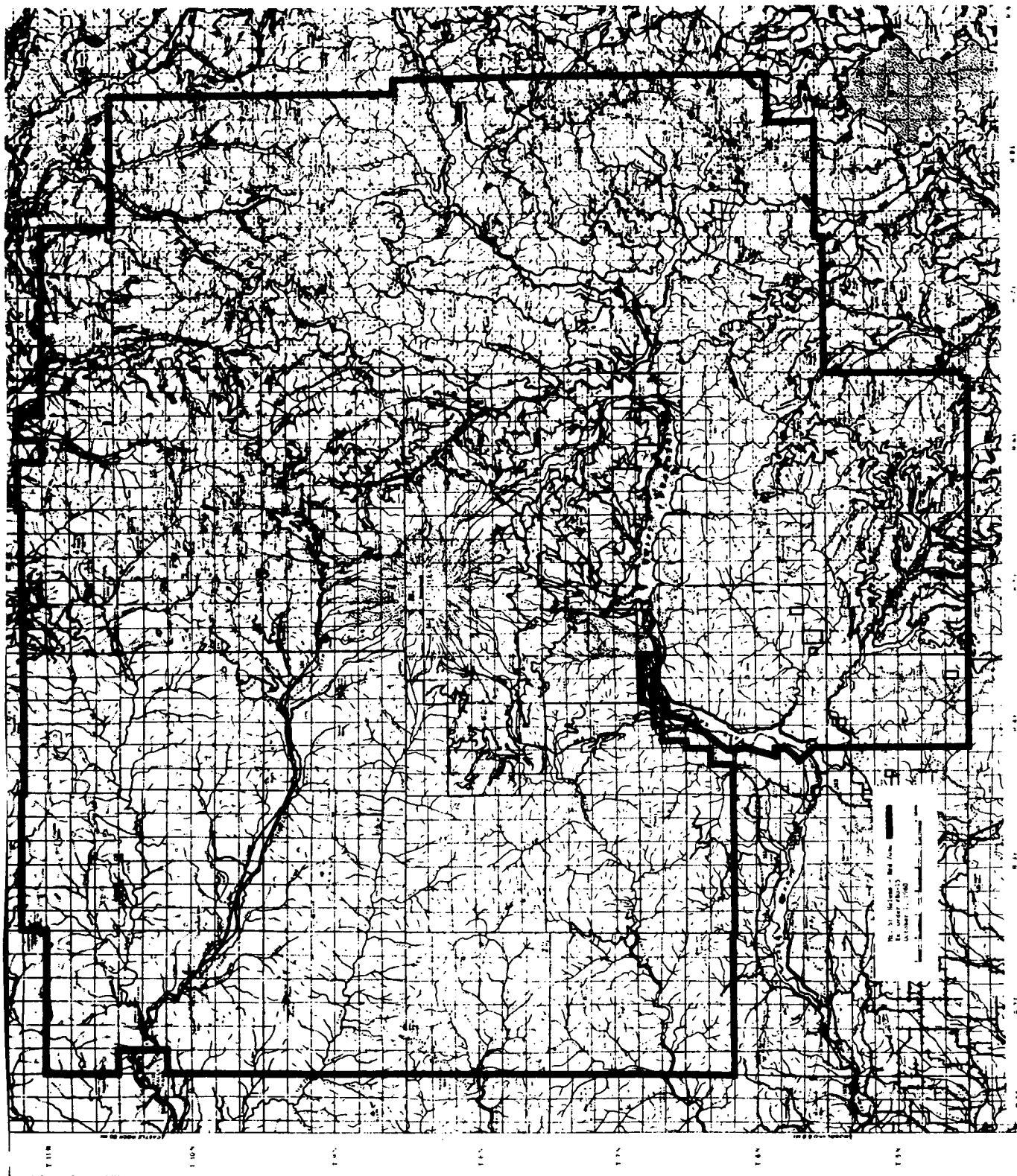
The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 10, 1980.

By Edward Chow, Jr.
Director

AMENDATORY SECTION (Amending Order 80-20, filed 9/2/80)

WAC 118-03-410 APPENDIX D - ((FORM-)) MAP - MT. ST. HELENS RED ZONE



WSR 80-15-057
EMERGENCY RULES
DEPARTMENT OF FISHERIES
 [Order 80-155—Filed October 14, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is harvestable surplus of coho has been taken.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 14, 1980.

By Gordon Sandison
 Director

NEW SECTION

WAC 220-28-00510D CLOSED AREA. *Effective immediately until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear from the waters of the Hoko River.*

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 220-28-00510C CLOSED AREA. (80-151)

WSR 80-15-058
EMERGENCY RULES
DEPARTMENT OF FISHERIES
 [Order 80-156—Filed October 14, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity

to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is a harvestable surplus of coho cannot be adequately harvested by treaty fishermen.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 14, 1980.

By Gordon Sandison
 Director

NEW SECTION

WAC 220-36-02100S GRAYS HARBOR GILL NET—SEASONS. *Notwithstanding the provisions of WAC 220-36-021, WAC 220-36-022 and WAC 220-36-024, it shall be unlawful to take, fish for or possess salmon for commercial purposes with gill net gear in the following Grays Harbor Fishing Areas except during the seasons provided for hereinafter in each respective fishing area:*

Areas 2B, 2C and 2D

6:00 p.m. October 14 to 6:00 p.m. October 15, 1980.

5-inch minimum to 7-inch maximum mesh size.

WSR 80-15-059
ADOPTED RULES
DEPARTMENT OF LICENSING
 [Order PL 357—Filed October 15, 1980]

I, R. Y. Woodhouse, director of the Department of Licensing, do promulgate and adopt at Olympia, Washington, the annexed rules relating to the amending of WAC 308-140-150 Annual report by department, WAC 308-140-210 Registration renewal procedures and 308-140-240 Professional fund-raiser registration requirements—Personnel disclosure.

This action is taken pursuant to Notice No. WSR 80-11-035 filed with the code reviser on August 15, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated pursuant to RCW 19.09.310 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 15, 1980.
By R. Y. Woodhouse
Director

AMENDATORY SECTION (Amending Order PL 161, filed 2/26/74)

WAC 308-140-150 ANNUAL REPORT BY DEPARTMENT. The department shall publish annually a report listing the charitable organizations registered in accordance with this act, their registration numbers and the date such registration was filed, the amount such organization raised and the cost of solicitation, and other pertinent information determined to be in the public interest. Such report will be sent to any interested person upon written request and payment of a fee not to exceed three dollars per copy.

AMENDATORY SECTION (Amending Order PL 274, filed 8/29/77)

WAC 308-140-210 REGISTRATION RENEWAL PROCEDURES. The method of renewal of registration for professional fund-raisers and professional solicitors shall be to submit a((n)) new application for registration((, marking only those items which have changed since the original registration was granted. If no changes have occurred, by so indicating and in either case, expecting the required affidavit)). Applications shall be accompanied by the applicable fee and a new bond, if required.

Reviser's Note: RCW 34.04.058 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

AMENDATORY SECTION (Amending Order PL 161, filed 2/26/74)

WAC 308-140-240 PROFESSIONAL FUND-RAISER REGISTRATION REQUIREMENTS - PERSONNEL DISCLOSURE. In making application for registration as a professional fund-raiser, the names and addresses of all officers, directors, executive personnel and owners of ten percent or more of stock shall be disclosed if a corporation. The names of all professional solicitors employed by or under contract with the professional fund-raiser shall be disclosed in any case. Amendments to the ((original)) registration statement must be filed within ten days of any such change.

WSR 80-15-060
EMERGENCY RULES
DEPARTMENT OF FISHERIES
[Order 80-157—Filed October 15, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that

observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is there are no harvestable stocks of fall salmon in the Hoh and Quillayute Rivers.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 15, 1980.
By Gordon Sandison
Director

NEW SECTION

WAC 220-28-003F0C CLOSED AREA. Effective immediately until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear from the waters of the Hoh River.

NEW SECTION

WAC 220-28-003G0B CLOSED AREA. Effective immediately until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear from the waters of the Quillayute River.

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 220-28-003F0B CLOSED AREA. (80-132)

WSR 80-15-061
NOTICE OF PUBLIC MEETINGS
DEPARTMENT OF GAME
(Game Commission)
[Memorandum—October 9, 1980]

The Game Commission will hold the following meetings in 1981:

	<u>Dates</u>	<u>Locations</u>
<u>Statutory:</u>	January 5-6 April 6 July 10 October 5	Yakima Olympia Vancouver Walla Walla
<u>Special:</u>	May 10,11,12 August 23,24,25	Spokane Everett

WSR 80-15-062
ADOPTED RULES
STATE BOARD OF EDUCATION
 [Order 12-80—Filed October 16, 1980]

Be it resolved by the State Board of Education, acting at Walla Walla, Washington, that it does promulgate and adopt the annexed rules relating to secondary education relating to the establishment of criteria for waiving the minimum forty-five credit hour requirement for graduation for students who have attended an educational clinic program and re-entered a regular school program in order to complete the high school program and earn a diploma, chapter 180-56 WAC.

This action is taken pursuant to Notice No. WSR 80-12-019 filed with the code reviser on August 27, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated pursuant to chapter 28A.97 RCW and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 10, 1980.

By Wm. Ray Broadhead
 Secretary

AMENDATORY SECTION (Amending Order 3-80, filed 2/5/80)

WAC 180-56-031 WAIVER OF HIGH SCHOOL GRADUATION REQUIREMENTS. Specific high school graduation requirements established by WAC 180-56-021 and a school district may be waived for an individual student: **PROVIDED**, That they are not required by state statute: **PROVIDED FURTHER**, That in no case except for those students who commence ninth grade prior to July 1, 1977 may the minimum requirement of forty-five credits be waived except as provided under RCW 28A.97.030: **PROVIDED FURTHER**, That any waiver of credits in each of the subject areas required for high school graduation based upon a student's prior attendance at a certified educational clinic shall be made in accordance with the consultation, evaluation of achievement and placement requirements of WAC 392-185-140.

Each school district board of directors may delegate the responsibility for granting such waivers to personnel who by virtue of their training and experience can best assess the student's circumstances.

Each school district board of directors shall adopt rules pursuant to which graduation requirement waivers may be made. Such rules shall at least provide:

(1) The procedures for initiating, investigating, deciding, reviewing the decision and recording the disposition of a waiver request; and

(2) That the rationale for any disposition of a waiver request be communicated to the student and the parents or guardian of the student.

WSR 80-15-063
ADOPTED RULES
DEPARTMENT OF GAME
(Game Commission)
 [Order 155—Filed October 16, 1980]

Be it resolved by the Game Commission, State of Washington, acting at Pasco, Washington, that it does promulgate and repeal the annexed rules relating to WAC 232-12-260 Compensation to landowner for beaver pelts and WAC 232-12-270 Affidavit required for transportation and possession of beaver pelts—Tagging requirements and fee.

This action is taken pursuant to Notice No. WSR 80-11-056 filed with the Code Reviser on August 20, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated under the general rule-making authority of the Game Commission as authorized in RCW 77.12.040.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW) or the Administrative Procedure Act (chapter 34.04 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

This order, after being first recorded in the Order Register of this governing body, shall be forwarded to the Code Reviser for filing pursuant to chapter 34.04 RCW and chapter 1-12 WAC.

APPROVED AND ADOPTED October 6, 1980.

By Jack S. Wayland
 Interim Director

REPEALER

The following sections of the Washington Administrative Code are repealed:

WAC 232-12-260	COMPENSATION TO LANDOWNER FOR BEAVER PELTS
WAC 232-12-270	AFFIDAVIT REQUIRED FOR TRANSPORTATION AND POSSESSION OF BEAVER PELTS - TAGGING REQUIREMENTS AND FEE

WSR 80-15-064
ADOPTED RULES
DEPARTMENT OF GAME
(Game Commission)
 [Order 156—Filed October 16, 1980]

Be it resolved by the Game Commission, State of Washington, acting at Pasco, Washington, that it does

promulgate and repeal the annexed rules relating to WAC 232-16-255 Little Pend Oreille Game Reserve and WAC 232-16-490 Willapa Bay Game Reserve.

This action is taken pursuant to Notice No. WSR 80-11-056 filed with the Code Reviser on August 20, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated under the general rule-making authority of the Game Commission as authorized in RCW 77.12.040.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW) or the Administrative Procedure Act (chapter 34.04 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

This order, after being first recorded in the Order Register of this governing body, shall be forwarded to the Code Reviser for filing pursuant to chapter 34.04 RCW and chapter 1-12 WAC.

APPROVED AND ADOPTED October 6, 1980.

By Jack S. Wayland
Interim Director

REPEALER

The following sections of the Washington Administrative Code are repealed:

- WAC 232-16-255 LITTLE PEND OREILLE GAME RESERVE
- WAC 232-16-490 WILLAPA BAY GAME RESERVE

WSR 80-15-065

ADOPTED RULES

DEPARTMENT OF GAME

(Game Commission)

[Order 157—Filed October 16, 1980]

Be it resolved by the Game Commission, State of Washington, acting at Pasco, Washington, that it does promulgate and adopt the annexed rules relating to gold prospecting, WAC 232-20-100.

This action is taken pursuant to Notice No. WSR 80-11-056 filed with the Code Reviser on August 20, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated under the general rule making authority of the Game Commission as authorized in RCW 77.12.040.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW) or the Administrative Procedure Act (chapter 34.04 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

This order, after being first recorded in the Order Register of this governing body, shall be forwarded to the Code Reviser for filing pursuant to chapter 34.04 RCW and chapter 1-12 WAC.

APPROVED AND ADOPTED October 6, 1980.

By Jack S. Wayland
Interim Director

NEW SECTION

WAC 232-20-100 GOLD PROSPECTING

The following principles and provisions generally describe the Department's considerations in issuing approvals for mineral prospecting or mining:

1. Mineral prospecting may be prohibited in streams when the Department believes an activity may have a harmful impact on fish populations.
2. The Department classified streams as to activity allowed, time period allowed, and size of equipment allowed. These classifications are made to minimize impacts on fish life. Classifications are listed in sub-paragraph (4) below. Classifications are also listed on pages 13-20 of the pamphlet, "Gold and Fish". This booklet may be obtained at regional offices of the Department of Game, Fisheries, or Ecology, most U. S. Forest Service district offices, and the Olympia headquarters. Requests for the pamphlet, "Gold and Fish" can be made to: Environmental Affairs Program, Habitat Management Division, 600 North Capitol Way, Olympia, Washington 98504. It is intended that classifications may vary from year to year. Each year readers of the pamphlet should check for any amendments or like additions.
3. Hydraulic Project Approval by the Department of Game and Department of Fisheries does not remove the obligation of the applicant to obtain other permits or to follow rules and regulations of other local, state, and Federal agencies. Of particular note are the Department of Ecology controls on water quality and water rights, the Department of Natural Resources administration of state lands including river beds and mining claims, city or county registered watersheds and shoreline regulations, and U. S. Forest Service use permits.
4. It is unlawful for any person, firm, corporation, business or other entity to do any prospecting or mining in the waters of the state in violation of the following classifications:

STREAM CLASSIFICATIONS

ACTIVITY

CLASS I - Total Prohibition of Panning, Sluicing and Dredging

CLASS II - Panning Only

*CLASS III - Non-motorized Sluicing

Maximum 18" wide by 60" long or area of 7 1/2' square. Box will not exceed 25% of width of wetted perimeter of stream.

*CLASS IV - Motorized Sluicing/Dredging

*A Class III or IV activity includes all lower class activities as well. Unless specifically stated otherwise,

timing for Class III will be the same as Class IV, and Class II may be performed any time.

TIMING

1. July through October ONLY
2. June through September ONLY
3. August through September ONLY
4. July through August ONLY
5. July through September ONLY
6. August through October ONLY
7. Year-around

DREDGE SIZE

- A. 2" nozzle and hose maximum allowable
- B. 4" nozzle and hose maximum allowable
- C. 6" nozzle and hose maximum allowable
- D. 8" nozzle and hose maximum allowable

EXAMPLES: Class II 4 – Panning Only – July through August

Class III 7 – Non-Motorized Sluicing – year-around

Class IV 6B – Motorized Sluicing/Dredging – August through October 4" nozzle and hose maximum

If a water is not listed, applications will be considered on a case-by-case basis. In order to avoid submitting an application that may be denied, you should contact the applicable Game Department Regional Office. If biologic conditions change, stream classifications may have to be altered. Site-specific timing may be necessary in special conditions.

American River	IV1B
Morse Creek	IV1B
All Other Tributaries	II1
Baker River	IV3B
Rocky Creek	IV3B
Sulphur Creek	IV3B
Roaring Creek Tribs.	III7
All Other Tributaries	II7
Bear River	III1
Greenhead Slough	III1
All Other Tributaries	II7
Beckler River	III1
All Tributaries	III1
Big Sheep Creek	IV1B
Big Quilcene River	
Mouth to Highway 101	III4
Highway 101 to Headwaters	II1
All Tributaries	II1
Black River	IV1B
Mima Creek	IV1A
Waddle Cr. (below Noski Cr.)	IV1A
All Other Tributaries	II7
Bogachiel River	IV4B
All Tributaries	II1
Bone River	II7
All Tributaries	II7
Bumping River	IV1B
All Tributaries	II1
Calawah River	IV4B
North Fork & Albion Cr.	III4
All Other Tributaries	II1
Cannon River	III1
All Tributaries	II7
Canyon River	IV1D
All Tributaries	II7
Carbon River	IV3B
All Tributaries	IV3A
Cascade River	
Mouth to Forks	IV6B
S.F. Cascade	III3

North Fork	I
Middle Fork	III3
Jordan Creek	IV6B
Marble Creek	III3
Boulder Creek	IV6A
Found Creek	III3
Sonny Boy Creek	III3
All Named Tributaries	II7
All Unnamed Tributaries	III3
Cedar River	
Mouth to Landsburg Dam	II6
Landsburg Dam to Headwaters	I
Downs Creek	I
Madson Creek	I
Peterson Creek	I
Rock Creek	I
All Other Tributaries	II6
Chehalis River	IV4B
Charley Creek	III1
Workman Creek	III1
Delezene Creek	III1
Mox Chehalis Creek to Sand Creek	IV1A
Rock Creek to Williams Creek	IV1A
Garrard Creek to S. Fork Independence Creek	IV1A
Porter Creek to Middle & South Fork	III1
Gibson Creek to Thurston Cr.	IV1B
Cedar Cr. to Sherman Cr.	IV1A
Sherman Cr. to Monroe Cr	III1
Sherman Cr. above Monroe Cr.	IV1A
Harris Cr. to Roundtree Cr.	II7
All Other Tributaries	IV7B
Chelan River	I
Company Creek	I
Twenty-Five Mile Creek	I
Trout Spawning Channel	I
All Other Tributaries	IV4A
Chewack River	II4
Tributaries—See Methow R.	
Chinook River	III1
All Tributaries	III1
Chiwawa River	
Mouth to Phelps Creek	IV4A
Phelps Creek to Headwaters	III7
All Tributaries	II7
Cispus River	IV2B
All Tributaries	IV2B
Clallam River	IV4B
All Tributaries	III1
Clearwater River (Jefferson Co.)	
To Solleks River	IV4B
Solleks R. to Headwaters	III1
All Tributaries	III1
Clearwater River (Pierce Co.)	
All Tributaries	IV1B
Cle Elum River	IV1B
Fortune Creek	IV1B
Cabin Creek—mouth to L. Cr.	IV1B
All Other Tributaries	III7
Columbia River	
Mouth to Hanford Power Line	IV7D
Hanford Power Line to Wanapum Dam	IV1B
Wanapum Dam to Headwaters	IV7D
Colville River	II7
Hatchery Inlet System	I
Copalis River	
Mouth to Aloha Beach Road	IV1A

Upstream and all Tributaries	III	Hoquiam River	
Coweman River	IV2B	Mouth to Forks	IV1A
All Tributaries	III	North & South Forks	III
Cowlitz River		W. Fork—mouth to 101 Bridge	IV1A
Riffe Lake to Clearfork	IV2B	Remainder and all Tribs.	III
Blue Creek	I	Humptulips River	
All other Tributaries	III	Mouth to Forks	IV1A
Crab Creek	III	Remainder and all Tribs.	III
Deep River	III	Icicle River	III1
All Tributaries	III	All Tributaries	III1
Deschutes River	IV1B	Johns River	
Little Deschutes River	III1	Mouth to Forks	IV1B
All other Tributaries	II7	South Fork to Archer Cr.	IV1A
Dewatto River	II4	Lewis River	
All Tributaries	II4	Mouth to Merwin Dam	IV2B
Dickey River		E. Fork Mouth to Sunset Falls	IV2B
To Forks	IV4B	Cougar Creek	I
West Fork to Middle Fork	III1	Panamaker Creek	I
East Fork to Skunk Creek	III1	Remainder and All Tribs.	III
All Other Tributaries	III	Lilliwaup River	II4
Dosewallips River	II4	All Tributaries	II4
All Tributaries	III	Little River	III1
Douglas Creek	II4	All Tributaries	III1
Duckabush River		Little Quilcene River	II4
Mouth to Forest Service Bridge	III4	Donavan Creek	II5
Forest Service Bridge to National Park	III	Ludlow Creek	III1
All Tributaries	II5	Tarboo Creek	I
Dungeness River		Thorndyke Creek	I
Mouth to Gold Creek	II4	All Other Tributaries	III1
Gold Creek to Headwaters	III1	Lost River	II4
All Tributaries	III	Tributaries—See Methow R.	
Elk River		Lyre River	III1
Mouth to Middle Branch	III1	All Tributaries	III1
All Other Tributaries	II7	Mad River	III1
Elochoman River	IV2B	All Tributaries	II7
All Tributaries	III	Mashel River	IV5B
Elwha River	IV4B	All Tributaries	IV5A
All Tributaries	III	Methow River	II4
Entiat River		Andrews Creek	III1
Mouth to Mad River	IV7B	Beaver Creek	III1
Mad River to Forks	IV1A	Benson Creek	III4
All Tributaries	III1	Boulder Creek	III1
Fall River		Buttermilk Creek	III1
Mouth to Dean Creek	III1	Cedar Creek	III3
Dean Creek to Headwaters	II7	Crater Creek	III4
Raimie Creek to Forks	III1	Eightmile Creek	III4
All Other Tributaries	II7	Falls Creek	III1
Grande Ronde River	II7	Goat Creek	III1
All Tributaries	II7	Lake Creek	III4
Grays River	III	Little Bridge Creek	III1
All Tributaries	III	South Fork above Archer Cr.	III1
Gray Wolf River	III	Remainder and All Tribs.	II7
All Tributaries	III	Kachess River	III1
Green River (S.W. Washington)	I	All Tributaries	II7
All Tributaries	I	Kalama River	III
Green River (King Co.)	IV5B	Gobar Creek	I
All Tributaries	IV5A	All Other Tributaries	III
Greenwater River	IV5B	Kettle River	
All Tributaries	IV5A	Mouth to Barstow Bridge	IV1B
Hamma Hamma River		Toroda Creek	II4
Mouth to Falls	III4	All other Tributaries	II7
Falls to Lena Creek	IV1A	Klickitat River	III
Lena Creek to Park Boundary	III1	All Tributaries	III
All Tributaries	II4	South Creek	III1
Hoh River	IV4B	War Creek	III1
South Fork Hoh River	III4	Cub Creek	II4
All Tributaries	III	Early Winters Creek	II4
		Libby Creek	II4
		South Fork Gold Creek	II4
		Wolf Creek	II4
		Gold Creek	I
		All Other Tributaries	IV4A
		Miller River	III4
		All Tributaries	III4

Moclips River	IV1A	Pend Oreille River	IV7D
All Tributaries	III	Sullivan Creek	IV1B
Naches & Little Naches Rivers	IV1B	Harvey Creek	I
Wide Hollow Creek	IV1B	Kings Lake Inlets	I
Rattlesnake Creek	III1	All Other Tributaries	II7
All Other Tributaries	II7	Pilchuck River	III4
Naselle River (North & South Fls.)	III1	All Tributaries	III4
Upper Salmon Creek	III1	Pratt River	
Alder Creek	III1	To Mouth of Tuscohatchie Cr.	III6
All Other Tributaries	II7	Tuscohatchie Cr. to headwaters	IV6B
Nemah River (North, South, & Middle)	III1	All Tributaries	II6
Williams Creek	III1	Puyallup River	IV5B
All Other Tributaries	II7	All Tributaries	IV5A
Nespelem River	IV1B	Puget Sound & Hood Canal Streams	
All Tributaries	IV1B	California Creek	III1
Newaukum River	II1	Dakota Creek	III1
All Tributaries	IV1B	Chuckanut Creek	IV1A
Niawiakum River	II7	Whatcom Creek	I
All Tributaries	II7	Oyster Creek	III6
Nisqually River	IV1C	Big Gulch Creek	II3
Edna Creek	III1	Lund's Gulch Creek	II3
East Creek	I	Shell Creek	II6
Yelm Creek & Ditch Above Yelm	III1	Picnic Creek	IV7A
All Other Tributaries	II7	Piper's Creek	IV7A
Nooksack River		Shellberger	IV6A
Mouth to Forks	IV1C	McAllister Creek	III1
Canyon Creek	III6	Medicine Creek	II7
Racehorse Creek	III6	Eaton Creek	I
Cutter Creek	III6	Woodland Creek	III1
All Other Tributaries	II7	Woodward Creek	III1
South Fork Nooksack River	IV1B	Indian Creek	IV7A
Sugotowitz Creek	III3	Moxlie Creek	IV7A
Hutchinson Creek	III3	McLane Creek	III1
Henderson Creek	III1	Perry Creek	II7
Anderson Creek	III1	Schneider Creek	III1
Skookum Creek	III3	Kennedy Creek	III1
Howard Creek	IV6B	Skookum Creek	III1
Ennis Creek	III6	Little Creek	II7
All Other Tributaries	II7	Mill Creek	III1
Middle Fork Nooksack River	IV1B	Goldsborough Creek	IV1A
Canyon Creek	IV3A	N. Fork Goldsborough Cr.	III1
Falls Creek	III3	S. Fork Goldsborough Cr.	III1
Clearwater Creek	IV3A	Coffee Creek	II7
Galbraith Creek	IV3A	Winter Creek	II7
Warm Creek	III3	Canyon Creek	II7
All Other Tributaries	II7	Shelton Creek	II7
North Fork Nooksack River	IV1B	Chimacum Creek	I
Racehorse Creek	III1	Snow Creek	I
Cutter Creek	III1	Salmon Creek	I
West Corner Creek	III1	Jimmie Come Lately Creek	I
Cornel Creek	III1	Andrews Creek	I
Aldrich Creek	III1	Trappers Creek	I
Glacier Creek	IV3B	Queets River	IV4B
Deadhorse Creek	IV3B	All Tributaries	II7
Gallup Creek	III6	Quillayute River	IV4B
Wells Creek	IV6A	All Tributaries	II7
Swamp Creek	IV4B	Quinault River	IV4B
All Other Tributaries	II7	All Tributaries	II7
North River	IV1B	Raft River	IV4B
Lower Salmon Creek	III1	All Tributaries	II7
Little North R. to Beck Cr.	III1	Raging River	
Vesta Creek to Forks	IV1A	Mouth to I-90	II6
All Other Tributaries	II7	I-90 to Deep Creek	III6
Okanogam River	III4	Deep Creek to Forks	I
Bonapart Creek	II4	Forks to Headwaters	III6
Salmon Creek	II4	Canyon Creek	III6
Sinlahekin Creek	II4	Icy Creek	III6
Cecile Creek	II4	All Other Tributaries	II6
All Other Tributaries	III4	Rapid River	III1
Palix River—North, South & Middle Forks	III1	All Tributaries	II7
All Tributaries	II7	Rex River	II6
Palouse River	IV7B	All Tributaries	II6
Cow Creek	III4	Ross Lake	I
All Tributaries	II7	All Tributaries	I
		Salmon River	IV4B
		All Tributaries	II7
		Samish River	

Mouth to Hwy 9	IV1A	Griffen Creek	I
Hwy 9 to Headwaters	I	Hannan Creek	III6
Parsons Creek	III1	Harris Creek	I
Dry Creek	III1	Kimball Creek	II3
All Other Tributaries	II7	Patterson Creek	I
		Tokul Creek	II3
Sammamish Lake		All Other Tributaries	II6
Sammamish River	II4		
Carey Creek	I	North Fork Snoqualmie River	
15 Mile Creek	I	Mouth to Black Canyon	III3
Holder Creek	I	Black Canyon	IV6B
Issaquah Creek	I	Black Canyon to River	
All Other Tributaries	II4	Mile 13	III6
		River Mile 13 to 18	II6
San Poil River	III4	River Mile 18 to 21	I
All Tributaries	II7	River Mile 21 to Headwaters	II6
		Tate Creek	II3
San Juan Islands Streams	IV7B	Cougar Creek	III6
Cascade Mountain Lake		Illinois Creek	III6
Tribs.	I	Big Creek	III6
		Bear Creek	IV7A
Satsop River		All Other Tributaries	II6
Mouth to Forks	III1		
Remainder and all Tribs.	III	Middle Fork Snoqualmie River	
		Mouth to Burntboot Cr.	II6
Sauk River	IV4B	Burntboot Cr. to	
N. Fork Sauk River	III4	Headwaters	III6
S. Fork Sauk River	III4	Big Creek	IV7A
76 Gulch Creek	IV3B	Burntboot Creek	III6
All Other Tributaries	II7	Crawford Creek	IV7A
		Cripple Creek	III6
Seiku River	IV4B	Dingford Creek	III6
All Tributaries	II7	Granite Creek	III6
		Goat Creek	III6
Similkameen River		Hardscrabble Creek	IV7A
Mouth to Enloe Dam	III4	Hester Creek	IV7A
Dam to Headwaters	IV4C	Kaleetan Creek	III6
Toats Coulee Cr.	III4	Kulla Kulla Creek	IV7A
All Tributaries	IV1B	Marten Creek	III6
		Quartz Creek	III6
Skagit River	IV4B	Rock Creek	IV7A
Bacon Creek	IV3B	Thompson Creek	III6
Sky Creek	IV6A	Thunder Creek	IV7A
Copper Creek	IV6A	Tuscohatchie Creek	IV7A
Alma Creek	IV6A	Wildcat Creek	IV7A
Gilligan Creek to Mt. Vernon		All Other Tributaries	II6
Water Diversion	IV1B		
Gilligan Creek above		South Fork Snoqualmie River	
Diversion	I	Mouth to Twin Falls	II3
Grandy Creek	IV6A	Twin Falls to Headwaters	III6
Finney Creek	IV6A	Alice Creek	III6
Day Creek	III1	Carter Creek	III6
Presentine Creek	III6	Change Creek	IV7A
Jackman Creek	III6	Commonwealth Creek	III6
Barr Creek	III6	Denny Creek	III6
Illabot Creek	III6	Hall Creek	IV7A
Alber Creek	I	Hansen Creek	III6
All Other Tributaries	II7	Harris Creek	III6
		Humpback Creek	IV7A
Skokomish River		Mason Creek	IV7A
Mouth to N.Fork	III3	Mine Creek	III6
N.Fork Skokomish River	III	Rock Creek	III6
S.Fork Skokomish Mouth to		Rockdale Creek	IV7A
Rule Creek	III1	Wood Creek above R.R.	
S.Fork Skokomish Rule Cr.		tracks	IV6A
to Headwaters	III	All Other Tributaries	II6
All Tributaries	III		
		Soleduck river	IV4B
Skookumchuck River	IV1B	All Tributaries	III
All Tributaries	II7		
		Sollecks River	IV4B
Skykomish River		All Tributaries	III
Mouth to Forks	IV4D		
N.Fork Skykomish	IV4B	Spokane River	II7
S.Fork Skykomish		Ford Hatchery Inlet	I
Mouth to Eagle Falls	IV4B	Spokane Hatchery Inlet	I
Eagle Falls to		Waikiki Hatchery Inlet	I
Headwaters	III4		
All Tributaries	III4	Stehekin River	IV7B
		All Tributaries	II7
Snake River	II7		
All Tributaries	II7	Stillaguamish River	
		Mouth to Forks	IV4D
Snohomish River			
Mouth to Highway 9	IV1D	North Fork Stillaguamish River	
Highway 9 to Forks	IV4D	Mouth to Falls	IV4D
All Tributaries	III4	Falls to Headwaters	III4
		Deer Creek and Tributaries	II
Snoqualmie River		June-September	
Mouth to High Bridge	II7		
Bridge to Falls	I	South Fork Stillaguamish River	
Falls to Forks	IV3B	Mouth to Granite Falls.	IV4D
Cherry Creek	I		
Coal Creek	II3		

Granite Falls to Headwaters	IV4B	Cottage Lake Creek	I
Canyon Creek to Forks	IV4B	Evans Creek	I
Forks to Headwaters	III1	Forbes Creek	I
Jim Creek	III4	Kelsey Creek	I
All Other Tributaries	III4	Little Bear Creek	I
Suiattle River		Lyon Creek	I
Mouth to Milk Creek and		May Creek	I
Tributaries	III4	McAleer Creek	I
Milk Creek to Headwaters	III4	North Creek	I
Canyon Creek	III5	Scriber Creek	I
Dolly Creek	III5	Selder Creek	I
Small Creek	III5	Struve Creek	I
Miners Creek	III5	All Other Tributaries	III
All Other Tributaries	IV5B	Washougal River	III
Sultan River		All Tributaries	III
Mouth to Spada Lake	IV4B	Wenatchee River	
Spada Lake to Headwaters	II7	Mouth to Icicle Creek	IV4B
All Tributaries	II7	Icicle Creek to	
Sumas River	III7	Chiwaukum Creek	III7
All Tributaries	II7	Chiwaukum Cr. to Lake	
Tahuya River	II4	Wenatchee	IV1A
All Tributaries	II4	Mission Creek, Peshastin	
Taylor River	III6	Creek, mouth to Ingalls	
Thompson Creek	III6	Creek	IV1A
Thunder Creek	IV7A	Ingalls Creek	III1
Tuscohatchie Creek	IV7A	Peshastin Creek	IV7C
Wildcat Creek	IV7A	Little Wenatchee River	III4
All Other Tributaries	II6	Twin Lakes, Tributaries,	
Teanaway River		& Outlet stream	I
Mouth to North Fork	IV1A	All Other Tributaries	IV4A
North Fork	IV4A	White River	II7
All Tributaries	III7	All Tributaries	IV5A
Tieton River	IV7C	Whitechuck River	IV4B
All Tributaries	II	All Tributaries	II7
Tilton River	III	White Salmon River	III
All Tributaries	III	All Tributaries	II7
Connelly Creek	I	Willapa River	
Tolt River		Mouth to Patton Creek	IV1A
Mouth to Forks	II7	South Fork Willapa above	
North Fork Tolt	II6	Minnie Cr., Ward Cr.,	
South Fork to Falls	II3	Wilson Cr., Mill Cr.,	
Falls to Headwaters	III6	Fork Cr., Smith Cr.,	III1
Dry Creek, North Fork		All other Tributaries	II7
Creek, Yellow Creek	III6	Wind River	III
Langlois Creek, Stossel Cr.	I	Falls Creek	IV2B
Titicaca Creek	III6	Wishkah River	
All Other Tributaries	II6	Mouth to Forks	IV1A
Touchet River	IV1B	All Other Tributaries	III
All Tributaries	II7	Wynoochee River	
Toutle River		Mouth to Dam	III1
All "Red Zone" waters temporarily		All Other Tributaries	III
closed		Yakima River	
Tucannon River	IV1B	In Yakima & Benton	
Tucannon Hatchery Inlet	I	Counties	IV1B
All Tributaries	II7	Elsewhere	IV4A
Twisp River	IV4A	Swauk Creek	
All Tributaries	IV4A	Mouth to SR131	IV4A
Tye River	III4	Above SR131	IV7C
All Tributaries	III4	Rattlesnake Cr.	III1
Union River	II5	Wide Hollow Creek	IV7B
All Tributaries	II5	All Other Tributaries	III
Vashon Island Waters			
Judd Creek	I		
Shingle Mill Creek	I		
Christianson Creek	II3		
Tahlequah Creek	II3		
All Other Streams	IV7A		
Walla Walla River	IV1B		
All Tributaries	II7		
Wallace River	IV4D		
All Tributaries	III4		
Wallicut River	III		
All Tributaries	III		
Lake Washington Tributaries			
(Big) Bear Creek	I		
Coal Creek	I		

5. The following provisions apply to use of pans, mini-rocker boxes, and non-mechanized sluice boxes (under 2'x6"). Use which differs from the below provisions is unlawful. No prior approval from the Departments is required for these activities provided:
- operator(s) follows general provisions for these projects;
 - operator(s) follows stream classification found in sub-paragraph (4) of this regulation.

GENERAL-PROVISIONS:

1. All work will be performed by hand or hand tools only. These provisions do not authorize use of dredges, sluices, suction devices, or any motorized or mechanical devices.
 2. There will be no disturbance of gravelled spawning areas.
 3. There will be no streambank excavation.
 4. All pits, furrows, and potholes must be filled and leveled prior to completion of each day's operation.
 5. Material too large to be moved by hand will not be disturbed.
 6. Any siltation in excess of state water quality standards resulting from this project may be considered damaging to fish life, causing operations to be terminated.
6. The following provisions apply to non-mechanized sluicing. Use which differs from the below provisions is unlawful.
- a. The maximum size of sluice box is 18" wide by 60" long, or 7 1/2 sq. ft. Not to exceed 25% of width of stream.
 - b. All work will be performed by hand or hand tools only. These provisions do not authorize use of any motorized suction dredging or power sluicing, jetting, or nozzling apparatus.
 - c. There will be no disturbance of gravelled spawning areas.
 - d. There will be no streambank excavation.
 - e. No damming or diversions of the flowing stream will be allowed, unless specifically authorized.
 - f. Materials too large to be moved by hand will not be disturbed.
 - g. All pits, furrows, and potholes must be filled and leveled prior to completion of each day's operation.
 - h. Any siltation in excess of state water quality standards resulting from this project may be considered damaging to fish life, causing operations to be terminated and the Hydraulic Project Approval cancelled.
7. The following provisions apply to mechanized sluicing and dredging. Use which differs from the below provisions is unlawful.
- a. The maximum size of sluice box is 18" wide by 60" long, or 7 1/2 sq. ft. Not to exceed 25% of width of stream.
 - b. There will be no streambank excavation.
 - c. There will be no disturbance of gravelled spawning areas.
 - d. All pits, furrows, and potholes must be filled and leveled prior to completion of each day's operation.

- e. No damming or diversions of the flowing stream will be allowed, unless specifically authorized.
- f. No tracked or wheeled vehicles will be allowed within the wetted perimeter of the stream.
- g. Material too large to be moved by hand will not be disturbed.
- h. Extreme care will be taken to assure that no gasoline, oil or other harmful material is allowed to fall, be wasted into, or otherwise enter surface waters.
- i. Any siltation in excess of state water quality standards resulting from this project may be considered damaging to fish life, causing operations to be terminated and the Hydraulic Project Approval cancelled.

This regulation will be in effect until June 30, 1981.

WSR 80-15-066

WITHDRAWAL OF PROPOSED RULES DEPARTMENT OF AGRICULTURE

[Filed October 15, 1980]

Pursuant to the provisions of RCW 34.04-.048 and WAC 1-12-033, notice is hereby given of withdrawal by the proposing agency, Department of Agriculture, of "amending section WAC 16-86-060 Sale of Brucellosis Reactors" filed in the Code Reviser's office on September 17, 1980, under WSR 80-13-055.

John J. Doherty, DVM
Assistant Director
Department of Agriculture

WSR 80-15-067

PROPOSED RULES DEPARTMENT OF AGRICULTURE

[Filed October 16, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025 and chapter 16.36 RCW, that the Department of Agriculture intends to adopt, amend, or repeal rules concerning sale of brucellosis reactors. Requires reactors to be sold direct to slaughter only, amending WAC 16-86-060 and Definition—Official calfhood vaccination. Adjusts Washington State regulations to concur with USDA, APHIS-VS recommendations for lower dosage vaccine, amending WAC 16-86-011;

that such agency will at 1:00 p.m., Tuesday, December 2, 1980, in the Small Conference Room, General Administration Building, Olympia, Washington, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 3:00 p.m., Wednesday, December 17, 1980, in the Director's Office, Department of Agriculture.

The authority under which these rules are proposed is chapter 16.36 RCW.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to December 2, 1980, and/or orally at 1:00 p.m., Tuesday, December 2, 1980, Small Conference Room, General Administration Building, Olympia, Washington 98504.

Dated: October 16, 1980

By: John J. Doherty
Assistant Director

STATEMENT OF PURPOSE

For the purpose of legislative review of agency rules, the following statement is submitted under statutory authority chapter 16.36 RCW:

These rules relate to the State Department of Agriculture concerning the shipment of brucellosis reactor cattle and official calfhood vaccination for brucellosis.

This order is amended to specify that brucellosis reactor animals may be sold direct to slaughter only and to allow for the reduced dosage vaccine recommended by the USDA, APHIS-VS.

Agency personnel to contact:

John J. Doherty, DVM, Assistant Director/State Veterinarian, 406 General Administration Building AX 41, Olympia, Washington 98594, 206-753-5040.

Agency comment: None

Whether rule is necessary as a result of federal law or federal or state court action: No.

Proponents: Washington State Department of Agriculture

Opponents: Unknown

AMENDATORY SECTION (Amending Order 1539, filed October 17, 1977)

WAC 16-86-060 SALE OF BRUCELLOSIS REACTORS. Reactors to a brucellosis test may be moved or sold only to a slaughtering establishment where state-federal approved inspection is maintained ((or to a state-federal approved market for sale to such slaughtering establishment)). Reactor cattle can only be moved from a quarantine premises by permit from the director or his representative: **PROVIDED**, That any reactor to a brucellosis test must be marketed for slaughter within fifteen days from the date of tagging and branding.

AMENDATORY SECTION (Amending Order 1539, filed October 17, 1977)

WAC 16-86-011 DEFINITION—OFFICIAL CALFHOOD VACCINATION. For the purpose of this order "official calfhood vaccination" means a female bovine animal ((of dairy breed two to six months (60 to 179 days) of age or female bovine animal of beef breed two to ten months (60 to 299 days))) four through twelve months (120 to 365 days) of age vaccinated with an approved brucella vaccine. All vaccination must be done by a licensed accredited veterinarian or federal or state employed veterinarian. Vaccinated animals must be permanently identified as vaccinates by a tattoo in the right ear. The tattoo shall be the U.S. registered shield and V preceded by a number

indicating the quarter of the year and followed by a number corresponding to the last digit of the year in which vaccination was done. An official vaccination tag shall be used for individual animal identification unless excepted by the director. All brucella vaccinations shall be reported to the animal industry division, state of Washington before becoming official.

WSR 80-15-068

EMERGENCY RULES

DEPARTMENT OF FISHERIES

[Order 80-158—Filed October 16, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is a portion of Area 10D is closed to protect spawning sockeye along the northern and eastern shore and milling chinook bound for Issaquah Hatchery, while affording the opportunity to harvest coho.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 16, 1980.

By Gordon Sandison
Director

NEW SECTION

WAC 220-28-010D0R CLOSED AREA. Effective immediately through December 31, 1980, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in that portion of Puget Sound Salmon Management and Catch Reporting Area 10D within 250 yards of the eastern and northern shores of Lake Sammamish between Sammamish River and Issaquah Creek and that portion south of a line projected true east from Greenwood Point.

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 220-28-010D0Q CLOSED AREA. (80-136)

WSR 80-15-069
EMERGENCY RULES
DEPARTMENT OF FISHERIES
 [Order 80-159—Filed October 16, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to gear reduction regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is persons who have sold licenses to the gear reduction program in the past are precluded by existing rule from participating in the gear reduction program on a priority basis. Such an effect was not intended and does not meet the goals of the program. The changed rule will limit such restrictions to individuals who previously sold a fishing vessel or fishing gear to the program. This order is necessary to allow appropriate administration of the current program.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 16, 1980.

By Gordon Sandison
 Director

NEW SECTION

WAC 220-95-01000A PARTICIPATION IN GEAR REDUCTION PROGRAM. Notwithstanding the provisions of WAC 220-95-010, any individual who sells a vessel or fishing gear to the gear reduction program shall have any subsequent application to sell any vessel, gear or license placed at the bottom of any current priority listing utilized by the department.

WSR 80-15-070
EMERGENCY RULES
DEPARTMENT OF FISHERIES
 [Order 80-160—Filed October 16, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation

of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is Case and Hammersley Inlet are closed to ensure escapements by local early-timing chum stocks. Henderson, Budd and Eld Inlets are closed to provide secondary protection of local coho stocks. An opportunity for selective harvest of chinook is allowed in Budd Inlet. The Eld Inlet boundary line has been modified to one more easily recognized by tribal fishermen. Chum salmon management needs prevail in Totten Inlet.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 16, 1980.

By Gordon Sandison
 Director

NEW SECTION

WAC 220-28-013B0P CLOSED AREA. (1) Effective immediately until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in:

(a) that portion of Puget Sound Salmon Management and Catch Reporting Area 13B westerly of a line projected from the flashing light (Fl 4 sec) at Arcadia to Hungerford Point. (Hammersley Inlet).

(b) that portion of Puget Sound Salmon Management and Catch Reporting Area 13B northerly of a true east-west line projected through the southernmost point on Stretch Island and intersecting with the eastern and western shores of Case Inlet. (Case Inlet).

(c) that portion of Puget Sound Salmon Management and Catch Reporting Area 13B southerly of a line projected from Johnson Point to Dickinson Point. (Henderson Inlet).

(d) that portion of Puget Sound Salmon Management and Catch Reporting Area 13B southwesterly of a line projected true north of Cooper Point to the outermost point on the northeastern shore of Sanderson Harbor. (Eld Inlet).

(2) Effective immediately until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with purse seine or gill net gear in that portion of Puget Sound Salmon Management and Catch Reporting Area 13B southerly of a line projected from Dofflemeyer Point to Cooper Point. (Budd Inlet).

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 220-28-013B0N CLOSED AREA. (80-145)

WSR 80-15-071

PROPOSED RULES

EASTERN WASHINGTON UNIVERSITY

[Filed October 17, 1980]

Notice is hereby given in accordance with the provisions of RCW 28B.19.030, that the Eastern Washington University intends to adopt, amend, or repeal rules concerning the Constitution of the Associated Students of Eastern Washington University, chapter 172-114 WAC; that such institution will at 10:00 a.m., Thursday, December 18, 1980, in the Pence Union Building, Cheney, Washington, conduct a hearing relative thereto; and that the adoption, amendment, or repeal of such rules will take place at 10:30 a.m., Thursday, December 18, 1980, in the Pence Union Building, Cheney, Washington.

The authority under which these rules are proposed is the Board of Trustees of Eastern Washington University.

Interested persons may submit data, views, or arguments to this institution in writing to be received by this institution prior to December 8, 1980, and/or orally at 10:30 a.m., Thursday, December 18, 1980, Pence Union Building, Cheney, Washington.

Dated: October 13, 1980

By: Kenneth R. Dolan
Secretary, Board of Trustees

STATEMENT OF PURPOSE

The Constitution of the Associated Students of Eastern Washington University, chapter 172-114 WAC, provides for the orderly governance of the Students Association at Eastern Washington University. The proposed rule change combines the Legislative and Executive Branch of the A.S. Government. The Students Association and their constitution were formed by the Board of Trustees under the broad authority of RCW 28B.35.120. The institutional representative responsible for implementing these proposed rule changes is Mr. Richard Flamer, Provost for Student Services, Eastern Washington University. The proposed rule change is being submitted by Dr. H. George Frederickson, President, Eastern Washington University.

AMENDATORY SECTION (Amending Resolution 78-03, filed 8/16/78)

WAC 172-114-010 PREAMBLE. We, the Associated Students of Eastern Washington University, in order to ~~((develop in the students the concept of self government; an appreciation and understanding of democratic values and processes; to strengthen in the student the realization of his rights, responsibilities, and common interest with the~~

~~community as a citizen, to represent student interests, needs and welfare; to develop in the students an understanding and appreciation of their personal, social, and vocational relationship to the society in which they live; develop in the students fellowship and understanding; and to provide a physical and social environment in which to achieve the above objectives do affirm and establish this Constitution subject to the authority vested in the Associated Students by the Board of Trustees of Eastern Washington University)) assume the responsibility and privileges of self-government; maintain an appreciation and understanding of democratic values and processes; strengthen the realization of student rights, responsibilities, and common interest with the community as a citizen; represent student interest, needs, and welfare; provide for the development to student fellowship and understanding; do ordain and establish this Constitution, whose purpose it shall be to promote student affairs in cooperation with the Board of Trustees, administration, and faculty.~~

AMENDATORY SECTION (Amending Resolution 78-03, filed 8/16/78)

WAC 172-114-020 ARTICLE I—NAME, DEFINITIONS, AND MEMBERSHIP. (1) The name of this organization shall be the "Associated Students of Eastern Washington University," referred to herein as "~~((A-S))~~ ASEWU."

(2) When used in this Constitution, the following terms shall mean:

(a) "University" means Eastern Washington University and, collectively those responsible for its control and operation.

(b) "Student" includes all persons enrolled in any course at the university.

(c) "Instructor" means all persons hired by the university to conduct classroom activities. In certain situations a person may be both "student" and "instructor." Determination of ~~((his))~~ status in a particular situation shall be determined by the ~~((surrounding))~~ pertinent facts.

(d) "Legal compulsion" means a state or federal judicial or legislative order which requires some action by the person to whom it is directed.

(e) "Organization" means a number of persons who have complied with the formal requirements of university recognition as in WAC 172-114-030(5).

(f) "Group" means members of the university community who have not yet complied with the formal requirements for becoming an organization.

(g) "Student press" means either an organization whose primary purpose is to publish and distribute any publication on campus or a regular publication of a campus organization.

(h) "Resident" is used to mean enrolled at the University.

(i) "Full time" is used to mean six credit hours or more.

(j) "Shall" is used in the imperative sense.

~~((+))~~ (k) "May" is used in the permissive sense.

~~((+))~~ (l) All other terms have their natural meaning unless the context dictates otherwise.

(3) All students who are registered for one credit hour or more at Eastern Washington University shall be members of this organization for the period of time covered by the fee.

AMENDATORY SECTION (Amending Resolution 78-03, filed 8/16/78)

WAC 172-114-030 ARTICLE II—STUDENTS' RIGHTS AND RESPONSIBILITIES. (1) The following enumeration of rights shall not be construed to deny or disparage others retained by students in ~~((their))~~ the capacity as members of the student body or as citizens.

(2) Access to higher education. Within the limits of its facilities and budget, the university shall be open to all applicants who are qualified according to its admission requirements. No person, once enrolled, may be denied attendance or academic advancement except for disqualification on academic grounds or conviction of violating university rules.

(3) Education.

(a) Students are free to pursue their educational goals within existing university programs; appropriate opportunities for learning shall be provided by the state within its financial resources and the student's ability. This shall include the knowledge, imagination, and dedication of faculty and administrators through excellent teaching and readily available and adequate advice and counsel.

(b) Discussion and expression of all views relevant to the subject matter is permitted in the classroom subject only to the responsibility of the instructor to maintain order and to present course content. Students are responsible for learning the content of any course for which

they are enrolled. Requirements for participation in classroom discussion and submission of written exercises are not inconsistent with this section.

(c) Academic evaluation of student performance shall be neither prejudicial nor capricious. Information about student views, beliefs, and political associations acquired by professors in the course of their work as instructors, advisers, and counselors(;) is confidential and is not to be disclosed to others unless under legal compulsion. Questions relating to intellectual or skills capacity are not subject to this section.

(4) Campus Expression.

(a) Free inquiry, expression, petition, and assembly are guaranteed to all students. Support of any cause by lawful means which do not disrupt the operation of the university is permitted. Students, groups, and campus organizations may invite and hear any persons of their own choosing subject only to the requirements for use of university facilities.

(b) The right of peaceful protest is granted within the university community. The university retains the right to assure the safety of individuals, the protection of property, and the continuity of the educational process.

(c) Orderly picketing and other forms of peaceful protest are permitted on university premises. Interference with ingress to and egress from university facilities, interruption of classes, or damage to property exceeds permissible limits. ~~((Even though remedies are available through local enforcement bodies, the university may choose to impose its own disciplinary sanctions:))~~

(d) Every student has the right to be interviewed on campus by any legal organization desiring to recruit at the university. Any student, group, or organization may protest against any such organization provided that protest does not interfere with any other student's right to have such an interview.

(5) Campus Organizations.

(a) Organizations and groups may be established within the university for any legal purpose. Affiliation with an extramural organization shall not, in itself, disqualify the university branch or chapter from university privileges. Any organization which engages in illegal activities may have sanctions imposed against it including withdrawal of university recognition for a period not exceeding one year.

(b) A group shall become an organization when formally recognized by the university. All groups that meet the following requirements shall be recognized:

(i) Submission of a list of officers and copies of the constitution and bylaws to the appropriate university official or body. All changes and amendments shall be submitted within one week after they become effective.

(ii) Where there is affiliation with an extramural organization, that organization's constitution and bylaws shall be filed with the appropriate university official or body. All amendments shall be submitted within a reasonable time after they become effective.

(iii) All sources of outside funds shall be disclosed.

(c) Membership in all university-related organizations, within the limits of their facilities, shall be open to any member of the university community who is willing to subscribe to the stated aims and meet the stated obligations of the organization.

(d) University facilities shall be assigned to organizations, groups, and individuals within the university community for regular business meetings, for social programs, and for programs open to the public; provided:

(i) Reasonable conditions may be imposed to regulate the timeliness of requests, to determine the appropriateness of the space assigned, to regulate time and use, and to insure proper maintenance.

(ii) Preference may be given to programs designed for audiences consisting primarily of members of the university community.

(iii) Allocation of space shall be made based on priority of requests and the demonstrated needs of the organization, group, or individual.

(iv) The university may delegate the assignment function to an administrative official or a student committee or organization.

(v) Charges may be imposed for any unusual costs for use of facilities.

(vi) Physical abuse of assigned facilities shall result in reasonable limitations on future allocation of space to offending parties and restitution for damages.

(vii) The individual, group, or organization requesting space must inform the university of the names of outside speakers and indicated subject.

(e) No individual, group, or organization may use the university name without the express authorization of the university, except to

identify the university affiliation. University approval or disapproval of any policy may not be stated or implied by any individual, group, or organization.

(6) Publications.

(a) A student, group, or organization may distribute written material on campus without prior approval ~~((providing))~~ provided such distribution does not disrupt the operations of the university and the material clearly states the publisher.

(b) The student press is to be free of censorship. The editors and manager shall not be arbitrarily suspended because of student, faculty, administration, alumni, or community disapproval of editorial policy or content. Similar freedom is assured oral statements of views on a university-controlled and student-operated radio or television station. This editorial freedom entails a corollary obligation under the canons of responsible journalism and applicable regulations of the Federal Communications Commission.

(c) All student communications shall explicitly state on the editorial page or in broadcast that the opinions expressed are not necessarily those of the university or its student body.

(7) University Government.

(a) All constituents of the university community are free, individually and collectively, to express their views on issues of university policy and on matters of interest to the student body. Clearly defined means shall be provided for student expression~~((s))~~ on all university policies affecting academic and student affairs.

(b) The role of student government and its responsibilities shall be made explicit. Student government actions reviewed by the university shall only be reviewed through procedures agreed upon in advance.

(c) On questions of education policy, students are entitled to a participatory function. Faculty-student committees shall be created to consider questions of policy affecting student life. Students shall be designated as members of standing and special committees concerned with university policy affecting academic and student affairs, including those concerned with curriculum~~((t))~~, discipline, admissions, and allocation of student fees.

(8) Privacy.

(a) The right of students to be secure in their persons, living quarters, papers, and effects against unreasonable searches and seizures is guaranteed. These rights of privacy extend to university-owned housing. Nothing in the university relationship or housing contract may expressly or by implication give the university or housing officials authority to consent to a search of a student's room by police or other government officials, or anyone else.

(b) When the university seeks access to a university-owned student room to determine compliance with provisions of applicable multiple dwelling unit laws or for improvement or repairs, the occupant shall be notified of such action not less than twenty-four hours in advance. There may be entry without notice in emergencies where imminent danger to life, safety, health, or property is reasonably feared.

(9) Student Records.

(a) The privacy and confidentiality of all student records shall be preserved. Official student academic records, supporting documents, and other student files shall be maintained only by full-time members of the university staff employed for that purpose. Separate files shall be maintained of the following: Academic records, supporting documents, and general educational records; records of discipline proceedings; medical and psychiatric records; and financial aid records.

(b) No entry may be made on a student's academic record and no document may be placed in his file without actual or constructive notice to the student. All matters placed in a student's file in accordance with published customary and ordinary policies, procedures, and regulations~~((:))~~ shall constitute constructive notice.

(c) Access to his official, institutional records and files is guaranteed every student subject only to reasonable regulations as to time, place, and supervision. A student may challenge the accuracy of any entry or the presence of any item by bringing the equivalent of an equitable action against the appropriate person.

(d) No information in any student file may be released to anyone except with the prior written consent of the student concerned or as stated below~~((:))~~:

(i) Members of the faculty with administrative assignments may have access for internal educational purposes as well as routinely necessary administrative and statistical purposes.

(ii) The following data may be given an inquirer: School or division of the enrollment, periods of enrollment, degrees awarded, honors, and major field.

(iii) If any inquiry is made in person or by mail, the following information may be given in addition to that in subsection (ii) immediately above: Address and telephone number, date of birth, and unless the student has instructed the registrar's office not to release copies of his transcript without his written authorization, academic information from the transcript will be released when it is clear the institution is being cited as an educational reference.

(iv) Properly identified officials from federal, state, and local government agencies may be given the ((following)) information ((upon express request in addition to that in subsections (ii) and (iii) immediately above: Name and address of parent or guardian if student is a minor, and any information)) required under legal compulsion.

(v) Unless under legal compulsion, personal access to a student's file shall be denied to any person making an inquiry.

(e) Upon graduation or withdrawal from the university, the records and files of former students shall continue to be subject to the provisions of this section((f-)).

(10) Procedural Standards in Disciplinary Proceedings. Disciplinary proceedings must guarantee fundamental concepts of ((fair play)) due process((f)). The procedural requirements of due process may vary with the seriousness of the charge. In every proceeding in which a major disciplinary action is contemplated, the student shall have the rights of due process, including at least:

(a) The student shall be informed, in writing, of the reasons for the proposed disciplinary action, including charges, with sufficient time to ensure opportunity to prepare for the hearing.

(b) The burden of proof shall rest upon the official bringing the charge.

(c) Upon request, the right to: Closed proceedings, confrontation and cross-examination of witnesses, be present, challenge any member hearing the case and witnesses, a record of the appeal at least one step beyond the initial determination.

(d) All matters upon which the decision may be based must be introduced into evidence at the proceeding. The decision shall be based solely upon such matter. Illegally acquired evidence may not be admitted.

(e) No person who is otherwise interested in the particular case may sit in judgment during the proceeding.

(f) The decision shall be final subject only to the student's right ((to)) ((off)) to appeal.

(11) Procedural Standards in Student Complaint Proceedings. If students have complaints of infringement of their rights, they shall, on request, have a hearing. Minimum requirements of procedural due process for all persons ((shall)) ((should)) shall include those in WAC 172-114-030(10) and:

(a) The University Disciplinary Committee ((should)) shall include both faculty and student members.

(b) The decision of the University Disciplinary Committee should be final, subject only to the right of appeal by parties concerned.

(12) Dual Membership. Activities of students may upon occasion result in violation of law. Students who violate the law may incur penalties prescribed by civil authorities, but institutional authority ((should)) shall never be used merely to duplicate the function of general laws. Only where the institution's interests as an academic community are distinctly and clearly involved ((should)) shall the special authority of the institution be asserted. The student who incidentally violates institutional regulations in the course of his off-campus activity, such as those relating to class attendance, ((should)) shall be subject to no greater penalty than would normally be imposed. Institutional action should be independent of community pressure.

AMENDATORY SECTION (Amending Resolution 78-03, filed 8/16/78)

WAC 172-114-040 ARTICLE III—((LEGISLATION))
COUNCIL. (1) The legislative powers of the ((A.S.)) ASEWU shall be vested in the ((legislature)) ASEWU Council and may not be transferred.

(2) ((All legislation shall include: The names of the sponsor(s), date of introduction, committee referred to—if any, disposition, and date of disposition, signatures of A.S. Speaker and A.S. President, take effect immediately upon signature by the A.S. President or override of his veto by the A.S. Legislature, and shall continue in effect until five years from the last date of signature or override or until rescinded:

(3) The voting members of the legislature shall consist of fifteen representatives known as legislators, elected by numbered, at-large positions for one year terms. The legislators shall take office on the last

day of the quarter in which they are elected, as follows: Positions 1 through 5, elected Fall Quarter; Positions 6 through 10, elected Winter Quarter; Positions 11 through 15, elected Spring Quarter. Provided, that no person may hold more than one voting seat in the legislature, and the A.S. President and A.S. Vice President may not hold voting seats in the legislature.

(4) Candidates/members for/of the legislature shall be members of the A.S. and have/maintain a two point cumulative grade point average, be enrolled for and complete six credit hours in the previous quarter (excluding summer quarter), and have at least one quarter in residence. A legislator's office shall become vacant upon the incumbent's death, resignation, recall, withdrawal from membership in A.S. (excluding summer quarter), or declaration of nonperformance of duties stated in this Constitution, or violation of this Constitution, by the A.S. Superior Court. Legislators who miss three full regularly scheduled consecutive meetings or four full regularly scheduled meetings during a quarter shall have their seat declared vacant by the A.S. Speaker. All vacancies shall be filled for the balance of the term at the next regularly scheduled election.

(5) The legislature shall be the judge of all of the A.S. election returns and of the qualifications of its legislators and a majority of its legislators shall constitute a quorum; there shall be no proxy voting, and there shall be no secret balloting.

(6) The legislature shall meet not less than once each month during Fall, Winter, and Spring Quarters, and at special meetings called by the Speaker, one-third of its legislators, or by the presentation to the President of a petition signed by five percent of the A.S. All meetings shall be open to the public, a record shall be kept of the votes taken therein, and copies of the minutes shall be available to any member of the university community upon request.

(7) The legislature shall have the following powers and duties:

(a) Be responsible for its own organization, election of legislative committees, the employment and supervision of those employes whom it deems necessary to assist it or individual legislators in the exercise of their legislative duties and powers, provided it budgets for same, and said salaries shall not exceed a cabinet member's salary.

(b) Elect an A.S. legislator to the position of Speaker the third meeting of Fall, Winter, and Spring Quarters, who shall serve one quarter not counting Summer Quarter. Vacancies occurring in the Speaker's office shall be filled in the same manner for the balance of the unexpired term.

(c) Elect an A.S. legislator to the position of Speaker Pro-Tem the third meeting of Fall, Winter, and Spring Quarters who shall serve one quarter not counting Summer Quarter. Vacancies occurring in the Speaker Pro-Tem's office shall be filled in the same manner for the balance of the unexpired term.

(d) The legislature shall elect from among its members a Legislative Coordinator to serve during Summer Quarter who may receive a salary not to exceed that of a cabinet member.

(e) Shall enforce this Constitution:

(f) May remove a cabinet officer for nonperformance of duties or violation of this Constitution:

(g) May request the A.S. Superior Court to find the A.S. President guilty of nonperformance of duties stated in this Constitution or violation of this Constitution:

(h) Upon a two-thirds vote of the A.S. Legislature, the A.S. President may be recalled as described in WAC 172-114-080(5):

(i) No legislative committee shall have the authority to delay presentation to the full legislature legislation referred to it for more than two meetings without permission of the sponsor:

(j) Budget and disbursement of all funds on behalf of A.S.:

(k) Cause to have published an annual Financial Statement and Audit:

(l) Establish policies for and have supervision of all officials, budgets, committees, and organizations:

(m) Render advice upon and approve or reject all appointments made by officials of the Associated Students of Eastern Washington University:

(n) Publish the A.S. Committee Manual stating the membership, eligibility, purpose, and duties of each committee:

(o) Approve and remove persons to and from committees:

(p) Enact all legislation necessary to ensure that its policies are enforced:

(q) Do anything else necessary or convenient to carry out this Constitution:

(r) By a two-thirds vote of the A.S. Legislature, the A.S. Legislature may override a veto by the A.S. President:

(8) The Speaker shall have the following powers and duties: Prepare the agenda for and chair all meetings of the legislature; call meetings of the legislature; prepare a schedule of regular meetings at the beginning of Fall, Winter, and Spring Quarters for the advice and consent of the A.S. Legislature; appoint a clerk and other assistants which may be beneficial to the performance of his office or the functioning of the legislature, with its advice and consent, and to request salaries for the same, not to exceed a cabinet member's salary; shall be responsible for executing legislative decisions; all administrative matters of the legislature; make all legislative appointments, except as otherwise provided in this Constitution, subject to the advice and consent of the legislature; assume the duties of the Vice President during the Vice President's absence or disability or vacancy of the office of Vice President until the vice presidential vacancy is filled as provided for in Article IV, section (2) (WAC 172-114-050(2)); and to do all things necessary or convenient to carry out such duties not in conflict with this Constitution:)) Membership. The members of the ASEWU Council shall consist of nine at-large Council Members, the ASEWU President, the ASEWU Executive Vice President, and the ASEWU Finance Vice President. The voting membership of the ASEWU Council shall consist of the Executive Vice President and nine Council Members, elected by numbered, at-large positions for one year. The Council Members shall take office on the last day of the quarter in which they are elected, as follows: Positions 1 through 3 elected fall quarter, positions 4 through 6 elected winter quarter, positions 7 through 9 elected spring quarter. No person shall hold more than one elected position on the Council. The ASEWU President and ASEWU Finance Vice President shall have all Council membership rights excluding voting.

(3) Meetings. The ASEWU Council shall meet not less than four times during each quarter (excluding summer quarter), and special meetings may be called by the ASEWU Executive Vice President, by one-third of the Council Members, or by a presentation of a petition to the ASEWU Council signed by five percent of the ASEWU. All meetings shall be open to the public. A record shall be kept of the votes taken therein, and copies of the minutes shall be available to any member of the University community upon request.

(a) Quorum. The ASEWU Council meetings shall have quorum being a majority of the ASEWU Council Members.

(b) Proxy Voting. There shall be no proxy voting.

(4) Legislation. All legislation shall include: The names of the sponsor(s); date of introduction; committee referred to, if any, disposition and date of disposition; signature of the ASEWU Executive Vice President and the ASEWU President, or override of his/her veto by the ASEWU Council; and shall continue in effect until five years from the last date of signature, an override, or until rescinded.

(5) Council Powers and Duties. The ASEWU Council shall have the following policies and duties:

(a) The ASEWU Council shall enforce this Constitution.

(b) The ASEWU Council shall serve as the official representative of ASEWU.

(c) The ASEWU Council shall enact all legislation necessary to ensure that its policies are enforced.

(d) The budgeting authority of the ASEWU shall be vested in the ASEWU Council and may not be transferred.

(i) The budget shall include all funds, revenues, and reserves; shall be divided into programs, subprograms, and objects of expense and shall include supporting data; shall indicate as to each program, subprogram, or object of expense the actual expenditures of the preceding year; and shall include any proposed capital improvement program for the next six fiscal years.

(ii) Regular budgets shall be those budgets adopted during Spring quarter for the following fiscal year. Supplemental budgets shall be all other budget requests made throughout the year. Copies of the budgets shall be delivered to each member of the ASEWU Council and be available to any member of the University community upon request.

(iii) Unless otherwise provided by the appropriation legislation, all unexpended and unencumbered appropriations in the current expense appropriation legislation shall lapse at the end of the fiscal year. An appropriation in the capital budget appropriation legislation shall lapse when the project has been completed or abandoned or when no expenditure or encumbrance has been made for three years.

(iv) Any expenditure in excess of an appropriation shall be null and void; and any official, agent, or employee knowingly responsible shall be personally liable to anyone damaged by this action; providing the ASEWU Council may permit the ASEWU to enter into contracts requiring the payment of funds from appropriation of subsequent fiscal years.

(v) The ASEWU Council shall publish an annual Financial Statement summarizing the regular ASEWU budget.

(vi) The ASEWU Council may request an annual audit, provided it budgets for the same.

(e) By a two-thirds vote of the ASEWU Council, the ASEWU Council may override a veto by the ASEWU President.

(f) The ASEWU Council shall be responsible for its own organization in the establishment and election of subcommittees and their membership. No ASEWU Council subcommittee, having legislation referred to it, shall have the authority to delay presentation to the full Council for more than two meetings without the permission of the sponsor.

(g) The ASEWU Council shall be responsible for the employment of those employees it deems necessary to assist the Council in the exercise of their Council duties and powers, provided it budgets for the same. The appointment for such employment, presented by the ASEWU Executive Vice President, shall receive the advice and consent of the ASEWU Council.

(h) Committees. The ASEWU Council shall be responsible for student representation on all University Committees, councils of the Academic Senate and their subcommittees, and ASEWU Committees.

(i) Appointment to such committees, presented by the ASEWU President, shall receive the advice and consent of the ASEWU Council.

(ii) Students appointed to these committees shall serve at the discretion of the ASEWU Council.

(iii) All student appointments to these committees shall serve one year terms, beginning on the date of confirmation of the appointment and shall terminate one year after that appointment, unless otherwise specified in the committee structure.

(iv) Committees or committee chairpersons shall submit to the ASEWU a copy of all agendas and minutes.

(v) The ASEWU Council shall publish the ASEWU Committee Manual stating the membership, eligibility, purpose, and duties of all committees with student representation.

(i) Election returns. The ASEWU Council shall be the judge of all the ASEWU election returns and of the qualifications of its membership as prescribed in Article IV of this Constitution.

(j) ASEWU Council positions shall be declared vacant:

(i) When ASEWU Council Members miss three full, regularly scheduled, consecutive meetings, or four regularly scheduled meetings during a quarter.

(ii) When ASEWU Council Members violate academic qualifications as described in Article IV of this Constitution.

(iii) Upon the incumbent's death, resignation, recall, or withdrawal from membership in ASEWU (excluding summer quarter).

(iv) By declaration of nonperformance of duties stated in this Constitution by the ASEWU Superior Court.

(k) Chairperson Pro Tem. The ASEWU Council shall elect an ASEWU at-large Council Member to the position of Chairperson Pro Tem the second meeting of fall, winter, and spring quarters, who shall serve one quarter (excluding summer quarter). Vacancies occurring in the Chairperson Pro Tem's office shall be filled in the same manner for the balance of the unexpired term.

(6) ASEWU President. The ASEWU President, serving as an ASEWU Council Member, shall act as the chief officer and representative spokesperson on behalf of the ASEWU Council.

(a) The ASEWU President shall be responsible for executing Council and Judicial decisions.

(b) The ASEWU President may veto any legislative bill or supplemental budget passed by the ASEWU Council within three working days of passage, shall sign all legislation within three working days of passage, or override of veto by the ASEWU Council.

(c) The ASEWU President may create cabinet positions and appoint cabinet officers with the advice and consent of the ASEWU Council, who shall serve at his/her discretion, provided it budgets for the same.

(d) The ASEWU President shall make appointments in an expedient manner, with the advice and consent of the ASEWU Council.

(e) The ASEWU President shall hold twice-a-month staff meetings with the ASEWU Executive Vice President, ASEWU Finance Vice President, Provost for Student Service, ASEWU Business Manager, and Coordinator of Student Activities.

(f) The ASEWU President or his/her designee shall supervise all ASEWU elections and shall be responsible for validating all positions.

(7) ASEWU Executive Vice President. The ASEWU Executive Vice President shall chair the ASEWU Council, as a voting member.

(a) The ASEWU Executive Vice President shall assume other duties delegated by the ASEWU President.

(b) The ASEWU Executive Vice President shall prepare the agenda for and chair all meetings of the ASEWU Council; shall call meetings of the ASEWU Council; shall prepare a schedule of all regular meetings for fall, winter, and spring quarters with the advice and consent of the ASEWU Council.

(c) The ASEWU Executive Vice President shall appoint a clerk, with the advice and consent of the ASEWU Council.

(d) The ASEWU Executive Vice President shall be responsible for all administrative matters of the ASEWU Council.

(e) The ASEWU Executive Vice President shall assume the duties of the ASEWU President during the President's absence or disability.

(8) ASEWU Finance Vice President. The ASEWU Finance Vice President shall be member of the ASEWU Council.

(a) ASEWU Finance Vice President shall be responsible for the management of all ASEWU moneys and properties.

(b) ASEWU Finance Vice President shall supervise all expenditures of ASEWU funds.

(c) ASEWU Finance Vice President shall be a voting member and chair the finance subcommittee of the ASEWU Council.

(d) ASEWU Finance Vice President shall present to the Council a published financial statement each month summarizing ASEWU funds for that month.

(e) ASEWU Finance Vice President shall publish an annual budget book summarizing the upcoming year's budget requests and recommendations as well as budget requests and the budgeted amounts for the past five years.

(f) ASEWU Finance Vice President shall assume other duties delegated by the ASEWU President.

(9) Salaries. Elected and appointed members of the ASEWU shall be paid on the following basis.

(a) The ASEWU President shall receive a quarterly (12 month) salary based upon the quarterly cost of in-state tuition, double occupancy room and board, and four hundred dollars.

(b) The ASEWU Executive Vice President and the ASEWU Finance Vice President shall receive a quarterly (9 month) salary based upon the quarterly cost of in-state tuition, double occupancy room and board, and two hundred and fifty dollars.

(c) ASEWU Cabinet members shall receive a quarterly (9 month) salary not to exceed two-thirds of that of the ASEWU Executive Vice President or the ASEWU Finance Vice President.

(d) The ASEWU Council Clerk and other ASEWU Council employees shall receive a quarterly (9 month) salary not to exceed two-thirds of that of the ASEWU Executive Vice President or the ASEWU Finance Vice President.

(e) The ASEWU at-large Council Members may receive a quarterly salary not to exceed the in-state tuition rate, provided it budgets for the same.

(10) Vacancies.

(a) The positions of ASEWU Council Members, ASEWU President, ASEWU Executive Vice President, ASEWU Finance Vice President shall become vacant upon the incumbent's death, resignation, recall, withdrawal from membership in ASEWU (excluding summer quarter for the ASEWU Executive Vice President, ASEWU Finance Vice President, and ASEWU Council Members), or declaration of nonperformance of duties stated in this Constitution by the ASEWU Superior Court.

(b) In the case of a vacancy in the office of the ASEWU President, the ASEWU Executive Vice President shall assume the office of the ASEWU President to serve with full authority and power for the remainder of the unexpired term.

(c) In the case of a vacancy in the office of the ASEWU Executive Vice President, the Council Pro Tem shall assume the office of the ASEWU Executive Vice President to serve with full authority and power for the remainder of the unexpired term.

(d) In the case of a vacancy in office of the ASEWU Finance Vice President, the ASEWU President shall appoint, with the advice and consent of the ASEWU Council, an ASEWU member to assume the office of ASEWU Finance Vice President to serve with full authority and power until the next regularly scheduled election, at which time a member of ASEWU shall be elected to serve the balance of the term.

(e) In the case of a vacancy of a Council position, a member of the ASEWU shall be elected at the next regularly scheduled election to serve for the balance of that term.

(11) Terms.

(a) The terms of the ASEWU President and the ASEWU Executive Vice President shall be for one year and shall be elected winter quarter and take office the last day of winter quarter.

(b) The term of the ASEWU Finance Vice President shall be for one academic year and one quarter (excluding summer quarter), taking office the last day of winter quarter to the last day of spring quarter. During the overlapping terms of the outgoing and incoming of the ASEWU Finance Vice President, it shall be the duty of the incumbent ASEWU Finance Vice President to prepare and present a proposed budget for ASEWU to the ASEWU Council. The incoming ASEWU Finance Vice President shall have no authority or power to execute transactions during this overlapping period. It shall be the duty of the incumbent ASEWU Financial Vice President to serve as chair of the Finance Subcommittee of the ASEWU Council. The incoming ASEWU Finance Vice President shall serve as a member of the ASEWU Council and the Finance Subcommittee of the ASEWU Council.

AMENDATORY SECTION (Amending Resolution 78-03, filed 8/16/78)

WAC 172-114-050 ARTICLE IV—((EXECUTIVE)) ELECTIONS. (1) ((The executive power of the A.S. shall be vested in the A.S. President and A.S. Vice President and may not be transferred.

(2) Candidates for the offices of and the A.S. President and A.S. Vice President shall be members of the A.S., shall have/maintain a two point cumulative grade average, be enrolled for and complete six credit hours in the previous quarter (excluding Summer Quarter for the A.S. Vice President), shall have a minimum of five quarters as a full-time student, at least three of which shall be in residence at the university immediately prior to election for office. The A.S. President's and A.S. Vice President's office shall become vacant upon the incumbent's death, resignation, recall, withdrawal from membership in A.S. (excluding Summer Quarter for the A.S. Vice President), or declaration of nonperformance of duties [states] [stated] in this Constitution or violation of this Constitution, by the A.S. Superior Court. In case of vacancy in the office of the presidency, the Vice President shall assume the presidency for the balance of the unexpired term.

(3) The President and Vice President shall serve one year terms, or until a successor takes office, taking office on the ninth Thursday of the quarter in which they are elected, which shall be Spring Quarter.

(4) The President shall serve as the chief executive officer and representative of A.S.; shall enforce this Constitution; shall be responsible for executing legislative and judicial decisions; shall present to the legislature, at its first meeting of each quarter, his executive request legislation; may veto any legislative bill or supplemental budget passed by the A.S. Legislature within three working days of passage; shall sign all legislation within three working days of passage or override of veto by the A.S. Legislature; may create cabinet positions and appoint cabinet officers with the advice and consent of the legislature, who will serve at his pleasure except as provided for in Article III, section (7)(f) (WAC 172-114-040(7)(f)), and request salaries for such cabinet officers not to exceed the limit in Article VIII, section (7) (WAC 172-114-090(7)); make all appointments in an expeditious manner, except as otherwise provided for in this Constitution, subject to the advice and consent of the legislature; shall hold twice a month executive meetings with the A.S. Vice President, Cabinet, Speaker, and Speaker Pro-Tem while the university is in session; all administrative matters and programs of A.S. except as otherwise provided for in this Constitution; may request the A.S. Superior Court to find an A.S. Legislator guilty of nonperformance of his duties stated in this Constitution or violation of this Constitution; and do all things necessary or convenient to carry out such duties not in conflict with this Constitution.

(5) The Vice President shall assume the office of A.S. President upon that position being vacant as provided for in Article IV, section (2) (WAC 172-114-050(2)); assume any duties delegated by the President; shall supervise all A.S. elections; shall be responsible for validating all petitions; and assume the duties of the President during the President's absence or disability.) Election Schedule. Filing shall open on the fifth Thursday of fall, winter, and spring quarters. Filing shall close on the sixth Thursday, the ASEWU primary election shall be on the seventh Thursday, and the ASEWU general election on the eighth Thursday.

(2) Qualifications for Office.

(a) All candidates for and members of the ASEWU Council shall have/maintain a two point cumulative grade point average at the University and be enrolled for, and complete, six credit hours the previous quarter (excluding summer quarter).

(b) Candidates for ASEWU Council at-large positions shall have at least one quarter in residence at the University immediately prior to election of office.

(c) Candidates for ASEWU President, Executive Vice President, and Finance Vice President shall have a minimum of three quarters as a full-time student at a higher education institution, at least one of which shall be in residence at the University immediately prior to election of office.

(3) Filing.

(a) Those candidates filing for office, and are qualified at such time, shall have their names entered on the primary election ballot.

(b) A random selection drawing will determine the order of candidate placement on the ballot.

(4) Polling Places.

(a) The polls shall be located at:

(i) Pence Union Building.

(ii) Tawanka Commons.

(iii) And as otherwise provided by the ASEWU Council.

(b) The polls shall be open from 7:30 a.m. until 7:00 p.m., and members of ASEWU shall be allowed to vote upon presentation of suitable identification.

(c) Two election clerks shall be assigned to each polling place, and they shall be solely responsible for supervising the ballots, ballot boxes, and voting at the polling places. They may not be, or related to, a candidate. They shall be employed through the office of the ASEWU President.

(d) Any member of ASEWU may present an "Application of Absent Voter" form to the office of the ASEWU President.

(5) Votes Cast.

(a) All votes shall be cast by secret ballot.

(b) All ballots shall be kept under lock and key for six months after the election.

(c) All members of ASEWU shall be allowed to vote once in an election.

(6) Interpretation of Results.

(a) A candidate is elected to office when receiving a plurality of votes cast, that being at least forty percent.

(b) The two candidates receiving the highest number of votes for each office in the primary, who are qualified, shall have their names entered on the final election ballot: PROVIDED, HOWEVER, That in case of a tie for the second highest number of votes for that office, who are qualified, shall have their names entered on the final election ballot.

Write-in candidates shall have the option of removing their names from the ballot.

(c) Should no candidate receive a plurality of at least forty percent in the final election, a run-off election shall be held one week after the final election between the two persons receiving the highest number of votes in the final election, who are qualified, and only ballots for those two persons shall be counted: PROVIDED, HOWEVER, That in case of a tie for the second highest number of votes in the final election, the run-off election shall be between those candidates receiving the highest number of votes for the office, and only ballots for those candidates shall be counted.

(d) Should no candidate receive a plurality of at least forty percent in a run-off election, the ASEWU Council shall select the winner from between those entered on the run-off election ballot, by a two-thirds majority of the Council Members at its next meeting.

AMENDATORY SECTION (Amending Resolution 78-03, filed 8/16/78)

WAC 172-114-060 ARTICLE V—(ELECTIONS)) JUDICIAL. (1) ((There shall be a regular A.S. election on the eighth Thursday of Fall, Winter, and Spring quarters; it shall be preceded by a primary election one week prior; filing shall close one week prior to the primary election and shall open one week prior to closing.

(2) The positions of legislators, President, Vice President, and vacancies therein shall be filled through regular elections with a majority of ballots cast being required for election.

(3) All those candidates who filed in the A.S. office by 5:00 o'clock P.M. on the last day of filing and are qualified shall have their names entered on the primary election ballot. The two candidates receiving the most votes for each office in the primary, who are qualified, shall have their names entered on the final election ballot: PROVIDED, HOWEVER, That in case of a tie for the second most votes in the

primary, the three candidates receiving the most votes for that office who are qualified shall have their names entered on the final election ballot.

(4) Should no candidate receive a majority in the final election, a run-off election shall be held one week after the final election between the two persons receiving the most votes in the final election, who are qualified, and only ballots for those two persons shall be counted: PROVIDED, HOWEVER, That in case of a tie for the second most votes in the final election, the run-off election shall be between the three candidates receiving the most votes for the office, and only ballots for those three persons shall be counted.

(5) Should no candidate receive a majority in a run-off election, the legislature shall select the winner from between those entered on the run-off election ballot, by a majority of the legislators at its next meeting.

(6) All votes shall be cast by secret ballot. The names of the candidates shall appear on the ballot in the order in which filed. All ballots shall be kept under lock and key for six months after each election.

(7) The polls shall be located at:

(a) Pence Union Building;

(b) Tawanka Commons; and

(c) As otherwise provided for by the legislature.

The polls shall be open from 8:00 o'clock a.m. until 7:00 o'clock p.m., and members of A.S. shall be allowed to vote upon presentation of suitable identification, providing that they shall be allowed to vote but once in each election.

(8) Any member of A.S. may present an "Application of Absent Voter" form to the Office of A.S. Vice President or his/her designee for an absentee voter ballot.

(9) Two election clerks shall be assigned to each polling place and they shall be solely responsible for supervising the ballots, ballot boxes, and voting at the polling place. They may not be, nor related to, any current student. They shall be employed through the office of the A.S. Vice President.) The judicial authority of the ASEWU shall be vested in an ASEWU Superior Court and such lesser courts as the ASEWU Council may establish.

(2) Requirements. The judges, both of the ASEWU Superior and lesser courts, shall be members of the ASEWU, have/maintain a two point cumulative grade point average, and be enrolled for and complete six credit hours in the previous quarter (excluding summer quarter).

(3) Term of Office. Members of the ASEWU Superior and lesser courts shall serve until they resign, cease to be a member of ASEWU (excluding summer quarter), or shall be impeached and convicted for cause brought by a petition signed by at least three-fourths of the ASEWU Council Members and tried by the University Disciplinary Committee.

(4) Powers. The ASEWU Superior Court shall serve as a court of equity, the highest appellate court in the student judicial system, and shall have full powers of judicial review.

(5) Meeting Quorum. No court may render an opinion, hear evidence, nor pass judgment in the absence of a quorum, which shall be a majority of the court.

(6) Membership. The ASEWU Superior Court shall consist of seven justices who shall select from its members one who shall serve as ASEWU Chief Justice, the others serving as Associate Justices.

(7) Chief Justice. It shall be the duty of the ASEWU Chief Justice to preside as chairman and chief officer at all meetings of the ASEWU Superior Court. The ASEWU Chief Justice may appoint a court clerk and other assistants who may be beneficial to the functioning of the ASEWU Superior Court, with the advice and consent of the ASEWU Council, and to request salaries for the same.

(8) Appointment. The members of the ASEWU Superior Court shall be appointed by the ASEWU President with the advice and consent of the ASEWU Council. Vacancies shall be filled in the same manner.

(9) Judicial Procedure. The procedure of the judicial shall follow those principles of the United States law insofar as deemed practical and advisable by the bodies, and all proceedings of the judicial shall be recorded. All decisions shall be accompanied by a written opinion expressing the majority opinion and may be accompanied by dissenting or concurring written opinions. A copy of all ASEWU Superior Court case records and court decisions and opinions shall be maintained in the University Library.

(10) The ASEWU Superior Court and lesser courts shall hear all cases and render opinions in as expeditious a manner as possible.

AMENDATORY SECTION (Amending Resolution 78-03, filed 8/16/78)

WAC 172-114-070 ARTICLE VI—((JUDICIAL)) RESCIND, RECALL, INITIATIVE, REFERENDUM, AND INSPECTION OF RECORDS. (1) ((The judicial authority of the A.S. shall be vested in a Superior Court and such lesser courts as the A.S. Legislature may from time to time establish. The judges, both of the Superior and lesser courts, shall be members of the A.S., have/maintain a two point cumulative grade average[,] and be enrolled for and complete six credit hours in the previous quarter (excluding Summer Quarter). Members of the Superior Court and lesser courts shall serve until they resign, cease to be a member of A.S. (excluding Summer Quarter), or shall be impeached and convicted for cause brought by a petition signed by at least three-fourths of the legislators and tried by the University Disciplinary Committee.

(2) The Superior Court shall serve as a court of equity, the highest appellate court in the student judicial system, and shall have full powers of judicial review.

(3) No court may render an opinion, hear evidence, nor pass judgment in the absence of a quorum, which shall be a majority of the court.

(4) The Superior Court shall consist of seven Justices who shall select from their members one who shall serve as Chief Justice, the others serving as Associate Justices. It shall be the duty of the Chief Justice to preside as chairman and chief officer at all meetings of the Superior Court and may appoint a court clerk and other assistants which may be beneficial to the functioning of the Superior Court, with the advice and consent of the legislature, and to request salaries for the same, not to exceed a cabinet member's salary.

(5) The Justices of the Superior Court shall be appointed by the President with the advice and consent of the legislature. Vacancies shall be filled in the same manner.

(6) The procedure of the judicial shall follow those principles of United States law insofar as deemed practical and advisable by the bodies, and all proceedings of the judicial shall be recorded. All decisions shall be accompanied by a written opinion expressing the majority opinion and may be accompanied by dissenting or concurring written opinions. A copy of all Superior Court case records and court decisions and opinions shall be maintained in the University Library.

(7) The Superior Court and lesser courts shall hear all cases and render opinions in as expeditious manner as is possible.)) Upon receiving a petition signed by at least ten percent of the members of the ASEWU, any act of any official, committee, or organization existing under the ASEWU may be rescinded or amended as described in subsection (5) of this section.

(2) Upon receiving a petition signed by at least ten percent of the members of ASEWU, any elected official of the ASEWU may be recalled as described in subsection (5) of this section.

(3) Upon receiving a petition signed by at least ten percent of the members of ASEWU, the ASEWU Council shall provide for an initiative as described in subsections (5) and (6) of this section.

(4) The ASEWU Council shall provide for a referendum vote whenever a majority of the legislators approve the presentation of such as described in subsection (5) and (6) of this section.

(5) Such rescind, recall, initiative, or referendum shall be submitted to the members of the ASEWU at the next regular election or at a special election called earlier by the ASEWU Council for that purpose: PROVIDED, HOWEVER, That if the proposed initiative is enacted by the ASEWU Council prior to the election, it shall not be placed on the ballot nor voted upon. The rescind, recall, initiative, or referendum measure shall be adopted if a majority of those voting on the measure vote in favor of it; whereupon the measure shall become effective immediately.

(6) Any initiative or referendum shall be binding upon the ASEWU, its officials, committees, and organizations until five years from the last date of passage or until rescinded. Such legislation may only be rescinded by a subsequent initiative or referendum election.

(7) All official documents shall be open for public inspection.

AMENDATORY SECTION (Amending Order 74-8, filed 11/1/74)

WAC 172-114-080 ARTICLE VII—((RESCIND, RECALL, INITIATIVE, REFERENDUM, AND INSPECTION OF RECORDS)) PARLIAMENTARY AUTHORITY. ((1) Upon receiving a petition signed by at least ten per cent (10%) of the members of A.S., any act of any official, committee, or organization existing under

the A.S. may be rescinded or amended as described in WAC 172-114-080(5).

(2) Upon receiving a petition signed by at least ten per cent (10%) of the members of A.S., any elected official of the A.S. may be recalled as described in WAC 172-114-080(5).

(3) Upon receiving a petition signed by at least ten per cent (10%) of the members of A.S., the Legislature shall provide for an initiative as described in WAC 172-114-080(5) and (6).

(4) The Legislature shall provide for a referendum vote whenever a majority of the legislators approve the presentation of such as described in sections WAC 172-114-080 (5) and (6).

(5) Such rescind, recall, initiative, or referendum shall be submitted to the members of the A.S. at the next regular election, or at a special election called earlier by the Legislature for that purpose; provided, however, that if the proposed initiative is enacted by the Legislature prior to the election, it shall not be placed on the ballot nor voted upon. The rescind, recall, initiative, or referendum measure shall be adopted if a majority of those voting on the measure vote in favor of it; whereupon the measure shall become effective immediately.

(6) Any initiative or referendum shall be binding upon the A.S., its officials, committees, and organizations until five (5) years from the last date of passage or until rescinded. Such legislation may only be rescinded by a subsequent initiative or referendum election.

(7) All official documents shall be open for public inspection.)) For procedures not covered by the ASEWU Constitution, By-Laws, and special rules, the latest edition of Robert's Rules of Order, Newly Revised, shall govern.

AMENDATORY SECTION (Amending Resolution 78-03, filed 8/16/78)

WAC 172-114-090 ARTICLE VIII—((BUDGETING)) AMENDMENTS. (1) ((The budgeting authority of the A.S. shall be vested in the legislature and may not be transferred.

(2) The budget shall include all funds, revenues, and reserves; shall be divided into programs, subprograms, and objects of expense and shall include supporting data, shall indicate as to each program, sub-program, or object of expense the actual expenditures of the preceding two fiscal years and requested appropriations for the next fiscal year; and shall include any proposed capital improvement program for the next six fiscal years.

(3) Copies of the budget shall be delivered to each member of the legislature and be available to any member of the university community upon request.

(4) Unless otherwise provided by the appropriation legislation, all unexpended and unencumbered appropriations in the current expense appropriation legislation shall lapse at the end of the fiscal year. An appropriation in the capital budget appropriation legislation shall lapse when the project has been completed or abandoned or when no expenditure or encumbrance has been made for three years.

(5) Any expenditure in excess of an appropriation shall be null and void; and any official, agent, or employee knowingly responsible shall be personally liable to anyone damaged by his action; providing the legislature may permit the A.S. to enter into contracts requiring the payment of funds from appropriations of subsequent fiscal years.

(6) Regular budgets shall be those budgets adopted during Spring Quarter for the following fiscal year. Supplemental budgets shall be all other budget requests made throughout the year.

(7) The A.S. President and A.S. Speaker shall receive quarterly salaries based upon the following formula: Quarterly cost of in-state tuition, double occupancy room and board, and \$100 for expenses. The A.S. Vice President shall receive a quarterly salary, except for Summer Quarter, based upon the following formula: Quarterly cost of in-state tuition and double occupancy room and board. Cabinet officers may be paid no more than one-half of the A.S. President's salary.)) This Constitution may be amended by a two-thirds vote of those voting on the proposed modification at any regular election, provided that ten percent of the members of ASEWU vote in that election. If adopted, it shall become effective upon approval, as prescribed under Administrative Procedure Act hearing rules, by the Board of Trustees.

(2) Proposed constitutional amendments shall be presented to the members of the ASEWU for approval upon the request of at least two-thirds of the voting members of the ASEWU Council or upon petition of at least ten percent of the ASEWU.

(3) The By-Laws, may be amended by a two-thirds vote of the voting members of the ASEWU Council provided that written notice of

such amendment has been given at the previous meeting, or by a majority of ASEWU voting on the proposed modification at any regular election and if so adopted shall become effective immediately.

(4) Proposed By-Law amendments shall be presented to the members of the ASEWU for approval upon the request of at least one-half of the voting members of the ASEWU Council or at least ten percent of the members of the ASEWU.

(5) Approved constitutional and By-Law amendments shall be incorporated into the article, section, and clause of the Constitution or By-Laws to which they refer.

REPEALER

The following sections of the Washington Administrative Code are repealed:

- (1) WAC 172-114-100 PARLIAMENTARY AUTHORITY.
- (2) WAC 172-114-110 AMENDMENTS.

WSR 80-15-072

ADOPTED RULES

DEPARTMENT OF ECOLOGY

[Order DE-80-37—Filed October 17, 1980]

I, Elmer C. Vogel, deputy director of the Department of Ecology, do promulgate and adopt at the Department of Ecology, Lacey, Washington, the annexed rules relating to the use activities, amending WAC 173-16-060.

This action is taken pursuant to Notice No. WSR 80-11-058 filed with the code reviser on August 20, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated pursuant to RCW 90.58.060 and 90.58.190 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 7, 1980.

By Elmer C. Vogel
Deputy Director

AMENDATORY SECTION (Amending Order DE 72-12, filed 6/20/72 and 7/20/72)

WAC 173-16-060 THE USE ACTIVITIES. This section contains guidelines for the local regulation of use activities proposed for shorelines. Each topic, representing a specific use or group of uses, is broadly defined and followed by several guidelines. These guidelines represent the criteria upon which judgments for proposed shoreline developments will be based until master programs are completed. In addition, these guidelines are intended to provide the basis for the development of that portion of the master program concerned with the regulation of such uses.

In addition to application of the guidelines in this section, the local government should identify the type or types of natural systems (as described in WAC 173-16-050) within which a use is proposed and should impose

regulations on those developments and uses which would tend to affect adversely the natural characteristics needed to preserve the integrity of the system. Examples would include but would not be limited to proposed uses that would threaten the character of fragile dune areas, reduce water tables in marshes, impede water flow in estuaries, or threaten the stability of spits and bars.

These guidelines have been prepared in recognition of the flexibility needed to carry out effective local planning of shorelines. Therefore, the interpretation and application of the guidelines may vary relative to different local conditions. Exceptions to specific provisions of these guidelines may occur where local circumstances justify such departure. Any departure from these guidelines must, however, be compatible with the intent of the act as enunciated in RCW 90.58.020.

It should be noted that there are several guidelines for certain activities which are not explicitly defined in the shoreline act as developments for which substantial development permits are not required (for example, the suggestion that a buffer of permanent vegetation be maintained along water bodies in agriculture areas). While such activities generally cannot be regulated through the permit system, it is intended that they be dealt with in the comprehensive master program in a manner consistent with policy and intent of the Shoreline Act. To effectively provide for the management of the shorelines of the state, master programs should plan for and foster all reasonable and appropriate uses as provided in RCW 90.58.020.

Finally, most of the guidelines are intentionally written in general terms to allow some latitude for local government to expand and elaborate on them as local conditions warrant. The guidelines are adopted state regulations, however, and must be complied with both in permit application review and in master program development.

(1) Agricultural practices. Agricultural practices are those methods used in vegetation and soil management, such as tilling of soil, control of weeds, control of plant diseases and insect pests, soil maintenance and fertilization. Many of these practices require the use of agricultural chemicals, most of which are water soluble and may wash into contiguous land or water areas causing significant alteration and damage to plant and animal habitats, especially those in the fragile shoreline areas. Also, large quantities of mineral and organic sediments enter water bodies through surface erosion when proper land management techniques are not utilized. Guidelines:

(a) Local governments should encourage the maintenance of a buffer of permanent vegetation between tilled areas and associated water bodies which will retard surface runoff and reduce siltation.

(b) Master programs should establish criteria for the location of confined animal feeding operations, retention and storage ponds for feed lot wastes, and stock piles of manure solids in shorelines of the state so that water areas will not be polluted. Control guidelines prepared by the U.S. Environmental Protection Agency should be followed. (Also see Reference Nos. 3, 4, 5, 6, 7 and 8).

(c) Local governments should encourage the use of erosion control measures, such as crop rotation, mulching, strip cropping and contour cultivation in conformance with guidelines and standards established by the Soil Conservation Service, U.S. Department of Agriculture.

(2) Aquaculture. Aquaculture (~~((popularly known as fish farming))~~) is the culture or farming of food fish, shellfish, or other aquatic plants and animals. This activity is of state-wide and national interest. Properly managed, it can result in long term over short term benefit and can protect the resources and ecology of the shoreline. Aquaculture is dependent on the use of the water area and, when consistent with control of pollution and prevention of damage to the environment, is a preferred use of the water area.

Potential locations for ~~((aquacultural enterprises))~~ aquaculture are relatively restricted due to specific requirements for water quality, temperature, flows, oxygen content, adjacent land uses, wind protection, commercial navigation, and, in marine waters, salinity. The technology associated with present-day aquaculture is still in its formative stages and experimental. ~~((Guidelines for aquaculture))~~ Local shoreline master plans should therefore recognize the necessity for some latitude in the development of this emerging economic water use as well as its potential impact on existing uses and natural systems.

(a) Guidelines:

~~((a))~~ (i) Aquacultural ~~((enterprises))~~ activities and structures should be located in areas where the navigational access of upland owners, recreational boaters and commercial traffic is not significantly restricted.

~~((b))~~ (ii) Recognition should be given to the possible detrimental impact aquacultural development might have on the visual access of upland owners and on the general aesthetic quality of the shoreline area.

~~((c))~~ (iii) As aquaculture technology expands with increasing knowledge and experience, emphasis should be placed on ~~((underwater))~~ structures which do not significantly interfere with navigation or impair the aesthetic quality of Washington shorelines.

(iv) Certain aquacultural activities are of state-wide interest and should be managed in a consistent manner state-wide. Local master program development and administration should therefore seek to support state aquaculture management programs as expressed in state laws, regulations, and established management plans. State management programs should seek to determine and accommodate local environmental concerns. To facilitate state-local coordination, the department will encourage state agencies to develop specific resource management plans and to include participation of local shoreline agencies.

(v) Shellfish resources and conditions suitable for aquaculture only occur in limited areas. The utility and productivity of these sites is threatened by activities and developments which reduce water quality such as waste discharges, nonpoint runoff and disruption of bottom sediments. Proposed developments and activities should be evaluated for impact on productive aquaculture areas.

Identified impacts should be mitigated through permit conditions and performance standards.

(vi) Aquaculture is a preferred, water-dependent use. Water surface, column, and bedland areas suitable for aquaculture are limited to certain sites. These sites are subject to pressures from competing uses and degradation of water quality. The shoreline program is intended to provide a comprehensive land and water use plan which will reduce these conflicts and provide for appropriate uses. Therefore, a special effort should be made through the shoreline management program to identify and resolve resource use conflicts and resource management issues in regard to use of identified sites.

(b) Implementation of WAC 173-16-060(2)(a)(vi):

(i) Within one month of the effective date of this regulation, the department of ecology shall notify each local jurisdiction in which major subtidal clam or geoduck beds have been identified by the department of fisheries that a program update will be required. The department of ecology shall provide maps showing the general location of each jurisdiction's major subtidal clam and geoduck beds. The department shall also provide information on subtidal clam and geoduck harvesting techniques, environmental impacts, mitigation measures, and guidance on format and issue coverage for submittal of proposed amendments.

(ii) Each local jurisdiction with identified major beds shall evaluate the application of its shoreline master program to commercial use of the identified beds. Where necessary, amendments to the master program shall be prepared to better address management and use of the beds. For example, such amendments may be necessary to address newly identified concerns, to coordinate with state-wide interests, or to bring policies into conformance with current scientific knowledge.

(iii) Within four months of notification under WAC 173-16-060(2)(b)(i), each affected jurisdiction shall submit a progress report to the department. This report shall outline the procedure which will be used to comply with WAC 173-16-060(2)(b)(ii) and an assessment of the need for coastal zone management financial assistance.

(iv) Within thirteen months of notification by the department under WAC 173-16-060(2)(b)(i), each affected local government shall submit to the department for approval all portions of the shoreline management master program affecting use of the identified sites for shellfish management. Submittals shall include relevant existing master program elements proposed to be retained as well as program additions. Explanation shall be submitted to the department for any use designations or management standards which would prohibit or prevent use of identified sites.

(v) The department, in considering local program submittals, will consider the advice of the state departments of fisheries and natural resources, other interested local, state, and federal agencies, and interest groups pertaining to the scientific basis, sufficiency, and practicality of proposed standards and use regulations.

(vi) The department may postpone notification under (i) above for those subtidal clam and geoduck beds

which the department of social and health services believes are not certifiable. Should a bed become certifiable at some future date, the department shall make the notification required in (i) above.

(vii) If a local shoreline jurisdiction does not or is unable to comply with the requirements of this subsection, the department may undertake the required master program evaluation and preparation and adoption of necessary amendments.

(3) Forest management practices. Forest management practices are those methods used for the protection, production and harvesting of timber. Trees along a body of water provide shade which insulate the waters from detrimental temperature change and dissolved oxygen release. A stable water temperature and dissolved oxygen level provide a healthy environment for fish and other more delicate forms of aquatic life. Poor logging practices on shorelines alter this balance as well as result in slash and debris accumulation and may increase the suspended sediment load and the turbidity of the water. Guidelines:

(a) Seeding, mulching, matting and replanting should be accomplished where necessary to provide stability on areas of steep slope which have been logged. Replanted vegetation should be of a similar type and concentration as existing in the general vicinity of the logged area.

(b) Special attention should be directed in logging and thinning operations to prevent the accumulation of slash and other debris in contiguous waterways.

(c) Shoreline areas having scenic qualities, such as those providing a diversity of views, unique landscape contrasts, or landscape panoramas should be maintained as scenic views in timber harvesting areas. Timber harvesting practices, including road construction and debris removal, should be closely regulated so that the quality of the view and viewpoints in shoreline areas of the state are not degraded.

(d) Proper road and bridge design, location and construction and maintenance practices should be used to prevent development of roads and structures which would adversely affect shoreline resources.

(e) Timber harvesting practices in shorelines of the state should be conducted to maintain the state board of health standards for public water supplies. (See Reference No. 34).

(f) Logging should be avoided on shorelines with slopes of such grade that large sediment runoff will be precipitated, unless adequate restoration and erosion control can be expeditiously accomplished.

(g) Local governments should ensure that timber harvesting on shorelines of state-wide significance does not exceed the limitations established in RCW 90.58.150 except as provided in cases where selective logging is rendered ecologically detrimental or is inadequate for preparation of land for other uses.

(h) Logging within shoreline areas should be conducted to ensure the maintenance of buffer strips of ground vegetation, brush, alder and conifers to prevent temperature increases adverse to fish populations and erosion of stream banks.

(4) Commercial development. Commercial developments are those uses which are involved in wholesale and

retail trade or business activities. Commercial developments range from small businesses within residences, to high-rise office buildings. Commercial developments are intensive users of space because of extensive floor areas and because of facilities, such as parking, necessary to service them. Guidelines:

(a) Although many commercial developments benefit by a shoreline location, priority should be given to those commercial developments which are particularly dependent on their location and/or use of the shorelines of the state and other development that will provide an opportunity for substantial numbers of the people to enjoy the shorelines of the state.

(b) New commercial developments on shorelines should be encouraged to locate in those areas where current commercial uses exist.

(c) An assessment should be made of the effect a commercial structure will have on a scenic view significant to a given area or enjoyed by a significant number of people.

(d) Parking facilities should be placed inland away from the immediate water's edge and recreational beaches.

(5) Marinas. Marinas are facilities which provide boat launching, storage, supplies and services for small pleasure craft. There are two basic types of marinas: the open-type construction (floating breakwater and/or open-pile work) and solid-type construction (bulkhead and/or landfill). Depending upon the type of construction, marinas affect fish and shellfish habitats. Guidelines:

(a) In locating marinas, special plans should be made to protect the fish and shellfish resources that may be harmed by construction and operation of the facility.

(b) Marinas should be designed in a manner that will reduce damage to fish and shellfish resources and be aesthetically compatible with adjacent areas.

(c) Master programs should identify locations that are near high-use or potentially high-use areas for proposed marina sites. Local as well as regional "need" data should be considered as input in location selection.

(d) Special attention should be given to the design and development of operational procedures for fuel handling and storage in order to minimize accidental spillage and provide satisfactory means for handling those spills that do occur.

(e) Shallow-water embayments with poor flushing action should not be considered for overnight and long-term moorage facilities.

(f) The Washington state department of fisheries has prepared guidelines concerning the construction of marinas. These guidelines should be consulted in planning for marinas. (See Reference No. 16).

(g) State and local health agencies have standards and guidelines for the development of marinas which shall be consulted by local agencies. (See Reference No. 18).

(6) Mining. Mining is the removal of naturally occurring materials from the earth for economic use. The removal of sand and gravel from shoreline areas of Washington usually results in erosion of land and silting of water. These operations can create silt and kill bottom-living animals. The removal of sand from marine

beaches can deplete a limited resource which may not be restored through natural processes. Guidelines:

(a) When rock, sand, gravel and minerals are removed from shoreline areas, adequate protection against sediment and silt production should be provided.

(b) Excavations for the production of sand, gravel and minerals should be done in conformance with the Washington State Surface Mining Act. (See Reference No. 20).

(c) Local governments should strictly control or prohibit the removal of sand and gravel from marine beaches.

(d) When removal of sand and gravel from marine beaches is permitted by existing legislation, it should be taken from the least sensitive biophysical areas of the beach.

(7) Outdoor advertising, signs and billboards. Signs are publicly displayed boards whose purpose is to provide information, direction, or advertising. Signs may be pleasing or distracting, depending upon their design and location. A sign, in order to be effective, must attract attention; however, a message can be clear and distinct without being offensive. There are areas where signs are not desirable, but generally it is the design that is undesirable, not the sign itself.

(a) Off-premise outdoor advertising signs should be limited to areas of high-intensity land use, such as commercial and industrial areas.

(b) Master programs should establish size, height, density, and lighting limitations for signs.

(c) Vistas and viewpoints should not be degraded and visual access to the water from such vistas should not be impaired by the placement of signs.

(d) Outdoor advertising signs (where permitted under local regulations) should be located on the upland side of public transportation routes which parallel and are adjacent to rivers and water bodies (unless it can be demonstrated that views will not be substantially obstructed).

(e) When feasible, signs should be constructed against existing buildings to minimize visual obstructions of the shoreline and water bodies.

(8) Residential development. The following guidelines should be recognized in the development of any subdivision on the shorelines of the state. To the extent possible, planned unit developments (sometimes called cluster developments) should be encouraged within the shoreline area. Within planned unit developments, substantial portions of land are reserved as open space or recreational areas for the joint use of the occupants of the development. This land may be provided by allowing houses to be placed on lots smaller than the legal minimum size for normal subdivisions, as long as the total number of dwellings in the planned unit development does not exceed the total allowable in a regular subdivision. Guidelines:

(a) Subdivisions should be designed at a level of density of site coverage and of occupancy compatible with the physical capabilities of the shoreline and water.

(b) Subdivisions should be designed so as to adequately protect the water and shoreline aesthetic characteristics.

(c) Subdividers should be encouraged to provide public pedestrian access to the shorelines within the subdivision.

(d) Residential development over water should not be permitted.

(e) Floating homes are to be located at moorage slips approved in accordance with the guidelines dealing with marinas, piers, and docks. In planning for floating homes, local governments should ensure that waste disposal practices meet local and state health regulations, that the homes are not located over highly productive fish food areas, and that the homes are located to be compatible with the intent of the designated environments.

(f) Residential developers should be required to indicate how they plan to preserve shore vegetation and control erosion during construction.

(g) Sewage disposal facilities, as well as water supply facilities, must be provided in accordance with appropriate state and local health regulations. Storm drainage facilities should be separate, not combined with sewage disposal systems.

(h) Adequate water supplies should be available so that the ground water quality will not be endangered by overpumping.

(9) Utilities. Utilities are services which produce and carry electric power, gas, sewage, communications and oil. At this time the most feasible methods of transmission are the lineal ones of pipes and wires. The installation of this apparatus necessarily disturbs the landscape but can usually be planned to have minimal visual and physical effect on the environment. Guidelines:

(a) Upon completion of installation/maintenance projects on shorelines, banks should be restored to pre-project configuration, replanted with native species and provided maintenance care until the newly planted vegetation is established.

(b) Whenever these facilities must be placed in a shoreline area, the location should be chosen so as not to obstruct or destroy scenic views. Whenever feasible, these facilities should be placed underground, or designed to do minimal damage to the aesthetic qualities of the shoreline area.

(c) To the extent feasible, local government should attempt to incorporate major transmission line right of ways on shorelines into their program for public access to and along water bodies.

(d) Utilities should be located to meet the needs of future populations in areas planned to accommodate this growth.

The Washington State Thermal Power Plant Siting Law (chapter 80.50 RCW) regulates the location of electrical generating and distribution facilities. Under this law, the state preempts the certification and regulation of thermal power plant sites and thermal power plants. (See Reference No. 28).

(10) Ports and water-related industries. Ports are centers for water-borne traffic and as such have become gravitational points for industrial/manufacturing firms. Heavy industry may not specifically require a waterfront location, but is attracted to port areas because of the variety of transportation available. Guidelines:

(a) Water-dependent industries which require frontage on navigable water should be given priority over other industrial uses.

(b) Port facilities should be designed to permit viewing of harbor areas from view points, waterfront restaurants and similar public facilities which would not interfere with port operations or endanger public health and safety.

(c) Sewage treatment, water reclamation, desalinization and power plants should be located where they do not interfere with and are compatible with recreational, residential or other public uses of the water and shorelands. Waste treatment ponds for water-related industry should occupy as little shoreline as possible.

(d) The cooperative use of docking, parking, cargo handling and storage facilities should be strongly encouraged in waterfront industrial areas.

(e) Land transportation and utility corridors serving ports and water-related industry should follow the guidelines provided under the sections dealing with utilities and road and railroad design and construction. Where feasible, transportation and utility corridors should be located upland to reduce pressures for the use of waterfront sites.

(f) Master program planning should be based on a recognition of the regional nature of port services. Prior to allocating shorelands for port uses, local governments should consider state-wide needs and coordinate planning with other jurisdictions to avoid wasteful duplication of port services within port-service regions.

(g) Since industrial docks and piers are often longer and greater in bulk than recreational or residential piers, careful planning must be undertaken to reduce the adverse impact of such facilities on other water-dependent uses and shoreline resources. Because heavy industrial activities are associated with industrial piers and docks, the location of these facilities must be considered a major factor determining the environmental compatibility of such facilities.

(11) Bulkheads. Bulkheads or seawalls are structures erected parallel to and near the high-water mark for the purpose of protecting adjacent uplands from the action of waves or currents. Bulkheads are constructed of steel, timber or concrete piling, and may be either of solid or open-piling construction. For ocean-exposed locations, bulkheads do not provide a long-lived permanent solution, because eventually a more substantial wall is required as the beach continues to recede and larger waves reach the structure.

While bulkheads and seawalls may protect the uplands, they do not protect the adjacent beaches, and in many cases are actually detrimental to the beaches by speeding up the erosion of the sand in front of the structures.

The following guidelines apply to the construction of bulkheads and seawalls designed to protect the immediate upland area. Proposals for landfill must comply with the guidelines for that specific activity. Guidelines:

(a) Bulkheads and seawalls should be located and constructed in such a manner which will not result in adverse effects on nearby beaches and will minimize alterations of the natural shoreline.

(b) Bulkheads and seawalls should be constructed in such a way as to minimize damage to fish and shellfish habitats. Open-piling construction is preferable in lieu of the solid type.

(c) Consider the effect of a proposed bulkhead on public access to publicly owned shorelines.

(d) Bulkheads and seawalls should be designed to blend in with the surroundings and not to detract from the aesthetic qualities of the shoreline.

(e) The construction of bulkheads should be permitted only where they provide protection to upland areas or facilities, not for the indirect purpose of creating land by filling behind the bulkhead. Landfill operations should satisfy the guidelines under WAC 173-16-060(14).

(12) Breakwaters. Breakwaters are another protective structure usually built offshore to protect beaches, bluffs, dunes or harbor areas from wave action. However, because offshore breakwaters are costly to build, they are seldom constructed to protect the natural features alone, but are generally constructed for navigational purposes also. Breakwaters can be either rigid in construction or floating. The rigid breakwaters, which are usually constructed of riprap or rock, have both beneficial and detrimental effects on the shore. All breakwaters eliminate wave action and thus protect the shore immediately behind them. They also obstruct the free flow of sand along the coast and starve the downstream beaches. Floating breakwaters do not have the negative effect on sand movement, but cannot withstand extensive wave action and thus are impractical with present construction methods in many areas. Guidelines:

(a) Floating breakwaters are preferred to solid landfill types in order to maintain sand movement and fish habitat.

(b) Solid breakwaters should be constructed only where design modifications can eliminate potentially detrimental effects on the movement of sand and circulation of water.

(c) The restriction of the public use of the water surface as a result of breakwater construction must be recognized in the master program and must be considered in granting shoreline permits for their construction.

(13) Jetties and groins. Jetties and groins are structures designed to modify or control sand movement. A jetty is generally employed at inlets for the purpose of navigation improvements. When sand being transported along the coast by waves and currents arrives at an inlet, it flows inward on the flood tide to form an inner bar, and outward on ebb tide to form an outer bar. Both formations are harmful to navigation through the inlet.

A jetty is usually constructed of steel, concrete or rock. The type depends on foundation conditions and wave, climate and economic considerations. To be of maximum aid in maintaining the navigation channel, the jetty must be high enough to completely obstruct the sand stream. The adverse effect of a jetty is that sand is impounded at the updrift jetty and the supply of sand to the shore downdrift from the inlet is reduced, thus causing erosion.

Groins are barrier-type structures extending from the backshore seaward across the beach. The basic purpose

of a groin is to interrupt the sand movement along a shore.

Groins can be constructed in many ways using timber, steel, concrete or rock, but can be classified into basic physical categories as high or low, long or short, and permeable or impermeable.

Trapping of sand by a groin is done at the expense of the adjacent downdrift shore, unless the groin system is filled with sand to its entrapment capacity. Guidelines:

(a) Master programs must consider sand movement and the effect of proposed jetties or groins on that sand movement. Provisions can be made to compensate for the adverse effects of the structures either by artificially transporting sand to the downdrift side of an inlet with jetties, or by artificially feeding the beaches in case of groins.

(b) Special attention should be given to the effect these structures will have on wildlife propagation and movement, and to the design of these structures which will not detract from the aesthetic quality of the shoreline.

(14) Landfill is the creation of dry upland area by the filling or depositing of sand, soil or gravel into a wetland area. Landfills also occur to replace shoreland areas removed by wave action or the normal erosive processes of nature. However, most landfills destroy the natural character of land, create unnatural heavy erosion and silting problems and diminish the existing water surface. Guidelines:

(a) Shoreline fills or cuts should be designed and located so that significant damage to existing ecological values or natural resources, or alteration of local currents will not occur, creating a hazard to adjacent life, property, and natural resources systems.

(b) All perimeters of fills should be provided with vegetation, retaining walls, or other mechanisms for erosion prevention.

(c) Fill materials should be of such quality that it will not cause problems of water quality. Shoreline areas are not to be considered for sanitary landfills or the disposal of solid waste.

(d) Priority should be given to landfills for water-dependent uses and for public uses. In evaluating fill projects and in designating areas appropriate for fill, such factors as total water surface reduction, navigation restriction, impediment to water flow and circulation, reduction of water quality and destruction of habitat should be considered.

(15) Solid waste disposal. Generally, all solid waste is a possible source of much nuisance. Rapid, safe and nuisance-free storage, collection, transportation and disposal are of vital concern to all persons and communities. If the disposal of solid waste material is not carefully planned and regulated, it can become not only a nuisance but a severe threat to the health and safety of human beings, livestock, wildlife and other biota. Guidelines:

(a) Local master programs and use regulations must be consistent with approved county or multicounty comprehensive solid waste management plans and regulations of jurisdictional health agencies.

(b) Local governments must regulate sanitary landfills and solid waste handling in accordance with regulations for solid waste handling when adopted by the department of ecology. New regulations restricting sanitary landfills within any water course and within flood plains of any water course have been proposed for adoption by the department.

(16) Dredging. Dredging is the removal of earth from the bottom of a stream, river, lake, bay or other water body for the purposes of deepening a navigational channel or to obtain use of the bottom materials for landfill. A significant portion of all dredged materials are deposited either in the water or immediately adjacent to it, often resulting in problems of water quality. Guidelines:

(a) Local governments should control dredging to minimize damage to existing ecological values and natural resources of both the area to be dredged and the area for deposit of dredged materials.

(b) Local master programs must include long-range plans for the deposit and use of spoils on land. Spoil deposit sites in water areas should also be identified by local government in cooperation with the state departments of natural resources, game and fisheries. Depositing of dredge material in water areas should be allowed only for habitat improvement, to correct problems of material distribution affecting adversely fish and shellfish resources, or where the alternatives of depositing material on land is more detrimental to shoreline resources than depositing it in water areas.

(c) Dredging of bottom materials for the single purpose of obtaining fill material should be discouraged.

(17) Shoreline protection. Flood protection and streamway modifications are those activities occurring within the streamway and wetland areas which are designed to reduce overbank flow of high waters and stabilize eroding streambanks. Reduction of flood damage, bank stabilization to reduce sedimentation, and protection of property from erosion are normally achieved through watershed and flood plain management and by structural works. Such measures are often complementary to one another and several measures together may be necessary to achieve the desired end. Guidelines:

(a) Riprapping and other bank stabilization measures should be located, designed and constructed so as to avoid the need for channelization and to protect the natural character of the streamway.

(b) Where flood protection measures such as dikes are planned, they should be placed landward of the streamway, including associated swamps and marshes and other wetlands directly interrelated and interdependent with the stream proper.

(c) Flood protection measures which result in channelization should be avoided.

(18) Road and railroad design and construction. A road is a linear passageway, usually for motor vehicles, and a railroad is a surface linear passageway with tracks for train traffic. Their construction can limit access to shorelines, impair the visual qualities of water-oriented vistas, expose soils to erosion and retard the runoff of flood waters. Guidelines:

(a) Whenever feasible, major highways, freeways and railways should be located away from shorelands, except

in port and heavy industrial areas, so that shoreland roads may be reserved for slow-moving recreational traffic.

(b) Roads located in wetland areas should be designed and maintained to prevent erosion and to permit a natural movement of ground water.

(c) All debris, overburden, and other waste materials from construction should be disposed of in such a way as to prevent their entry by erosion from drainage, high water, or other means into any water body.

(d) Road locations should be planned to fit the topography so that minimum alterations of natural conditions will be necessary.

(e) Scenic corridors with public roadways should have provision for safe pedestrian and other nonmotorized travel. Also, provision should be made for sufficient view points, rest areas and picnic areas in public shorelines.

(f) Extensive loops or spurs of old highways with high aesthetic quality should be kept in service as pleasure bypass routes, especially where main highways, paralleling the old highway, must carry large traffic volumes at high speeds.

(g) Since land-use and transportation facilities are so highly interrelated, the plans for each should be coordinated. The designation of potential high-use areas in master programs should be done after the environmental impact of the transportation facilities needed to serve those areas have been assessed.

(19) Piers. A pier or dock is a structure built over or floating upon the water, used as a landing place for marine transport or for recreational purposes. While floating docks generally create less of a visual impact than those on piling, they constitute an impediment to boat traffic and shoreline trolling. Floating docks can also alter beach sand patterns in areas where tides and littoral drift are significant. On lakes, a proliferation of piers along the shore can have the effect of substantially reducing the usable water surface. Guidelines:

(a) The use of floating docks should be encouraged in those areas where scenic values are high and where conflicts with recreational boaters and fishermen will not be created.

(b) Open-pile piers should be encouraged where shore trolling is important, where there is significant littoral drift and where scenic values will not be impaired.

(c) Priority should be given to the use of community piers and docks in all new major waterfront subdivisions. In general, encouragement should be given to the cooperative use of piers and docks.

(d) Master programs should address the problem of the proliferation of single-purpose private piers and should establish criteria for their location, spacing, and length. The master programs should also delimit geographical areas where pile piers will have priority over floating docks.

(e) In providing for boat docking facilities in the master program, local governments should consider the capacity of the shoreline sites to absorb the impact of waste discharges from boats including gas and oil spillage.

(20) Archeological areas and historic sites. Archeological areas, ancient villages, military forts, old settlers

homes, ghost towns, and trails were often located on shorelines because of the proximity of food resources and because water provided an important means of transportation. These sites are nonrenewable resources and many are in danger of being lost through present day changes in land use and urbanization. Because of their rarity and the educational link they provide to our past, these locations should be preserved. Guidelines:

(a) In preparing shoreline master programs, local governments should consult with professional archeologists to identify areas containing potentially valuable archeological data, and to establish procedures for salvaging the data.

(b) Where possible, sites should be permanently preserved for scientific study and public observation. In areas known to contain archeological data, local governments should attach a special condition to a shoreline permit providing for a site inspection and evaluation by an archeologist to ensure that possible archeological data are properly salvaged. Such a condition might also require approval by local government before work can resume on the project following such an examination.

(c) Shoreline permits, in general, should contain special provisions which require developers to notify local governments if any possible archeological data are uncovered during excavations.

(d) The National Historic Preservation Act of 1966 and chapter 43.51 RCW provide for the protection, rehabilitation, restoration and reconstruction of districts, sites, buildings, structures and objects significant in American and Washington history, architecture, archeology or culture. The state legislation names the director of the Washington state parks and recreation commission as the person responsible for this program.

(21) Recreation. Recreation is the refreshment of body and mind through forms of play, amusement or relaxation. Water-related recreation accounts for a very high proportion of all recreational activity in the Pacific Northwest. The recreational experience may be either an active one involving boating, swimming, fishing or hunting or the experience may be passive such as enjoying the natural beauty of a vista of a lake, river or saltwater area. Guidelines:

(a) Priority will be given to developments, other than single-family residences which are exempt from the permit requirements of the act, which provide recreational uses and other improvements facilitating public access to shorelines.

(b) Access to recreational locations such as fishing streams and hunting areas should be a combination of areas and linear access (parking areas and easements, for example) to prevent concentrations of use pressure at a few points.

(c) Master programs should encourage the linkage of shoreline parks and public access points through the use of linear access. Many types of connections can be used such as hiking paths, bicycle trails and/or scenic drives.

(d) Attention should be directed toward the effect the development of a recreational site will have on the environmental quality and natural resources of an area.

(e) Master programs should develop standards for the preservation and enhancement of scenic views and vistas.

(f) To avoid wasteful use of the limited supply of recreational shoreland, parking areas should be located inland away from the immediate edge of the water and recreational beaches. Access should be provided by walkways or other methods. Automobile traffic on beaches, dunes and fragile shoreland resources should be discouraged.

(g) Recreational developments should be of such variety as to satisfy the diversity of demands from groups in nearby population centers.

(h) The supply of recreation facilities should be directly proportional to the proximity of population and compatible with the environment designations.

(i) Facilities for intensive recreational activities should be provided where sewage disposal and vector control can be accomplished to meet public health standards without adversely altering the natural features attractive for recreational uses. (See Reference No. 35).

(j) In locating proposed recreational facilities such as playing fields and golf courses and other open areas which use large quantities of fertilizers and pesticides in their turf maintenance programs, provisions must be made to prevent these chemicals from entering water. If this type of facility is approved on a shoreline location, provision should be made for protection of water areas from drainage and surface runoff.

(k) State and local health agencies have broad regulations which apply to recreation facilities, recreation watercraft and ocean beaches which should be consulted by local governments in preparing use regulations and issuing permits. (See Reference Nos. 30, 31, 35, 36, 37).

WSR 80-15-073
EMERGENCY RULES
DEPARTMENT OF FISHERIES
 [Order 80-161—Filed October 17, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is Areas 12, 12B, 12C and 12D are closed to protect Hood Canal coho stocks. Area 7B is closed to ensure the accuracy of run size updates from scheduled chum evaluation fisheries and simultaneously preclude excess harvest of Nooksack-Samish chum salmon. Harvestable numbers of coho salmon remain in the Hoko River. The need to protect chinook salmon milling near Dewatto Bay and Hoodspout Hatchery remains.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 17, 1980.

By Gordon Sandison
 Director

NEW SECTION

WAC 220-28-007B0P **CLOSED AREA.** Effective 9:01 a.m. October 20 through 4:59 p.m. October 27, 1980, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in Puget Sound Salmon Management and Catch Reporting Area 7B.

NEW SECTION

WAC 220-28-012000 **CLOSED AREA.** Effective October 19 through 4:59 a.m. October 27, 1980, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in Puget Sound Salmon Management and Catch Reporting Area 12.

NEW SECTION

WAC 220-28-012B0J **CLOSED AREA.** Effective October 19 through 4:59 a.m. October 27, 1980, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in Puget Sound Salmon Management and Catch Reporting Area 12B.

NEW SECTION

WAC 220-28-012C0V **CLOSED AREA.** Effective October 19 through 4:59 a.m. October 27, 1980, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in Puget Sound Salmon Management and Catch Reporting Area 12C.

NEW SECTION

WAC 220-28-012D0P **CLOSED AREA.** Effective October 19 through 4:59 a.m. October 27, 1980, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in Puget Sound Salmon Management and Catch Reporting Area 12D.

REPEALER

The following sections of the Washington Administrative Code are repealed effective October 19, 1980:

WAC 220-28-01200P CLOSED AREA. (80-146)
 WAC 220-28-012B0I CLOSED AREA. (80-146)
 WAC 220-28-012C0U CLOSED AREA. (80-146)
 WAC 220-28-012D0N CLOSED AREA. (80-146)

effective immediately:

WAC 220-28-00510D CLOSED AREA. (80-155)
 WAC 220-28-00800C CLOSED AREA. (80-142)

WSR 80-15-074
EMERGENCY RULES
DEPARTMENT OF FISHERIES
 [Order 80-162—Filed October 17, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is analysis of test fishing catches indicate coho management needs prevail in Area 12. Closures in portions of Areas 10 and 11 ensure the accuracy of run size evaluation using commercial fishery data. There is a harvestable surplus of chum salmon in Areas 7 and 7A. Run size evaluation in Area 8 will be by gill net harvest only. Other gear types are excluded because the need to protect coho exists.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 17, 1980.

By Gordon Sandison
 Director

NEW SECTION

WAC 220-47-30700C CLOSED AREA—PUGET SOUND SALMON. Notwithstanding the provisions of WAC 220-47-307, effective October 19 through October 28, 1980, it shall be unlawful to take, fish for or possess salmon for commercial purposes with any type of

gear from the following additional portions of Puget Sound Salmon Management and Catch Reporting Areas:

Area 10 – that portion easterly of a line projected from West Point to Alki Point.

Area 11 – that portion southerly and easterly of a line projected from Dash Point to the northernmost point on Point Defiance.

NEW SECTION

WAC 220-47-31200F PURSE SEINE—WEEKLY PERIODS. Notwithstanding the provisions of WAC 220-47-312, effective October 19 through October 25, 1980, it shall be unlawful to take, fish for or possess salmon with purse seine gear except during the weekly open periods hereinafter designated in the following Puget Sound Salmon Management and Catch Reporting Areas:

Areas 7 and 7A – Week beginning October 19: Monday, Tuesday and Wednesday.

Area 8 – closed.

Area 8A – Week beginning October 19: Monday.

Areas 10 and 11 – Week beginning October 19: Monday.

Area 12 – Closed.

NEW SECTION

WAC 220-47-40200D REEF NET—WEEKLY PERIODS. Notwithstanding the provisions of WAC 220-47-402, effective October 19 through October 25, 1980, it shall be unlawful to take, fish for or possess salmon with reef net gear except during the weekly open periods hereinafter designated in the following Puget Sound Salmon Management and Catch Reporting Areas:

Areas 7 and 7A – Week beginning October 19: Sunday, Monday and Tuesday.

NEW SECTION

WAC 220-47-41200I GILL NET—WEEKLY PERIODS. Notwithstanding the provisions of WAC 220-47-412, effective October 19 through October 25, 1980, it shall be unlawful to take, fish for or possess salmon with gill net gear except during the weekly open periods hereinafter designated in the following Puget Sound Salmon Management and Catch Reporting Areas:

Areas 7 and 7A – Week beginning October 19: Sunday, Monday and Tuesday nights.

Area 7B – Week beginning October 19: Sunday night.

Areas 8 and 8A – Week beginning October 19: Sunday night.

Areas 10 and 11 – Week beginning October 19: Sunday night.

Area 12 – closed.

REPEALER

The following sections of the Washington Administrative Code are repealed effective October 19, 1980:

- WAC 220-47-31200E PURSE SEINE—WEEKLY PERIODS. (80-151)
- WAC 220-47-40200C REEF NET—WEEKLY PERIODS. (80-151)
- WAC 220-47-41200H GILL NET—WEEKLY PERIODS. (80-151)
- WAC 220-47-41400C GILL NET—MESH SIZES. (80-151)

WSR 80-15-075
EMERGENCY RULES
DEPARTMENT OF FISHERIES
 [Order 80-163—Filed October 17, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is coho management needs now prevail in these streams.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 17, 1980.
 By Gordon Sandison
 Director

REPEALER

The following sections of the Washington Administrative Code are repealed:

- WAC 220-57-20500B DOSEWALLIPS RIVER. (80-152)
- WAC 220-57-21000B DUCKABUSH RIVER. (80-152)
- WAC 220-57-21500B DUNGENESS RIVER. (80-152)
- WAC 220-57-24000D ELWHA RIVER. (80-152)

- WAC 220-57-26500B HAMMA HAMMA RIVER. (80-152)
- WAC 220-57-38000B QUILCENE (BIG QUILCENE) RIVER. (80-152)
- WAC 220-57-41000A SAMMAMISH RIVER. (80-152)
- WAC 220-57-49500C WASHOUGAL RIVER. (80-152)

WSR 80-15-076
EMERGENCY RULES
DEPARTMENT OF FISHERIES
 [Order 80-164—Filed October 17, 1980]

I, Gordon Sandison, director the the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is this order is adopted pursuant to the Columbia River Compact.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.40.010 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 17, 1980.
 By Gordon Sandison
 Director

NEW SECTION

WAC 220-32-03000A CLOSED SEASON—COLUMBIA RIVER. Effective immediately until further notice, it shall be unlawful to take, fish for or possess salmon for commercial purposes in Columbia River Salmon Management and Catch Reporting Areas 1A, 1B, 1C, 1D, and 1E.

REPEALER

The following section of the Washington Administrative Code is repealed:

- WAC 220-32-03000Z GILL NET SEASONS. (80-139)

WSR 80-15-077
ADOPTED RULES
INSURANCE COMMISSIONER
STATE FIRE MARSHALL
 [Order FM 80-1—Filed October 20, 1980]

I, Thomas R. Brace, director of the State Fire Marshal Division, Office of Insurance Commissioner/State Fire Marshal, do promulgate and adopt at the Insurance Building, Room 325, Olympia, Washington, the annexed rules relating to maternity homes, standards for fire protection, chapter 212-44 WAC.

This action is taken pursuant to Notice No. WSR 80-10-048 filed with the code reviser on August 6, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated pursuant to RCW 18.46.110 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 20, 1980.

By Thomas R. Brace
 Director, State Fire Marshal Division

AMENDATORY SECTION (Amending Order FM-77-3, filed 12/8/77)

WAC 212-44-001 PURPOSE. The purpose of this regulation is to adopt recognized standards for the protection of life against the cause and spread of fire and fire hazards pursuant to RCW 18.46.110, with respect to all facilities to be licensed (~~as maternity homes~~) by the department of social and health services and maintained and operated to provide birth services.

AMENDATORY SECTION (Amending Order FM-77-3, filed 12/8/77)

WAC 212-44-005 DEFINITIONS. The following definitions shall apply to this regulation:

(1) "Maternity home"((;)) means any home, place, hospital or institution in which facilities are maintained for the care of four or more women, not related by blood or marriage to the operator, during pregnancy or during or within ten days after delivery: PROVIDED, HOWEVER, That this regulation shall not apply to any hospital approved by the American College of Surgeons, American Osteopathic Association or its successor.

(2) "Licensing agency"((;)) means the Washington state department of social and health services.

(3) "Building official"((;)) means the person or agency appointed by the governing body of each city, town or county for the administration and enforcement of the Uniform Building Code, adopted by reference by the State Building Code Act.

(4) "Fire official"((;)) means the person or agency appointed by the governing body of each city, town or

county for the administration and enforcement of the Uniform Fire Code, adopted by reference by the State Building Code Act.

(5) "Fire chief"((;)) means the chief of the fire department providing fire protection services to the ((maternity home)) child birth centers.

(6) "State Building Code Act"((;)) means chapter 19.27 RCW, effective January 1, 1975, which establishes state-wide building and fire prevention codes and mandates enforcement by each city, town and county.

(7) "Ambulatory" means physically and mentally capable of walking a normal path to safety, including the ascent and descent of stairs.

(8) "Birth center" or "child birth center" means a type of maternity home which is a house, building, or equivalent, organized to provide facilities and staff to support a birth service: PROVIDED, That the birth service includes or is limited to low-risk maternal clients during the intrapartum period.

(9) "Birthing room" means a room designed, equipped and arranged to provide for the care of a woman and newborn and to accommodate her support person(s) during the process of vaginal birth (the three stages of labor and recovery of a woman and newborn).

(10) "Birth service" means the prenatal, intrapartum, and postpartum care provided for individuals with uncomplicated pregnancy, labor, and vaginal birth, to include the newborn care during the recovery period.

AMENDATORY SECTION (Amending Order FM-77-3, filed 12/8/77)

WAC 212-44-010 APPLICABILITY. This regulation applies to all facilities licensed or subject to licensure as ((maternity homes)) child birth centers by the department of social and health services.

AMENDATORY SECTION (Amending Order FM-77-3, filed 12/8/77)

WAC 212-44-015 COMPLIANCE. All facilities licensed as ((maternity homes)) child birth centers shall comply with the provisions of this regulation.

AMENDATORY SECTION (Amending Order FM-77-3, filed 12/8/77)

WAC 212-44-035 LOCAL ((REQUIREMENTS)) CODES. ((All maternity homes shall comply with the applicable portions of the Uniform Building Code and the Uniform Fire Code, as administered by the local building official and fire official.)) Approvals are issued or denied on the basis of the applicant's compliance with the state fire marshal's minimum fire and life safety standards. The enforcement of local fire and building codes is the responsibility of the respective fire and building officials.

AMENDATORY SECTION (Amending Order FM-77-3, filed 12/8/77)

WAC 212-44-040 STANDARDS. The following standards shall be applicable to all ((maternity homes)) child birth centers built or licensed after the effective

date of this regulation. (~~Maternity homes licensed prior to the effective date of this regulation shall be subject to the construction requirements in effect at the time of licensing, provided continued use does not compromise resident safety, and the use and maintenance standards of this regulation.~~)

AMENDATORY SECTION (Amending Order FM-77-3, filed 12/8/77)

WAC 212-44-045 CONSTRUCTION REQUIREMENTS. (~~Maternity homes, or portions thereof providing medical, obstetrical or nursing care shall comply with the minimum standards specified for hospitals. Maternity homes, or portions thereof, limited to residential care for women, may comply with the minimum standards specified for boarding homes. (See chapter 212-28 WAC, Hospitals, Standards for Fire Protection, and/or chapter 212-36 WAC, Boarding homes, Standards for Fire Protection.)~~) (1) New construction or major remodeling shall comply with the Group B, Division 2 requirements of the 1976 Uniform Building Code. This classification is advisory, but not binding on local building officials charged with the administration and enforcement of the State Building Code Act.

(2) New and existing buildings not over two stories in height, to be occupied as a child birth center, may be of any recognized construction type: PROVIDED, That the building has been maintained to the extent that the fire and life safety features have not been reduced.

(3) Buildings three stories in height shall be of at least one hour fire-resistive construction.

AMENDATORY SECTION (Amending Order FM-77-3, filed 12/8/77)

WAC 212-44-050 MODERNIZATION OR RENOVATION. No construction in either modernization or renovation projects shall diminish the fire safety features of the facility below the level of new construction, as required elsewhere in this regulation. Alterations or installations of new building services equipment shall be accomplished as near as possible in conformance with the requirements for new construction.

AMENDATORY SECTION (Amending Order FM-77-3, filed 12/8/77)

WAC 212-44-055 ADDITIONS. Any addition shall be separated from any existing nonconforming structure (~~by a noncombustible or limited-combustible fire partition. Communications in dividing fire partitions shall occur only in corridors and shall be protected by approved self-closing doors~~) as required in Table 5B of the Uniform Building Code.

AMENDATORY SECTION (Amending Order FM-77-3, filed 12/8/77)

WAC 212-44-065 DESIGN, OPERATION. All (~~maternity homes~~) child birth centers shall be so designed, constructed, maintained and operated as to minimize the possibility of a fire emergency endangering the

residents or patients. The protection of residents or patients from fire shall be provided by appropriate arrangement of facilities, adequate staffing and careful development of operating and maintenance procedures composed of the following: (1) Proper design, construction and separation; (2) provision for detection, alarm and evacuation; and (3) fire prevention and the planning, training and drilling in programs for the notification of fire and the safe evacuation of residents or patients from the building or affected fire area.

NEW SECTION

WAC 212-44-067 EXITING. (1) Not less than two exits shall be accessible from every part of each floor being used for birth services or uses incidental thereto, including floor levels below the street floor.

(2) Exits shall be remote from each other and shall be arranged to minimize the possibility that both may be blocked by any emergency.

NEW SECTION

WAC 212-44-069 VERTICAL OPENINGS. Every stairway, elevator shaft, light and ventilation shaft, chute, and other opening between stories shall be enclosed or protected to prevent the spread of fire or smoke from one floor to another.

NEW SECTION

WAC 212-44-072 FIRE EXTINGUISHERS. At least one approved fire extinguisher suitable for use on fires in ordinary combustibles shall be provided on each floor level. Additional fire extinguishers may also be required due to area, travel distance or special hazards.

NEW SECTION

WAC 212-44-073 LIGHTING. (1) Illumination of the means of egress shall be continuous during the time that conditions of occupancy require that the means of egress be available for use.

(2) Automatic emergency lighting shall be provided and so arranged as to provide the required illumination automatically in the event of any interruption of normal lighting, such as the failure of public utility or other outside electrical power supply, opening of a circuit breaker or fuse, or any manual act(s) including accidental opening of a switch controlling normal lighting facilities.

(3) Electric battery-operated emergency lights shall use only reliable types of storage batteries, provided with suitable facilities for maintenance in properly charged condition. Electric storage batteries used in such lights or units shall be approved for their intended use and shall comply with the National Electrical Code, NFPA 70.

NEW SECTION

WAC 212-44-077 PROTECTION FROM HAZARDS. Any area used for general storage, and boiler or furnace rooms shall be separated from other parts of the building by construction having a fire-resistance rating

conforming to the general construction requirements of the building type.

Central heating plants and other fuel-burning appliances shall be properly maintained and cleaned at frequent intervals. The surrounding area shall be kept free of rubbish and combustible storage.

AMENDATORY SECTION (Amending Order FM-77-3, filed 12/8/77)

WAC 212-44-080 FIRE ALARM. Every ((maternity home)) child birth center shall have an electrically supervised manual fire alarm system. Operation of any fire alarm activating device shall automatically, without delay, accomplish general alarm indication and sound an audible alarm throughout the building or affected portion thereof. ((The fire alarm system shall be so arranged to transmit an alarm automatically to the fire department legally committed to serve the area in which the maternity home is located, by the most direct and reliable method, approved by the fire chief.))

AMENDATORY SECTION (Amending Order FM-77-3, filed 12/8/77)

WAC 212-44-090 FIRE AND EVACUATION PLAN. The administration of every ((maternity home)) child birth center shall have in effect and available to all supervisory personnel written copies of a plan for the protection of all persons in the event of fire and for their evacuation to areas of refuge and from the building when necessary. All employees shall be instructed and kept informed respecting their duties under the plan.

AMENDATORY SECTION (Amending Order FM-77-3, filed 12/8/77)

WAC 212-44-105 ((SEPARABILITY)) SEVERABILITY. If any provision of this regulation or its application to any person is held invalid, the remainder of the regulation or the application of the provision to other persons or circumstances is not affected.

REPEALER

The following sections of the Washington Administrative Code are hereby repealed:

- (1) WAC 212-44-060 MIXED OCCUPANCIES.
- (2) WAC 212-44-070 COMPARTMENTATION.
- (3) WAC 212-44-075 SMOKE DETECTION.
- (4) WAC 212-44-085 SPRINKLER PROTECTION.
- (5) WAC 212-44-095 FIRE DRILLS.

WSR 80-15-078

**NOTICE OF PUBLIC MEETINGS
CLARK COLLEGE**

[Memorandum—October 13, 1980]

The Clark College Board of Trustees will hold a special meeting on Monday, October 20, 1980, beginning at 4:30 p.m. in the Board Room on the Clark College campus. An agenda of that meeting is attached.

Board members are planning to attend the October 20 meeting instead of the regular monthly meeting scheduled for the third Tuesday of each month.

**WSR 80-15-079
PROPOSED RULES
BOARD OF HEALTH
[Filed October 20, 1980]**

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Washington State Board of Health intends to adopt, amend, or repeal rules concerning ophthalmia neonatorum (infectious conjunctivitis of the newborn), amending WAC 248-100-295;

that such agency will at 9:00 a.m., Wednesday, November 26, 1980, in the South Auditorium, Federal Building, 915 Second Avenue, Seattle, WA, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 9:00 a.m., Wednesday, November 26, 1980, in the South Auditorium, Federal Building, 915 Second Avenue, Seattle, WA.

The authority under which these rules are proposed is RCW 43.20.050.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to November 26, 1980, and/or orally at 9:00 a.m., Wednesday, November 26, 1980, South Auditorium, Federal Building, 915 Second Avenue, Seattle, WA.

Dated: October 20, 1980

By: John A. Beare, MD
Secretary

STATEMENT OF PURPOSE

This statement is filed pursuant to RCW 34.04.045.

Amend WAC 248-100-295 Ophthalmia neonatorum (infectious conjunctivitis of the newborn).

The purpose of the rule change is to medically update the regulation and reduce its existing vagueness.

Statutory authority for this action is found in RCW 43.20.050.

The amended regulation would specify how long an infant should be isolated when diagnosed as having ophthalmia neonatorum and would delegate to the Health Services Division, DSHS, the responsibility for designating in a policy statement which prophylactic agents shall be used in the eyes of newborns to prevent gonococcal conjunctivitis. The rule change would also define the responsibilities for the administration of eye prophylaxis and when such responsibility would occur.

Person responsible for the drafting, implementation and enforcement of the rule: Larry Klopfenstein, Supervisor, Venereal Disease Program, Office of Community

Health Services, Health Services Division,
DSHS, LB-12B, 753-5810.

These rules are not necessary as a result of
federal laws, federal court decisions or state
court decisions.

AMENDATORY SECTION (Amending Regulation .100.295, effective 3/11/60)

**WAC 248-100-295 ((OPHTHALMIA)) OPTHALMIA
NEONATORUM (INFECTIOUS CONJUNCTIVITIS OF THE
NEWBORN.)**

Regulations:

~~((Epidemiologic report required.~~

~~Isolation — Strict isolation technique must be carried out until
recovery.))~~

~~Reporting:~~

~~A case of ophthalmia neonatorum shall be reported to the local
health officer on a special form provided by the state department of
social and health services, health services division, in accordance with
the provisions set forth in WAC 248-100-035.~~

~~Isolation:~~

~~Upon discovery that an infant is infected, the infant shall be placed
in strict isolation and maintained in isolation for at least twenty-four
hours after initiation of systemic antibiotic therapy.~~

~~Prevention:~~

~~(1) ((Instillation of a one percent solution of silver nitrate into the
conjunctival sacs of the eyes of all infants shortly after birth.~~

~~(2) Upon request of the medical staff of a hospital, the use of some
other effective and suitable preparation in lieu of silver nitrate solution
may be authorized by the state director of health, providing the name
and concentration of the prophylactic agent is recorded on the birth
certificate of the infant.~~

~~See APHA manual for additional information and recommendations.))~~

~~It shall be the duty of any physician, nurse, midwife or other medically
licensed person who attends to, or assists in, the birth of any infant or
have care of same after birth, to instill or cause to be instilled into the
conjunctival sacs of each newborn an effective prophylactic ophthalmic
agent approved by the state director, health services division.~~

~~(2) The ophthalmic prophylactic used shall be selected from the list
of approved agents as are designated in a policy statement issued by
the state director, health services division.~~

~~(3) Instillation of the approved prophylactic shall be accomplished
within one hour after birth.~~

~~(4) After being given a full and clear explanation concerning the
need for prophylaxis, parent(s) may decline to permit its instillation
provided this procedure conflicts with their religious practices or tenets.
In this event the parent(s) in the presence of a person who was a wit-
ness to this instruction, shall sign a waiver form and so shall the wit-
ness and the presenter. The original of this document shall become a
part of the newborn infant's medical record with copies of same being
furnished to each signatory. This right to waiver shall not apply in the
event a newborn infant is at high risk of infection due to a confirmed
maternal disease state.~~

**WSR 80-15-080
ADOPTED RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Public Assistance)**

[Order 1558—Filed October 20, 1980]

I, N. Spencer Hammond, Ex. Asst. of the Department
of Social and Health Services do promulgate and adopt
at Olympia, Washington, the annexed rules relating to
food stamps, amending chapter 388-54 WAC.

This action is taken pursuant to Notice No. WSR 80-
12-049 filed with the code reviser on September 3, 1980.
Such rules shall take effect pursuant to RCW
34.04.040(2).

This rule is promulgated pursuant to RCW 74.04.510
and is intended to administratively implement that
statute.

The undersigned hereby declares that he has complied
with the provisions of the Open Public Meetings Act
(chapter 42.30 RCW), the Administrative Procedure
Act (chapter 34.04 RCW) and the State Register Act
(chapter 34.08 RCW).

APPROVED AND ADOPTED October 15, 1980.

By N. S. Hammond
Executive Assistant

AMENDATORY SECTION (Amending Order 1529,
filed 8/6/80)

**WAC 388-54-665 HOUSEHOLD DETERMINA-
TION.** (1) The following individuals or groups of indi-
viduals may make up a household provided that such
individuals or groups are not residents of an institution,
residents of a commercial boarding house, and provided
that separate household status shall not be granted to a
spouse of a member of the household, or to children un-
der eighteen years of age under parental control of a
member of the household.

(a) An individual living alone.

(b) An individual, living with others, but who custom-
arily purchases food and prepares meals for home con-
sumption separate and apart from the others.

(c) An individual who is a boarder, living with others
and paying reasonable compensation to the others for
meals for home consumption.

(d) A group of individuals, living together, for whom
food is customarily purchased in common and for whom
meals are prepared together for home consumption.

(e) A group of individuals who are boarders living
with others and paying reasonable compensation to the
others for meals for home consumption.

(f) Residents of federally subsidized housing for the
elderly and residents of Food and Nutrition Service ap-
proved drug or alcoholic treatment centers or group liv-
ing arrangements serving no more than sixteen residents,
those being blind or disabled and receiving Title II or
XVI benefits.

(2) The following individuals residing with a house-
hold shall not be considered household members in de-
termining eligibility or allotment.

(a) Roomers. Individuals to whom a household fur-
nishes lodging, but not meals, for compensation.

(b) Boarders. Individuals to whom a household fur-
nishes lodging and meals with the following restrictions:

Boarder status shall not be extended to the spouse of a
member of the household, children under eighteen under
parental control of a member of the household, or per-
sons paying less than a reasonable monthly payment for
meals. Boarders whose board arrangement is for more
than two meals per day shall pay an amount which
equals or exceeds the thrifty food plan for the appropri-
ate size of the boarder household. Boarders whose board
arrangement is for two meals or less per day shall pay
an amount which equals or exceeds two-thirds of the
thrifty food plan for the appropriate size of the boarder
household.

(c) Live-in attendants. Individuals who reside with a household to provide medical, housekeeping, child care or other similar personal services.

(d) Ineligible aliens. Individuals who do not meet the citizenship or eligible alien status.

(e) Students ((tax dependents)) enrolled in higher education.

(f) Disqualified individuals. Individuals disqualified for fraud or failure to provide required social security numbers without good cause((, or college students disqualified for failure to meet the school year work registration requirement)) or students in higher education disqualified for failure to meet the requirements of WAC 388-54-670(2).

(g) Other individuals who share living quarters with the household but who do not customarily purchase food and prepare meals with the household.

(3) Nonhousehold members who are otherwise eligible may participate as separate households provided that separate household status not be granted to:

(a) A spouse.

(b) Children under eighteen years of age under the parental control of a member of the household.

(4) Residents of commercial boarding houses are not eligible for program benefits. A boarding house shall be defined as:

(a) An establishment which is licensed as a commercial enterprise which offers meals and lodging for compensation.

(b) In project areas without licensing requirements, a boarding house is a commercial establishment which offers meals and lodging for compensation with the intention of making a profit.

(c) The household of the proprietor of a boarding house may participate separate and apart from the residents if otherwise eligible.

AMENDATORY SECTION (Amending Order 1408, filed 6/25/79)

WAC 388-54-670 HOUSEHOLD DETERMINATION-STUDENTS ((TAX DEPENDENTS)). (1) No individual who is a member of a household otherwise eligible to participate in the program shall be eligible to participate as a member of that or any other household if the individual is:

(a) ((Eighteen years of age or older,)) Between the ages of eighteen and sixty years; and

(b) Physically and mentally fit; and

(c) Enrolled and attending at least half-time an institution recognized by a federal, state or local government agency as providing post-high school education, ((and)) unless that person complies with the eligibility requirements of subsection (2).

((c)) Properly claimed or could be properly claimed as a tax dependent for the current year for federal income tax purposes by a taxpayer member of another household not eligible as specified in subsection (3) of this section to participate in the food stamp program. "Properly claimed tax dependent" means that the taxpayer provides or is treated as having provided more than half of the student's support during the calendar year in which the student makes application.

~~(2) The eligibility of the taxpayer's household shall be based on information provided by the student or the taxpayer:~~

~~(a) The department shall verify the tax dependent status of a student who is subject to the tax dependency rules and who does not know his tax dependent status or who provides questionable information.~~

~~(b) The parent's failure to supply requested information or a parental response which indicates student ineligibility shall result in the student being declared ineligible.~~

~~(3) If the taxpayer's household is not currently certified for food stamps, its eligibility shall be determined by the household's size and monthly gross income, based on tables provided by FNS.~~

~~(a) The allowable gross income limits as computed by FNS are calculated by increasing the current net income eligibility limits by the standard deduction, the maximum shelter deduction and the twenty percent earned income deduction.~~

~~(b) Self-employed households shall have their gross income determined on an annual, rather than a monthly basis, minus the cost of doing business, but prior to deducting taxes.)~~

(2) In order to be eligible, a student as defined in subsection (1) shall meet at least one of the following criteria:

(a) Be employed for a minimum of twenty hours per week;

(b) Participate in a federally financed work study program during the regular school year;

(c) Be the head of a household (or spouse of such head) containing one or more other persons who are dependents of that individual because he/she supplies more than half of their total support (includes expenditures for food, shelter, clothing, education, medical and dental care, recreation, transportation and similar necessities) during the calendar year;

(d) Be enrolled in an institution of higher education as a result of participation in the work incentive program under Title IV of the Social Security Act, as amended.

(3) Once a student enrolls in an institution of higher education, such enrollment shall be deemed to continue through normal periods of class attendance, vacation and recess unless the student graduates, is suspended or expelled, drops out, or does not intend to register for the next normal school term (excluding summer school).

(4) Enrollment as a result of participation in the work incentive program under Title IV of the Social Security Act shall be deemed to continue as long as the student maintains continuous enrollment as specified in subsection (3) above.

(5) The income and resources of an ineligible student living with a household shall not be considered in determining eligibility or level of benefits of the household.

((4)) (6) The remainder of the household in which the ineligible student resides ((may)) shall be certified, if otherwise eligible.

((a)) The income and resources of an individual determined ineligible due to tax dependency is not considered available to other household members in

~~establishing the household's eligibility and basis of issuance.~~

~~(b) The tax dependent's presence in the household shall not be considered in determining the food stamp allotment.))~~

AMENDATORY SECTION (Amending Order 1374, filed 3/1/79)

WAC 388-54-675 WORK REGISTRATION REQUIREMENT. (1) Each individual between the ages of 18 and 60 is required to register for employment prior to certification, and once every 6 months after initial registration, except:

(a) A person physically or mentally unfit for employment;

(b) A parent, or other member of the household, who has responsibility for the care of a dependent child under 12 years of age, or of an incapacitated person;

~~((f))~~ If the child has its 12th birthday within a certification period, the individual responsible for the care of the child shall fulfill the work registration requirement as part of the next scheduled recertification process, unless the individual qualifies for another exemption.

(c) A parent, or other caretaker, of a child under 18 years of age in a household where another able-bodied parent is registered for work or is exempt as a result of employment;

(d) A person receiving unemployment compensation, or a person who has applied for, but not yet begun to receive unemployment compensation, but has registered for work as a requirement for receiving unemployment compensation((-);

(e) A household member subject to and participating in the WIN program;

~~((f))~~ Household members, who are required to register for work under WIN or unemployment compensation and fail to comply with the work registration requirements of those programs, shall not be denied food stamp benefits solely for this failure. These members lose their exemption and must register for work if they qualify in (1) subsection.

(f) A person who is employed, or self-employed, at least 30 hours per week, or receiving weekly earnings equal to the federal minimum wage, multiplied by 30 hours((-);

(g) A student enrolled at least half time in any recognized school, training program or institution of higher education((-; except that:

~~(i) Those enrolled at least half time in an institution of higher education must register for 20 hours of work per week unless they are employed at least 20 hours a week or participating in a federally financed work study program; employed less than 20 hours per week but earning an amount at least equal to the federal minimum wage multiplied by 20 hours; the head of a household containing one or more other persons to whom the student supplies more than half of their total support; or otherwise exempt from the work registration requirement;~~

~~(ii) A student shall register for full time work when any school, training program or institution of higher education has a recess or vacation exceeding 30 days.))~~ provided that those students have met the eligibility conditions in WAC 388-54-670;

(h) A regular participant in a drug addiction or alcoholic treatment and rehabilitation program((-);

(i) A child who has its 18th birthday within the certification period. This child shall fulfill the work registration requirement as part of the next scheduled recertification process, unless the child qualifies for another exemption.

(2) The department shall provide work registration forms to the applicant for each household member who is required to register for employment. Household members are registered when a completed work registration form is submitted to the department. The department shall forward the completed form to the State Employment Service.

(3) The applicant's statement concerning the employability of each member of the household shall be accepted unless the information is questionable.

(4) Each member required to register for employment shall also be required to:

(a) Report for an interview to the office where he is registered upon reasonable request;

(b) Respond to a request from the employment service office requiring supplemental information regarding employment status or availability for work;

(c) Report to an employer to whom he has been referred by such office, if the potential employment is suitable((-);

(d) Accept a bona fide offer of suitable employment to which he is referred by such office;

(e) Continue suitable employment to which the registrant was referred by such office until the employment is no longer considered suitable, the registrant becomes exempt, or is terminated from employment due to circumstances beyond the registrant's control.

(5) If the department finds that a household member ~~((except a student))~~ refused or failed to comply with the work registration requirement without good cause, the household shall be ineligible for participation in the program, until the member complies, becomes exempt, or, for 2 months, whichever is earlier.

~~((a) Any student who has failed or refuses to comply without good cause shall be ineligible to participate as a member of any household. This disqualification shall apply to the individual student alone and not to the entire household and continues until he complies, becomes exempt, or for 2 months, whichever is earlier.~~

~~(b) Student disqualification. The department shall issue a notice of adverse action if benefits are reduced or terminated due to student disqualification. The notice shall contain the information that one of its members is being disqualified, the reason for the disqualification and the eligibility and benefit level of the remaining members.))~~

(6) In determining whether good cause existed for failure to comply, facts and circumstances shall be considered including information submitted by the employment office, the household member and the employer.

"Good cause" includes circumstances beyond the member's control, such as but not limited to, illness, illness of another household member sufficiently serious to require the presence of the household member, unavailability of transportation, and unanticipated emergency.

(7) Employment will be considered unsuitable if:

(a) The wages offered are less than the highest amount of the standard following:

(i) The applicable state or federal minimum wage,

(ii) 80% of the federal minimum wage((-));

(b) The employment offered is on a piece-rate basis and the average hourly yield the employee can reasonably be expected to earn is less than the hourly wages specified in subsection (a)((-));

(c) The registrant, as a condition of employment, or continuing employment, is required to join, resign from, or refrain from joining any legitimate labor organization((-)); or

(d) The work offered is at a site subject to a strike or a lockout at the time of the offer, unless the strike has been enjoined under Section 208 of the Labor-Management Relations Act (commonly known as the Taft-Hartley Act) or unless an injunction has been issued under Section 10 of the Railway Labor Act.

(8) Employment shall be considered suitable unless the household member can demonstrate, or the department otherwise becomes aware that:

(a) The degree of risk to the registrant's health and safety is unreasonable.

(b) The registrant is not physically or mentally fit to perform the employment offered, as documented by medical evidence or reliable information obtained from other sources.

(c) The employment offered is outside the registrant's major field of experience unless, after a period of 30 days from registration, job opportunities in his major field have not been offered.

(d) The distance from the member's home to the place of employment is unreasonable considering the expected wages and the time and cost of commuting.

(e) If daily commuting time, not including the transporting of a child to and from a child care facility, exceeds two hours, or if the place of employment is too far to walk to and neither private nor public transportation is available to the client.

(f) The working hours or nature of the employment interferes with the member's religious observances, convictions, or beliefs.

(g) In case of students, the employment is offered during class hours or is more than 20 hours a week.

(9) No household shall be denied participation solely on the grounds that a member of the household is not working because of a strike or a lockout at his or her place of employment unless the strike has been enjoined under paragraph 208 of the Labor-Management Relations Act (commonly known as the Taft-Hartley Act), or unless an injunction has been issued under Section 10 of the Railway Labor Act.

(10) At the end of the 2 month disqualification period, a household may apply to re-establish eligibility. Eligibility may be reestablished during the disqualification period if the reason for disqualification is corrected.

AMENDATORY SECTION (Amending Order 1409, filed 6/25/79)

WAC 388-54-677 WORK REGISTRATION—VOLUNTARY QUIT. No applicant household whose primary wage earner voluntarily quit his/her most recent job without good cause shall be eligible for participation in the program as specified below:

(1) When a household files an application, the department shall determine:

(a) If any currently unemployed household member who is required to register for full time work has quit his/her most recent job without good cause within the last sixty days;

Changes in employment status that result from reducing hours of employment, while working for the same employer, terminating a self-employment enterprise or resigning from a job at the demand of the employer will not be considered as a voluntary quit for purpose of this subsection.

(b) If that member is the household's primary wage earner. The primary wage earner shall be that household member age eighteen or over who was acquiring the greatest amount of earned financial support for the household at the time of the quit;

(c) If the voluntary quit was with or without good cause.

(2) If the quit is without good cause the household's application for participation shall be denied for a period of two months beginning with the month of quit:

(a) The household shall be advised of the reason for the denial and of its rights to reapply and/or request a fair hearing;

(b) If an application for participation in the food stamp program is filed in the second month of disqualification, the department shall use the same application for the denial of benefits in the remaining month of disqualification and certification for any subsequent month(s) if all other eligibility criteria are met.

(3) ~~((The following))~~ Persons are exempt from voluntary quit provisions in the following circumstances:

(a) Primary wage earners in households certified for the program at the time of the quit; and

(b) Persons exempt from the full time work registration provisions.

(4) Good cause for leaving employment includes the good cause provisions found in WAC 388-54-675(5) and resigning from a job that does not meet the suitability criteria specified in WAC 388-54-675(7). Good cause for leaving employment shall also include:

(a) Discrimination by an employer based on age, race, sex, color, handicap, religious beliefs, national origin or political beliefs;

(b) Work demands or conditions that render continued employment unreasonable, such as working without being paid on schedule;

(c) Acceptance by the primary wage earner of employment, or enrollment of at least half-time in any recognized school, training program or institution of higher education including fulfillment of the provisions in WAC 388-54-670(2), that requires the primary wage earner to leave employment;

(d) Acceptance by any other household member of employment or enrollment at least half-time in any recognized school, training program or institution of higher education in another county or similar political subdivision which requires the household to move thereby requiring the primary wage earner to leave employment;

(e) Resignations by persons under the age of sixty which are recognized by the employer as retirement;

(f) Employment which becomes unsuitable by not meeting the criteria specified in WAC 388-54-675(7) after the acceptance of such employment;

(g) Acceptance of a bona fide offer of employment of more than twenty hours a week or in which the weekly earnings are equivalent to the federal minimum wage multiplied by twenty hours which, because of circumstances beyond the control of the primary wage earner, subsequently either does not materialize or results in employment of less than twenty hours a week or weekly earnings of less than the federal minimum wage multiplied by twenty hours; and

(h) Leaving a job in connection with patterns of employment in which workers frequently move from one employer to another such as migrant farm labor or construction work. There may be some circumstances where households will apply for food stamp benefits between jobs particularly in cases where work may not yet be available at the new job site. Even though employment at the new site has not actually begun, the quitting of the previous employment shall be considered as with good cause if part of the pattern of that type of employment.

(5) The department shall request verification of the household's statements only to the extent that the information given by the household is questionable:

(a) The primary responsibility for providing verification rests with the household;

(b) If it is difficult or impossible for the household to obtain documentary evidence in a timely manner, the department shall offer assistance to the household to obtain the needed verification;

(c) Acceptable sources of verification include but are not limited to the previous employer, employee association, union representatives and grievance committees or organizations;

(d) Whenever documentary evidence cannot be obtained, the department shall substitute a collateral contact;

(e) The department is responsible for obtaining verification from acceptable collateral contacts provided by the household;

(f) If the household and department are unable to obtain requested verification from these or other sources because the cause for the quit resulted from circumstances that for good reason cannot be verified, such as a resignation from employment due to discrimination practices or unreasonable demands by an employer, or because the employer cannot be located, the household will not be denied access to the program.

WSR 80-15-081
ADOPTED RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Institutions)

[Order 1559—Filed October 20, 1980—Eff. January 1, 1981]

I, N. Spencer Hammond, Ex. Asst. of the Department of Social and Health Services do promulgate and adopt at Olympia, Washington, the annexed rules relating to diversion, amending chapter 275-34 WAC.

This action is taken pursuant to Notice No. WSR 80-08-016 filed with the code reviser on June 24, 1980. Such rules shall take effect at a later date, such date being January 1, 1981.

This rule is promulgated pursuant to chapter 13.40 RCW and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 15, 1980.

By N.S. Hammond
Executive Assistant

AMENDATORY SECTION (Amending Order 1288, filed 4/13/78)

WAC 275-34-010 DEFINITIONS. (1) "Department" means department of social and health services.

(2) "Secretary" means the secretary of the department of social and health services or his/her designee.

(3) "Juvenile court" and "court" will have the same meaning as detailed in RCW 13.04.021.

(4) "Diversion unit" means any person or entity specially funded by the legislature or so designated by the county or court and approved by the state to arrange and supervise diversion agreements in accordance with the requirements of chapter 13.40 RCW.

(5) "Diversion agreement" means a written agreement between a divertee and a diversion unit.

(6) "Divertee" means any alleged juvenile offender who has entered into a diversion agreement with a diversion unit and who is still under the supervision of such unit.

(7) "Restitution" means financial reimbursement by the juvenile offender to the victim(s) in an amount equal to

(a) actual damages sustained by loss of, or injury to, property and

(b) for personal physical injury, the cost of medical treatment and the amount of lost wages.

Restitution shall not include reimbursement for mental anguish, pain and suffering, or other intangible losses. Any restitution assessed by the diversion agreement shall not exceed an amount which the youth could reasonably be expected to pay during the operation of the agreement.

(8) "Juvenile," "youth," and "child," mean any individual who is under the chronological age of eighteen years and who has not previously been transferred to

adult court for criminal prosecution. These terms shall also mean ~~((an individual))~~ a juvenile over eighteen years of age ~~((but))~~ who ~~((remains under the jurisdiction of a juvenile court))~~ entered into an agreement prior to his eighteenth birthday as provided in RCW ~~((13.40-300))~~ 13.40.080.

(9) "Community service" means compulsory service, without compensation, performed for the benefit of the community by the offender as punishment for committing an offense. ~~((Community service shall be performed for private or public nonprofit agencies and services.))~~ It is the expectation that the majority of community service will be performed at public and private nonprofit agencies. The community service shall not supplant a service being provided by the agency. If profit making agencies are going to be utilizing youth through those criteria, the program must have the prior approval of the appropriate regional administrator. Equal offers must be made to all similar services within the community.

AMENDATORY SECTION (Amending Order 1288, filed 4/13/78)

WAC 275-34-020 PLANNING—COMMITTEES—CREATION OF PLANS. (1) When requesting state funding of community diversion programs, the administrator of the juvenile court ~~((services;))~~ or probation department or the office of the chief county executive ~~((or officers))~~ shall initiate diversion program planning for their respective judicial districts by selecting members for and organizing planning committee. All planning committees shall, insofar as possible, consist of people representing a broad range of interest in youth. To insure such representation, representatives of the county juvenile ~~((court))~~ probation department, local law enforcement, the county prosecuting attorney's office, a juvenile, the county executive office, the regional law and justice planning office, and private and public nonprofit youth planning agencies shall be requested to belong to such committee or otherwise participate in such planning. ~~((Planning committees shall include and/or seek program planning input from representative ethnic minority groups residing within each planning area.))~~ Special efforts will be made to recruit racial minorities and women to serve on the planning committee. Committee membership shall not exceed ten nor be less than five. Committee members shall serve for a one-year period with reappointment at the pleasure of the juvenile ~~((court))~~ probation department administrator and/or the chief county executive ~~((or officers)).~~

(2) The members of the planning committee shall select a chairperson by a majority vote.

(3) The committee shall be responsible for the preparation of annual written diversion program plans. Plans submitted for funding shall bear the signatures of the juvenile court administrator ~~((s))~~ in counties that are administered by the superior court and by the probation department administrator in counties that are not administered by the superior court and the chief county executive ~~((s)).~~ Plans shall be in accordance with the requirements of chapter 13.40 RCW and the requirements of this chapter.

AMENDATORY SECTION (Amending Order 1288, filed 4/13/78)

WAC 275-34-030 PLANNING—SUBMISSION OF PLANS—TIME LIMITS. (1) Written plans prepared by planning committees shall be submitted to the department for its review and approval. Approved plans will be financed by the department, with the exceptions contained in this chapter, through ~~((monies))~~ moneys provided the department for this purpose.

(2) ~~((The initial plans shall be submitted, together with a formal application for funding in accordance with such plans, on or before May 1, 1978. Program implementation for such plans shall be on or about July 1, 1978.~~

~~((3))~~ All ~~((subsequent))~~ plans and applications shall be submitted on or before June 1 and relate to program implementation on or about January 1 of the following year; biennial plans are permissible.

~~((4))~~ Contracts for programs to begin on or about July 1, 1978 shall extend through December 31, 1978; subsequent contracts will be written on a twelve-month calendar year basis.

AMENDATORY SECTION (Amending Order 1288, filed 4/13/78)

WAC 275-34-040 STATE FUNDING. (1) State funds may be provided by the department and spent for a diversion program for wages of personnel directly responsible for the implementation or operation of a diversion program, necessary operating and equipment expenses, expenses caused by training of community volunteers, and expenses incurred for the program through contracts with third parties for the performance of educational, informational, or counseling interviews with divertees.

(2) The term "necessary operating and equipment expenses" as used herein shall not be construed to include expenses caused by building construction or the creation of substantial capital improvements. Such equipment purchased by funds under this section becomes the property of the state of Washington and must be entered into the state inventory through the regional administrator.

(3) State funds shall not be provided to defray diversion program expenses which were, prior to July 1, 1978, financed with county originated dollars.

(4) No person will be denied services on the grounds of race, color, national origin, creed, religion, sex or handicap.

AMENDATORY SECTION (Amending Order 1288, filed 4/13/78)

WAC 275-34-050 PROGRAM PLAN—REQUIRED ELEMENTS. The program plan shall

(1) identify all diversion program staff by title and responsibility,

(2) document total cost of program operation by line item cost,

(3) describe the process of divertee assignment to diversion unit,

(4) describe the procedure whereby the divertee's needs and obligations are assessed,

(5) describe the control and monitoring procedures to be used with regard to such program,

(6) describe the process for termination of diversion agreement,

(7) describe the manner by which the amount of restitution due will be decided upon, collected, and paid to the victim,

(8) state whether the program will operate and be administered separate from the court and, if no such separation is anticipated, explain why a connection between the court and the diversion program is necessary and advisable in accordance with WAC 275-34-090,

(9) indicate the estimated number of clients to receive diversion services during the contract period and describe how these figures were derived,

(10) describe how violators of diversion agreements will be returned to or referred to the court for disposition,

(11) justify why this particular plan for diversion was decided upon, ~~((and))~~

(12) include a statement indicating the contractors and/or third party contractees willingness to participate in an evaluation program, and

(13) include dispositional guidelines and standards to insure juveniles are handled in an equitable and fair manner.

AMENDATORY SECTION (Amending Order 1288, filed 4/13/78)

WAC 275-34-060 DIVERSION UNIT—SPECIFICATIONS IN PLANS. Proposed plans shall specify that the diversion unit shall

(1) maintain a record system separate and apart from existing juvenile court records,

(2) make provisions to insure that divertees and potential divertees are afforded due process as detailed in RCW 13.40.080(4) through (6),

(3) to the extent possible, involve members of the community in the implementation of community service assignments, restitution, and counseling interviews,

(4) provide for ~~((a community services coordinator to monitor and supervise diversion agreement))~~ monitoring and supervision of diversion agreements, and

(5) establish a procedure necessary to ensure the confidentiality of client records.

AMENDATORY SECTION (Amending Order 1288, filed 4/13/78)

WAC 275-34-070 APPROVAL OF PLAN BY SECRETARY. The secretary will give each application individual consideration and will notify each applicant as to whether the applicant's plan has been approved or disapproved. ~~((Notification of approval or disapproval, as to the initial plans submitted on or before May 1, 1978, will be given on or before June 1, 1978. For))~~ All subsequent proposed plans and applications, assuming those plans and applications are submitted in a timely fashion, notice of department approval or disapproval shall be given the applicants on or before September 1 of

the year in which the proposed plan is submitted. If a proposed plan and application is disapproved, the secretary shall submit in writing the reason(s) therefore. Subsequent to a plan's disapproval, the applicant may request reconsideration by the secretary of the disapproved proposed plan.

AMENDATORY SECTION (Amending Order 1288, filed 4/13/78)

WAC 275-34-080 MODIFICATION OF APPROVED PLAN. Approved plans may be modified only with the prior approval of the department. State funds will not be ~~((usable))~~ used to pay expenses incurred prior to the date of approval of a revised plan if those expenses are not in accord with the approved plan. ~~((When modifications are desired, a written statement describing the modification))~~ The diversion unit coordinator, with the approval of the DJR regional administrator, shall be allowed to modify the contract, as long as the total of the modification is less than five percent and the total modification for the contract period has not exceeded seven and one-half percent of the contract amount. For larger modifications, a written statement describing the changes to be made and an explanation of the reasons for modification accompanied by a written endorsement of the planning committee shall be submitted to the department. The secretary shall review the proposed modification and notify the applicant of approval or disapproval within thirty days.

NEW SECTION

WAC 275-34-120 REFUSAL OF SERVICES. (1) A diversion unit may refuse to enter into an agreement with a juvenile. The unit shall refer the youth for court action with a detailed written statement for the reason of such refusal.

(2) In order to standardize the diversion units across the state, the following are guidelines. These guidelines will be utilized by the division in monitoring diversion units to ensure consistency.

(3) The following factors shall be considered by the agency in making the determination to accept or reject the youth for diversion.

(a) Any youth currently on parole;

(b) Any youth currently on probation subsidy;

(c) Any youth being supervised by the juvenile court;

(d) Any youth who has a court hearing for a criminal complaint pending;

(e) Any youth who failed to abide by the terms of an earlier diversion agreement, within six months;

(f) Any youth who has a felony as part of their criminal history, within the past year;

(g) Any youth who has a total of four misdemeanors or gross misdemeanors all within the past year; and

(h) Any youth under institutional confinement.

NEW SECTION

WAC 275-34-140 SUBSTANTIAL VIOLATION. (1) In order to standardize the diversion units across the state, the following are guidelines. These

guidelines will be utilized by the division in monitoring diversion units to ensure consistency.

(2) The following conditions may be considered in determining if a substantial violation has occurred.

(a) Two unexcused absences at the community service placement or restitution site.

(b) Appearance at a community service or restitution site in possession or under the influence of alcohol or drugs.

(c) Failure to complete the terms of the diversion agreement within the specified time frames.

(d) Any other reason as determined by the diversion units.

WSR 80-15-082

ADOPTED RULES

UNIVERSITY OF WASHINGTON

[Order 80-2—Filed October 21, 1980]

Be it resolved by the board of regents, of the University of Washington, acting at Seattle, Washington, that it does promulgate and adopt the annexed rules relating to admission and registration procedures for the University of Washington, amending WAC 478-160-060, 478-160-105, 478-160-110, 478-160-120, 478-160-145, 478-160-210, 478-160-215, 478-160-216, 478-160-225 and 478-160-231. Repealing WAC 478-160-251.

This action is taken pursuant to Notice No. WSR 80-11-050 filed with the code reviser on August 19, 1980. Such rules shall take effect pursuant to RCW 28B.19.050(2).

This rule is promulgated pursuant to RCW 28B.20.130(1) and (3) and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 10, 1980.

By Elsa Kircher Cole
Assistant Attorney General

AMENDATORY SECTION (Amending Order 72-5, filed 11/6/72)

WAC 478-160-060 REQUESTS FOR RECONSIDERATION OF ADMISSION DECISION. Applicants who are denied admission may request further consideration by presenting additional information in support of their application. Such requests should be addressed to the ~~((Board of))~~ Committee on Admissions and Academic Standards, Office of Admissions, 1400 N.E. Campus Parkway, Seattle, WA 98195.

AMENDATORY SECTION (Amending Order 72-5, filed 11/6/72)

WAC 478-160-105 APPLICATION FORMS. Application forms may be obtained by writing to the

School of Dentistry, SC-62, D-322 Health Sciences Building, Seattle, WA 98195. ~~((Applications for admission to the class entering in the fall term of any given year will be accepted only until December 1 of the preceding year))~~ The deadline for filing an application is determined by the University of Washington School of Dentistry and can be obtained from the Office of the Dean, SC-62, D-322 Health Sciences Building, Seattle, Washington, 98195.

AMENDATORY SECTION (Amending Order 72-5, filed 11/6/72)

WAC 478-160-110 ADMISSION TO THE SCHOOL OF LAW—APPLICATION FORMS. Applicants to the first-year class may obtain application forms by contacting the Director of Admissions, School of Law, Condon Hall, JB-20 Seattle, WA 98195. ~~((Applications for admission to the class entering in the fall term of any given year will be accepted only until February 1 of that year))~~ The deadline for filing an application is determined by the University of Washington School of Law and can be obtained from the Director of Admissions, School of Law, Condon Hall, JB-20, Seattle, Washington, 98195.

AMENDATORY SECTION (Amending Order 72-5, filed 11/6/72)

WAC 478-160-120 APPLICATION FORMS. Application for admission with advanced standing may be obtained from the School of Law, Condon Hall, Seattle, WA 98195. ~~((Applications for admission to the fall term of any given year will be accepted only until July 15 of that year))~~ The deadline for filing an application is determined by the University of Washington School of Law and can be obtained from the Director of Admissions, School of Law, Condon Hall, JB-20, Seattle, Washington, 98195.

AMENDATORY SECTION (Amending Order 72-5, filed 11/6/72)

WAC 478-160-145 ADMISSION WITH NON-MATRICULATED STATUS ((POLICY)). The University of Washington's ~~((Board of))~~ Committee on Admissions((Scholastic)) and Academic Standards ((and Graduation)), appointed by the President of the University, is responsible for the interpretation and administration of the regulations governing the admission of nonmatriculated students.

AMENDATORY SECTION (Amending Order 72-5, filed 11/6/72)

WAC 478-160-210 APPLICATION FORMS. Nonresident students who desire to apply for a change in resident status must complete and submit ~~((an "Application for Change in Residence Status"))~~ a Washington Institutions of Higher Education "Residency Questionnaire" to the Office of Residence Classification, 1400 N.E. Campus Parkway, Seattle, WA 98195. ~~((An application))~~ A residency questionnaire and complete instructions will be mailed to students upon request.

AMENDATORY SECTION (Amending Order 77-1, filed 7/7/77)

WAC 478-160-215 NONRESIDENTS WHO ARE ENTITLED TO PAY RESIDENT TUITION AND FEES. As provided in RCW 28B.15.014, as last amended by section 4, chapter 273, Laws of 1971 1st ex. sess., the following are entitled to classification as resident students regardless of age or domicile:

(1) Any person who is employed not less than twenty hours per week at ~~((an institution-))~~ a state of Washington institution of higher education(()), and the children and spouses of such persons.

(2) Military personnel and federal employees residing or stationed in the state of Washington, and the children and spouses of such military personnel and federal employees. For these purposes federal employees will include employees of federally-supported agencies, commissions or other organizations who are stationed on the University of Washington campus.

(3) All veterans, as defined in RCW 41.04.005, whose final permanent duty station was in the state of Washington, so long as such veteran is receiving federal, vocational, or educational benefits conferred by virtue of his military service.

NEW SECTION

WAC 478-160-216 NONCITIZENS OF THE UNITED STATES WHO ARE ENTITLED TO PAY RESIDENT TUITION AND FEES. As established by statute, certain classifications of noncitizens of the United States are entitled to pay resident tuition and fees. Information as to eligibility can be obtained from the Office of Resident Classification, 1400 N.E. Campus Parkway, Seattle, WA 98195.

AMENDATORY SECTION (Amending Order 72-5, filed 11/6/72)

WAC 478-160-225 SOUTHEAST ((ASIAN)) ASIA VETERANS. Veterans of the Vietnam conflict who have served in the southeast Asia theatre of operations and who are claiming exemption pursuant to RCW 28B.15.620 from tuition and fees increase must submit an "Application for a Change in Residence Status" and furnish proof of their military service in southeast Asia to the ~~((Office of Residence Classification))~~ Veterans Affairs Office, 1400 N.E. Campus Parkway, Seattle, WA 98195.

AMENDATORY SECTION (Amending Order 74-2, filed 3/4/74)

WAC 478-160-231 RESIDENCE CLASSIFICATION REVIEW COMMITTEE. The Residence Classification Review Committee shall be composed of ~~((three))~~ four persons appointed by the ~~((Vice President for Academic Affairs and))~~ Provost, each for a term of one academic year.

REPEALER

The following section of the Washington Administrative Code is hereby repealed:

WAC 478-160-251 ENROLLMENT SERVICE FEE WAIVERS.

WSR 80-15-083
ADOPTED RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Institutions)

[Order 1557—Filed October 21, 1980]

I, N. Spencer Hammond, Ex. Asst. of the Department of Social and Health Services do promulgate and adopt at Olympia, Washington, the annexed rules relating to medically fragile children's facilities, new chapter 275-39 WAC.

This action is taken pursuant to Notice No. WSR 80-10-050 filed with the code reviser on August 6, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated pursuant to RCW 74.26.040 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 1, 1980.

By N. S. Hammond
 Executive Assistant

Chapter 275-39 WAC
MEDICALLY FRAGILE CHILDREN'S FACILITIES

WAC

275-39-005	Authority.
275-39-010	Facility certification.
275-39-015	Purpose.
275-39-020	Eligibility for services of a MFCF.
275-39-025	Definitions.
275-39-030	Medically fragile child.
275-39-035	Intensive support medical services.
275-39-040	Philosophy, objectives, and goals.
275-39-045	Policy and procedure manuals.
275-39-050	Governing body.
275-39-055	Chief executive officer.
275-39-056	Qualified mental retardation professional.
275-39-060	Organization chart.
275-39-065	Management audit plan.
275-39-070	Research statement.
275-39-075	Written policies.
275-39-080	Licensure and professional standards.
275-39-085	Suspension and dismissal.
275-39-090	Sufficient staffing and resident work.
275-39-100	Staff training program.
275-39-105	Staff treatment of residents.
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275-39-115	Availability of rules and procedures.
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275-39-145	Transfer to another facility.	275-39-350	Physical and occupational therapy services—Staff and facilities.
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275-39-155	Resident's civil rights.	275-39-360	Physical and occupational therapy services—Occupational therapy assistant.
275-39-160	Residents' bill of rights.	275-39-365	Physical and occupational therapy services—Physical therapist (qualified consultant).
275-39-165	Delegation of rights and responsibilities.	275-39-370	Physical and occupational therapy services—Physical therapist assistant.
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275-39-185	Dental services—Diagnostic services.	275-39-390	Recreational services—Records.
275-39-190	Dental services—Treatment.	275-39-395	Recreational services—Staff.
275-39-195	Dental services—Oral health education and training.	275-39-400	Residential services—Responsibilities of living unit staff.
275-39-200	Dental services—Records.	275-39-405	Residential services—Resident evaluation and program plans.
275-39-205	Dental services—Formal arrangements.	275-39-410	Residential services—Resident activities.
275-39-210	Dental services—Staff.	275-39-415	Residential services—Personal possessions.
275-39-211	Educational services.	275-39-420	Residential services—Control and discipline of residents.
275-39-215	Food and nutrition services—Required services.	275-39-425	Residential services—Physical restraint of residents.
275-39-220	Food and nutrition services—Diet requirements.	275-39-430	Residential services—Mechanical devices used for physical restraint.
275-39-225	Food and nutrition services—Meal service.	275-39-435	Residential services—Chemical restraint of residents.
275-39-230	Food and nutrition services—Menus.	275-39-440	Residential services—Behavior modification programs.
275-39-235	Food and nutrition services—Food storage.	275-39-445	Residential services—Resident clothing.
275-39-240	Food and nutrition services—Work areas.	275-39-450	Residential services—Health, hygiene, grooming and toilet training.
275-39-245	Food and nutrition services—Dining areas and service.	275-39-455	Residential services—Grouping and organization of living units.
275-39-250	Food and nutrition services—Training of residents and direct-care staff.	275-39-460	Residential services—Resident living staff.
275-39-255	Food and nutrition services—Staff.	275-39-465	Residential services—Resident living areas.
275-39-260	Food and nutrition services—Dietitian (qualified consultant).	275-39-470	Residential services—Resident bedrooms—Space and occupancy.
275-39-265	Medical services—Required services.	275-39-475	Residential services—Resident bedrooms—Furniture and bedding.
275-39-270	Medical services—Goals and evaluations.	275-39-480	Residential services—Storage space in living units.
275-39-275	Medical services—Arrangements with outside resources.		
275-39-280	Medical services—Preventive health services.		
275-39-285	Medical services—Physician (qualified consultant).		
275-39-290	Nursing services—Required services.		
275-39-295	Nursing services—Inservice training.		
275-39-300	Nursing services—Staff.		
275-39-305	Nursing services—Supervision of health services.		
275-39-310	Nursing services—Director of nursing services.		
275-39-315	Nursing services—A staff nurse.		
275-39-320	Pharmacy services—Required services.		
275-39-325	Pharmacy services—Pharmacist.		

275-39-485. Residential services—Resident
bathrooms.

275-39-490 Residential services—Heating and
ventilation in living units.

275-39-495 Residential services—Floors in living
units.

275-39-500 Residential services—Emergency
lighting.

275-39-505 Respiratory therapy services—Respi-
ratory therapist (qualified
consultant).

275-39-510 Training and habilitation services—
Required services.

275-39-515 Training and habilitation services—
Staff.

275-39-520 Training and habilitation services—
Needed services.

275-39-525 Training and habilitation services—
Agreements with outside resources.

275-39-530 Training and habilitation services—
Quality standards for outside
resources.

275-39-535 Training and habilitation services—
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275-39-545 Speech pathology and audiology ser-
vices—Required services.

275-39-550 Speech pathology and audiology ser-
vices—Evaluations and assessments.

275-39-555 Speech pathology and audiology ser-
vices—Staff and facilities.

275-39-560 Speech pathology and audiology ser-
vices—Speech pathologist or audiolo-
gist (qualified consultant).

275-39-565 Social services—Required services.

275-39-570 Social services—Social workers.

275-39-575 Social services—Social worker (quali-
fied consultant).

275-39-580 Records—Maintenance of resident
records.

275-39-585 Records—Admission records.

275-39-590 Records—Record entries during
residence.

275-39-595 Records—Confidentiality.

275-39-600 Records—Central record service.

275-39-605 Records—Staff and facilities.

275-39-610 Facility support services—Adminis-
trative support services.

275-39-615 Facility support services—Communi-
cation system.

275-39-620 Facility support services—Engineering
and maintenance.

275-39-625 Facility support services—Laundry
services.

275-39-630 Facility requirements—Equipment.

275-39-635 Safety and sanitation—Emergency
plan and procedures.

275-39-640 Safety and sanitation—Evacuation
drills.

275-39-645 Safety and sanitation—Fire
protection.

275-39-655 Safety and sanitation—Fire protection
waivers.

275-39-660 Safety and sanitation—Paint.

275-39-665 Safety and sanitation—Building ac-
cessibility and use.

275-39-670 Safety and sanitation—Sanitation re-
cords and reports.

275-39-675 Safety and sanitation—Health and
safety laws.

NEW SECTION

WAC 275-39-005 AUTHORITY. Chapter 74.26
RCW directs the department of social and health ser-
vices, division of developmental disabilities to establish a
controlled program to develop and review an alternative
service delivery system for certain multiply handicapped
children, also to be referred to as medically fragile chil-
dren, who have intensive medical needs but who are not
required to reside in a hospital setting for their needs to
be met.

The following regulations are adopted pursuant to
legislative direction to provide minimum standards and
qualifications for various elements of the program.

NEW SECTION

WAC 275-39-010 FACILITY CERTIFICATION.
A MFCF is a medically fragile children's facility certi-
fied as an institution for the mentally retarded (IMR)
for the specialized care of medically fragile children as
defined in WAC 275-39-030. A MFCF is subject to the
regulations of this chapter (chapter 275-39 WAC) and
to the regulations and statutes applicable to institutions
for the mentally retarded (IMRs).

NEW SECTION

WAC 275-39-015 PURPOSE. The purposes for
establishing a residential alternative for medically fragile
children are:

- (1) To provide residential care more cost efficiently
than is otherwise available in a hospital setting;
- (2) To provide appropriate care in a more home-like
setting than might otherwise be available in a hospital
setting;
- (3) To provide "active treatment" for each child
which includes an individual habilitation plan.

NEW SECTION

WAC 275-39-020 ELIGIBILITY FOR SER-
VICES OF A MFCF. To be eligible for the services of a
MFCF, a person shall:

- (1) Be a medically fragile child as defined herein;
- (2) Need intensive support medical services, as de-
scribed herein, which can be provided outside of a hos-
pital setting or other residential medical facility but is
not available in a less restrictive environment than a
MFCF. Each applicant must be individually considered
as to whether his/her needs can be met in a less restric-
tive environment;
- (3) Be developmentally disabled as defined herein;
- (4) If not developmentally disabled, as defined herein:

(a) At risk of being or becoming developmentally disabled and/or is or is at risk of having substantial functional limitations; and

(b) Be granted an exception to rule by the division of developmental disabilities.

NEW SECTION

WAC 275-39-025 DEFINITIONS. As used in this chapter:

(1) "Active treatment" in a MFCF requires the following:

(a) The individual's regular participation, in accordance with an individual plan of care, in professionally developed and supervised activities, experiences, or therapies.

(b) An individual written plan of care that sets forth measurable goals or objectives stated in terms of desirable behavior and that prescribes an integrated program of activities, experiences or therapies necessary for the individual to reach those goals or objectives. The overall purpose of the plan is to help the individual function at the greatest physical, intellectual, social, or vocational level he can presently or potentially achieve.

(c) An interdisciplinary professional evaluation that:

(i) Is completed, for a recipient, before admission to the institution but not more than three months before and, for an individual applying for medicaid after admission, before the institution requests payment;

(ii) Consists of complete medical, social, and psychological diagnosis and evaluations and an evaluation of the individual's need for institutional care; and

(iii) Is made by a physician, a social worker and other professionals, at least one of whom is a qualified mental retardation professional.

(d) Reevaluation medically, socially, and psychologically at least quarterly by the staff involved in carrying out the resident's individual plan of care. This must include review of the individual's progress toward meeting the plan objectives, the appropriateness of the individual plan of care, assessment of his continuing need for institutional care, and consideration of alternate methods of care.

(e) An individual postinstitutionalization plan, as part of the individual plan of care, developed before discharge by a qualified mental retardation professional and other appropriate professionals. This must include provision for appropriate services, protective supervision, and other follow-up services in the resident's new environment.

(2) "Ambulatory" means able to walk without assistance.

MFCF means an institution for the mentally retarded (also referred to an ICF/MR) which provides services exclusively for medically fragile children.

(3) "Developmentally disabled" refers to a person who is disabled due to one or more of the following:

(a) Mental retardation as defined in WAC 275-27-020(1); or

(b) Cerebral palsy, epilepsy, autism, auditory impairment or visual impairment having the following additional characteristics:

(i) Originates before such person reaches age eighteen;

(ii) Has continued or can be expected to continue indefinitely; and

(iii) Constitutes a substantial handicap to such individual's ability to function normally in society.

(4) "Individual habilitation plan" is a plan of care developed by an interdisciplinary team delineating training goals, plans, implementation, responsibilities, initiation and completion times, and evaluation techniques formulated for the use of direct care and special service personnel in the training and habilitation of clients in IMR facilities. The IHP is a part of the resident's total plan of care.

(5) "Living unit" means a resident living unit that includes sleeping areas and may include dining and activity areas.

(6) "Medical plan of care" is reflected in the physician orders and should be a part of the individual habilitation plan.

(7) "Mobile nonambulatory" means unable to walk without assistance, but able to move from place to place with the use of a device such as a walker, crutches, a wheel chair, or a wheeled platform.

(8) "Nonambulatory" means unable to walk without assistance.

(9) "Nonmobile" means unable to move from place to place.

(10) "Nursing plan of care" is an integral part of the comprehensive individual habilitation plan.

(11) "Qualified mental retardation professional" means a person who has specialized training or one year of experience in treating or working with the mentally retarded and is one of the following:

(a) A psychologist with a master's degree from an accredited program.

(b) A licensed doctor of medicine or osteopathy.

(c) An educator with a degree in education from an accredited program. For the purposes of the MFCF program the educators training should also include special or early childhood studies.

(d) A social worker with a bachelor's degree in:

(i) Social work from an accredited program;

(ii) A field other than social work and at least three years of social work experience under the supervision of a qualified social worker; or

(iii) Pediatric medical social work experience or training.

(e) A physical or occupational therapist.

(f) A speech pathologist or audiologist.

(g) A registered nurse.

(h) A therapeutic recreation specialist who is a graduate of an accredited program.

(i) A rehabilitation counselor who is certified by the committee on rehabilitation counselor certification.

(12) "Resident living" means pertaining to residential services provided by a MFCF.

(13) "Total plan of care" is a term describing the entire resident record to include but not be limited to assessments and evaluations, medical and nursing orders, flow sheets, progress notes and the individual habilitation plan.

(14) "Training and habilitation services" means those intended to aid the intellectual, sensorimotor, and emotional development of a resident.

NEW SECTION

WAC 275-39-030 MEDICALLY FRAGILE CHILD. A medically fragile child is a person who is:

- (1) Under twenty-two years of age; and
- (2) Under the care of a physician and such physician has diagnosed the child's condition as sufficiently serious to warrant eligibility; and
- (3) Presently residing in, or in immediate jeopardy of residing in, a hospital or other residential medical facility for the purpose of receiving intensive support medical services; and
- (4) Have disabilities within one of the following four functional/medical definitional categories:
 - (a) Respiratory impaired; with an acquired or congenital defect of the oropharynx, trachea, bronchial tree, or lung requiring continuing dependency on a respiratory assistive device in order to allow the disease process to heal or the individual to grow to a sufficient size to live as a normal person;
 - (b) Respiratory with multiple physical impairments; with acquired or congenital defects of the central nervous system or multiple organ systems requiring continued dependency on a respiratory assistive device and/or other medical, surgical, and physical therapy treatments in order to allow the disease process to heal or the individual to gain sufficient size to permit surgical correction of the defect or the individual to grow large and strong enough and acquire sufficient skills in self-care to allow survival in a nonmedical/therapy intensive environment;
 - (c) Multiply physically impaired; with congenital or acquired defects of multiple systems and at least some central nervous system impairment that causes loss of urine and stool sphincter control as well as paralysis or loss or reduction of two or more extremities, forcing the individual to be dependent on a wheelchair or other total body mobility device, also requiring medical, surgical, and physical therapy intervention in order to allow the individual to grow to a size that permits surgical correction of the defects or allows the individual to grow large and strong enough and acquire sufficient skills in self-care to allow survival in a nonmedical/therapy intensive environment;
 - (d) Static encephalopathies; with severe brain insults of acquired or congenital origin causing the individual to be medically diagnosed as totally dependent for all bodily and social functions except cardiorespiratory so that the individual requires continuous long-term daily medical/nursing care.

NEW SECTION

WAC 275-39-035 INTENSIVE SUPPORT MEDICAL SERVICES. Intensive support medical services shall include but not be limited to a need for one or more of the following:

- (1) Medication requiring observation for effect.
- (2) Medications given IM or IV.
- (3) Observation and control of seizure disorder.

- (4) Supportive care during status epilepticus.
- (5) Respiratory therapy.
- (6) Oxygen – acute and unstable conditions.
- (7) Nasopharyngeal/Tracheal suctioning.
- (8) Tracheostomy care.
- (9) Gavage or gastrostomy feedings.
- (10) Skilled oral feeding techniques.
- (11) Immediate recognition and treatment of aspirations.
- (12) Electrolyte therapy/hydration.
- (13) Observation for shunt function and increased intracranial pressure.
- (14) Care of unrepaired myelomeningocele.
- (15) Maintenance of protective environment (immuno-suppressed).
- (16) Maintenance of normal body temperature.
- (17) Catheter insertions and sterile irrigations.
- (18) Special skin care.
- (19) Cleft lip and/or palate care.
- (20) Post-surgical nursing care.
- (21) Observations for acute conditions.
- (22) Sterile dressings; for example, such as might be required when a resident's body temperature regulatory devices are defective.
- (23) Heat – active treatment; for example, such as might be required when a resident's body temperature regulatory devices are defective.
- (24) Observation and care of demineralization fractures.
- (25) Rehabilitative nursing procedures.

NEW SECTION

WAC 275-39-040 PHILOSOPHY, OBJECTIVES, AND GOALS. (1) The MFCF shall have a written outline of the philosophy, objectives, and goals it is striving to achieve that includes, at least:

- (a) The MFCF's role in the state comprehensive program for the mentally retarded;
 - (b) The MFCF's goals for its residents; and
 - (c) The MFCF's concept of its relationship to the parents or legal guardians of its residents.
- (2) The outline shall be available for distribution to staff, consumer representatives, and the interested public.

NEW SECTION

WAC 275-39-045 POLICY AND PROCEDURE MANUALS. The MFCF shall have manuals that:

- (1) Describe the policies and procedures in the major operating units of the MFCF;
- (2) Are current, relevant, and available; and
- (3) Are complied with by the units.

NEW SECTION

WAC 275-39-050 GOVERNING BODY. (1) The MFCF shall have a governing body that:

- (a) Exercises general direction over the affairs of the MFCF;
- (b) Establishes policies concerning the operation of the MFCF and the welfare of the individuals it serves;

(c) Establishes qualifications for the chief executive officer in the following areas:

- (i) Education;
- (ii) Experience;
- (iii) Personal factors;
- (iv) Skills; and
- (d) Appoints the chief executive officer.

(2) The governing body may consist of one individual or a group.

NEW SECTION

WAC 275-39-055 CHIEF EXECUTIVE OFFICER. (1) The chief executive officer shall:

(a) Act for the governing body in the overall management of the MFCF; and

(b) Arrange for one individual to be responsible for the administrative direction of the MFCF at all times.

(2) If the MFCF is licensed as a nursing home, the chief executive officer shall be an individual licensed in the state as a nursing home administrator.

(3) If the MFCF is a hospital qualifying as an institution for the mentally retarded or persons with related conditions, the chief executive officer shall be a hospital administrator.

(4) Job titles for the chief executive officer may include any of the following: Superintendent, director, and administrator.

NEW SECTION

WAC 275-39-056 QUALIFIED MENTAL RETARDATION PROFESSIONAL. The MFCF shall have a qualified mental retardation professional who is responsible for:

(1) Supervising the delivery of each resident's individual plan of care;

(2) Supervising the delivery of training and habilitation services;

(3) Integrating the various aspects of the MFCF's program;

(4) Recording each resident's progress; and

(5) Initiating a monthly review of each individual plan of care for necessary changes.

NEW SECTION

WAC 275-39-060 ORGANIZATION CHART. The MFCF shall have an organization chart that shows:

(1) The major operating programs of the MFCF;

(2) The staff divisions of the MFCF;

(3) The administrative personnel in charge of the programs and divisions; and

(4) The lines of authority, responsibility, and communication for administrative personnel.

NEW SECTION

WAC 275-39-065 MANAGEMENT AUDIT PLAN. The MFCF shall have a plan for a continuing management audit to insure that the MFCF:

(1) Complies with state laws and regulations; and

(2) Effectively implements its policies and procedures.

NEW SECTION

WAC 275-39-070 RESEARCH STATEMENT. If the MFCF conducts research, it shall comply with the statement of assurance on research involving human subjects required by 45 CFR 46.104 through 46.108.

NEW SECTION

WAC 275-39-075 WRITTEN POLICIES. The MFCF shall:

(1) Have written personnel policies that are available to all employees;

(2) Make written job descriptions available for all positions; and

(3) Have written policies that prohibit employees with symptoms or signs of a communicable disease from being on duty.

NEW SECTION

WAC 275-39-080 LICENSURE AND PROFESSIONAL STANDARDS. The MFCF shall:

(1) Require the same licensure, certification, or standards for positions in the facility as are required for comparable positions in community practice; and

(2) Take into account in its personnel activities the ethical standards of professional conduct developed by professional societies.

NEW SECTION

WAC 275-39-085 SUSPENSION AND DISMISSAL. The MFCF shall have an authorized procedure, consistent with due process, for suspending or dismissing an employee.

NEW SECTION

WAC 275-39-090 SUFFICIENT STAFFING AND RESIDENT WORK. (1) The MFCF shall have a staff of sufficient size that the MFCF does not depend on residents or volunteers for services.

(2) The MFCF shall have a written policy to protect residents from exploitation if they engage in productive work.

NEW SECTION

WAC 275-39-100 STAFF TRAINING PROGRAM. (1) The MFCF shall have a staff training program, appropriate to the size and nature of the MFCF approved by the Washington state board of health, that includes:

(a) Orientation for each new employee to acquaint him/her with the philosophy, organization, program, practices, and goals of the MFCF;

(b) Inservice training for any employee who has not achieved the desired level of competence;

(c) Continuing inservice training for all employees to update and improve their skills; and

(d) Supervisory and management training for each employee who is in, or a candidate for, a supervisory position.

(2) The MFCF shall have someone designated to be responsible for staff development and training.

NEW SECTION

WAC 275-39-105 STAFF TREATMENT OF RESIDENTS. (1) The MFCF shall have written policies that prohibit mistreatment, neglect, or abuse of a resident by an employee of the MFCF.

(2) The MFCF shall insure that all alleged violations of these policies are reported immediately.

(3) The MFCF shall have evidence that:

(a) All violations are investigated thoroughly;

(b) The results of the investigation are reported to the chief executive or his designated representative within twenty-four hours of the report of the incident; and

(c) If the alleged violation is verified, the chief executive officer imposes an appropriate penalty.

(4) Each employee must read and sign a copy of the MFCF policies describing acceptable forms of care that prohibit mistreatment.

NEW SECTION

WAC 275-39-110 ADMISSION CRITERIA AND EVALUATIONS. (1) Except as provided in subsection (3) of this section, a MFCF may not admit an individual as a resident unless his/her needs can be met by the facility and an interdisciplinary professional team has determined that admission is the best available plan for that individual.

(2) The team shall:

(a) Conduct a comprehensive evaluation of the individual covering medical, physical, emotional, social, and cognitive factors; and

(b) Before the individual's admission:

(i) Define his/her need for service without regard to the availability of those services; and

(ii) Review all available and applicable programs of care, treatment, and training and record its findings.

(3) If admission is not the best plan but the individual shall be admitted nevertheless, the MFCF shall:

(a) Clearly acknowledge that the admission is inappropriate; and

(b) Initiate plans to actively explore alternatives.

(4) The interdisciplinary team will consist of:

(a) Qualified mental retardation professional or designate;

(b) Registered nurse from the MFCF;

(c) Direct care personnel;

(d) Parent(s), guardian, and/or resident;

(e) Physician.

(5) In addition the interdisciplinary team should include other professional consultants or staff appropriate to the individual such as:

(a) Pediatrician with training and/or experience with chronic pulmonary diseases of infancy and childhood if the child is ventilation dependent or respiratory fragile;

(b) A pediatrician with training and/or experience in rehabilitation medicine;

(c) A pediatrician with training and/or experience in neurology and/or seizures if the child has a neurologic disorder;

(d) Social worker;

(e) Therapists (occupational, respiratory, physical, speech) as appropriate;

(f) Educator;

(g) Registered dietician.

NEW SECTION

WAC 275-39-115 AVAILABILITY OF RULES AND PROCEDURES. The facility shall make available for distribution a summary of the laws, regulations, and procedures concerning admission, readmission, and release of a resident.

NEW SECTION

WAC 275-39-120 NUMBER OF RESIDENTS. The MFCF shall admit only that number of individuals that does not exceed:

(1) A capacity of sixteen residents; and

(2) Its capability to provide adequate programming.

NEW SECTION

WAC 275-39-125 REVIEW OF PREADMISSION EVALUATION. Within one week after admission, the interdisciplinary professional team shall:

(1) Review and update the preadmission evaluation with the participation of direct care personnel;

(2) Develop, with the participation of direct care personnel, a prognosis that can be used for programming and placement;

(3) Record the results of the evaluation in the resident's record kept in the living unit; and

(4) Write an interpretation of the evaluation in terms of specific actions to be taken for:

(a) The direct care personnel and the special services staff responsible for carrying out the resident's program; and

(b) The resident's parents or legal guardian.

NEW SECTION

WAC 275-39-130 QUARTERLY REVIEW OF RESIDENT'S STATUS. (1) All relevant personnel of the MFCF, including personnel in the living unit, shall jointly review the status of each resident at least quarterly and produce program recommendations through the interdisciplinary team process.

(2) This review shall include but not be limited to consideration of the following:

(a) The advisability of continued residence and alternative programs.

(b) When the resident legally becomes an adult:

(i) The need for guardianship; and

(ii) How the resident may exercise his/her civil and legal rights.

(c) Current health status of the individual resident.

NEW SECTION

WAC 275-39-135 RECORD AND REPORTS OF REVIEWS. The results of the reviews required shall be:

(1) Recorded in the resident's record kept in the living unit;

(2) Made available to personnel involved in the direct care of the resident;

(3) Interpreted to the resident's parents or legal guardian who are involved in planning and decision making; and

(4) Interpreted to the resident, when appropriate.

NEW SECTION

WAC 275-39-140 RELEASE FROM THE MFCF. (1) The MFCF shall establish procedures for counseling a parent or guardian who requests the release of a resident concerning the advantages and disadvantages of the release.

(2) Planning for release of a resident shall include providing for appropriate services in the resident's new environment, including protective supervision and other followup services.

(3) When a resident is permanently released, the MFCF shall prepare and place in the resident's record a summary of findings, progress, and plans and forward copies to concerned care providers in the new environment.

NEW SECTION

WAC 275-39-145 TRANSFER TO ANOTHER FACILITY. (1) Except as provided in subsection (2) of this section, the MFCF shall have in effect a transfer agreement with one or more hospitals sufficiently close by to make feasible the prompt transfer of the resident and his/her records to the hospital and to support a working arrangement between the MFCF and the hospital for providing inpatient hospital services to residents when needed.

(2) When a resident is transferred to another facility, the MFCF making the transfer shall:

(a) Record the reason for the transfer and a summary of findings, progress, and plans; and

(b) Except in an emergency, inform the resident and his parent or guardian in advance and obtain from the parent, guardian, or resident, as appropriate, written consent to the transfer.

NEW SECTION

WAC 275-39-150 EMERGENCIES OR DEATH OF A RESIDENT. (1) The MFCF shall notify promptly the resident's next of kin or guardian of any unusual occurrence concerning the resident, including serious illness, accident, or death.

(2) If any autopsy is performed after a resident's death:

(a) A qualified physician who has no conflict of interest or loyalty to the MFCF shall perform the autopsy; and

(b) The resident's family shall be told of the autopsy findings if they so desire by a qualified physician.

NEW SECTION

WAC 275-39-155 RESIDENT'S CIVIL RIGHTS. The MFCF shall have written policies and procedures that insure the civil rights of all residents.

NEW SECTION

WAC 275-39-160 RESIDENTS' BILL OF RIGHTS. The MFCF shall have written policies and procedures that insure the following rights for each resident:

(1) Information.

(a) Each resident and/or the resident's parent(s) or guardian, as appropriate, shall be fully informed, before or at admission, of his/her rights and responsibilities and of all rules governing resident conduct;

(b) If the MFCF amends its policies on residents' rights and responsibilities and its rules governing conduct, each resident and/or resident's parent or guardian, as appropriate, in the MFCF at that time shall be informed;

(c) Each resident and/or parent or guardian, as appropriate, shall acknowledge in writing receipt of the information and any amendments to it. A mentally retarded resident's written acknowledgement shall be witnessed by a third person;

(d) Each resident and/or parent or guardian, as appropriate, shall be fully informed in writing of all services available in the MFCF. The MFCF shall provide this information either before or at the time of admission and on a continuing basis as changes occur in services during the resident's stay.

(2) Medical condition and treatment.

(a) Each resident and/or parent or guardian, as appropriate, shall:

(i) Be fully informed by a physician of his health and medical condition unless the physician decides that informing the resident is medically contraindicated;

(ii) Be given the opportunity to participate in planning his/her total care and medical treatment;

(iii) Be given the opportunity to refuse treatment; and

(iv) Give informed, written consent before participating in experimental research;

(b) If the physician decides that informing the resident of his/her health and medical condition is medically contraindicated, he shall document this decision in the resident's record.

(3) Transfer and discharge. Each resident shall be transferred or discharged only for:

(a) Medical reasons;

(b) His/her welfare or that of the other residents.

(4) Exercising rights. Each resident shall be:

(a) Encouraged and assisted to exercise his/her rights as a resident of the MFCF and as a citizen; and

(b) Allowed to submit complaints or recommendations concerning the policies and services of the MFCF to staff or to outside representatives of the resident's choice or both, free from restraint, interference, coercion, discrimination, or reprisal.

(5) Financial affairs. Each resident shall be allowed to manage his/her personal financial affairs. If a resident requests assistance from the MFCF in managing his/her personal financial affairs:

(a) The request shall be in writing by the resident, parent or guardian; and

(b) The MFCF shall comply with the recordkeeping requirements of WAC 275-39-170(4), (5).

(6) Freedom from abuse and restraints.

(a) Each resident shall be free from mental and physical abuse;

(b) Each resident shall be free from chemical and physical restraints unless the restraints are:

(i) Authorized by a physician in writing for a specified period of time not to exceed eight hours;

(ii) Used in an emergency under the following conditions:

(A) The use is necessary to protect the resident from injuring himself/herself or others.

(B) The use is authorized by a professional staff member identified in the written policies and procedures of the facility as having authority to do so.

(C) The use is reported promptly to the resident's physician by that staff member; or

(iii) Used during a behavior modification session for a mentally retarded resident under the following conditions:

(A) The use is authorized in writing by a physician or a qualified mental retardation professional.

(B) The parent, legal guardian, and/or resident, as appropriate, gives his/her informed consent to the use of restraints or aversive stimuli.

(7) Privacy.

(a) Each resident shall be treated with consideration, respect, and full recognition of his/her dignity and individuality;

(b) Each resident shall be given privacy during treatment and care of personal needs;

(c) Each resident's records, including information in an automatic data bank, shall be treated confidentially;

(d) Each resident, parent or guardian shall give written consent before the MFCF may release information from his/her record to someone not otherwise authorized by law to receive it.

(8) Work. No resident may be required to perform services for the MFCF.

(9) Freedom of association and correspondence. Each resident shall be allowed to:

(a) Communicate, associate, and meet privately with individuals of his/her choice, unless this infringes on the rights of another resident; and

(b) Send and receive personal mail unopened.

(10) Activities. Each resident shall be allowed to participate in social, religious, and community group activities unless a qualified mental retardation professional:

(a) Determines that these activities are contraindicated for a mentally retarded resident; and

(b) Documents that determination in the resident's record.

(11) Personal possessions. Each resident shall be allowed to retain and use his/her personal possessions and clothing as space permits.

NEW SECTION

WAC 275-39-165 DELEGATION OF RIGHTS AND RESPONSIBILITIES. (1) The MFCF shall have written policies and procedures that provide that all rights and responsibilities of a resident pass to the resident's guardian, next of kin, or sponsoring agency or agencies, as appropriate, if the resident:

(a) Is adjudicated incompetent under state law; or

(b) Is determined by the interdisciplinary team to be incapable of understanding his/her rights and responsibilities.

(2) If the resident is determined to be incapable of understanding his/her rights and responsibilities, the interdisciplinary team that made the determination shall record the specific reason in the resident's record.

NEW SECTION

WAC 275-39-170 RESIDENT FINANCES. (1) The MFCF shall have written policies and procedures that protect the financial interests of each resident.

(2) If large sums accrue to a resident, the policies and procedures shall provide for appropriate protection of these funds and for counseling the resident concerning their use.

(3) Each resident shall be allowed to possess and use money in normal ways or be learning to do so.

(4) The MFCF shall maintain a current, written financial record for each resident that includes written receipts for:

(a) All personal possessions and funds received by or deposited with the MFCF; and

(b) All disbursements made to or for the resident.

(5) The financial record shall be available to the resident and his/her family.

NEW SECTION

WAC 275-39-175 STAFF-RESIDENT COMMUNICATIONS. The MFCF shall provide for effective staff, resident and parent or guardian participation and communication in the following manner.

(1) The MFCF shall establish appropriate standing committees including but not limited to human rights, research review, and infection.

(2) The committees shall meet regularly and include direct-care staff.

(3) Reports of staff meetings and standing and ad hoc committee meetings shall include recommendations and their implementation written in layman's terms; shared with the family; and filed.

NEW SECTION

WAC 275-39-180 COMMUNICATION WITH RESIDENTS AND PARENTS. (1) The MFCF shall have an active program of communication with the residents and their families or guardians that includes:

(a) Keeping residents' families or legal guardians informed of resident activities that may be of interest to them or of significant changes in the resident's condition;

(b) Answering communications from resident's relatives promptly and appropriately;

(c) Allowing close relatives and guardians to visit at any reasonable hour, without prior notice, unless the resident's needs limit visits;

(d) Allowing parents or guardians to visit any part of the MFCF that provides services to residents;

(e) Encouraging frequent and informal visits home by the residents within the social leave parameters prescribed in WAC 388-88-117 unless medically contraindicated; and

(f) Having rules that make it easy to arrange visits home.

(2) The MFCF shall insure that individuals allowed to visit the MFCF under subsection (1)(c) of this section do not infringe on the privacy and rights of the other residents.

NEW SECTION

WAC 275-39-185 DENTAL SERVICES—DIAGNOSTIC SERVICES. (1) The MFCF shall provide each resident with comprehensive diagnostic dental services that include a complete extraoral and intraoral examination, using all diagnostic aids necessary to properly evaluate the resident's oral condition, not later than one month after a resident's admission to the MFCF unless he/she received the examination within six months before admission.

(2) The MFCF shall review the results of the examination and enter them in the resident's record.

NEW SECTION

WAC 275-39-190 DENTAL SERVICES—TREATMENT. The MFCF shall provide each resident with comprehensive dental treatment that includes:

(1) Provision for emergency dental treatment on a twenty-four hour-a-day basis by a qualified dentist; and

(2) A system that assures that each resident is reexamined as needed but at least once a year.

NEW SECTION

WAC 275-39-195 DENTAL SERVICES—ORAL HEALTH EDUCATION AND TRAINING. The MFCF shall provide education and training in the maintenance of oral health that includes:

(1) A dental hygiene program that informs residents and all staff on nutrition and diet control measures and residents and living unit staff on proper oral hygiene methods; and

(2) Instruction of parents or guardians in the maintenance of proper oral hygiene in appropriate instances, for example when a resident leaves the MFCF.

NEW SECTION

WAC 275-39-200 DENTAL SERVICES—RECORDS. The MFCF shall:

(1) Keep a permanent dental record for each resident;

(2) Enter a summary dental progress report at stated intervals in each resident's record kept in the living unit;

(3) Provide a copy of the permanent dental record to any facility to which the resident is transferred.

NEW SECTION

WAC 275-39-205 DENTAL SERVICES—FORMAL ARRANGEMENTS. The MFCF shall have a

formal arrangement for providing each resident with the dental services required pursuant to WAC 275-39-185 through 275-39-210.

NEW SECTION

WAC 275-39-210 DENTAL SERVICES—STAFF. (1) The MFCF shall have enough qualified dental personnel and support staff to carry out the dental services program.

(2) Each dentist and dental hygienist providing services to the facility shall be licensed to practice in the state.

NEW SECTION

WAC 275-39-211 EDUCATIONAL SERVICES. The MFCF shall assist residents in participation in educational activities provided by the local school district as appropriate.

NEW SECTION

WAC 275-39-215 FOOD AND NUTRITION SERVICES—REQUIRED SERVICES. The MFCF food services should be under the direction of a registered dietician consultant and shall include:

- (1) Menu planning;
- (2) Initiating food orders or requisitions;
- (3) Establishing specifications for food purchases and insuring that the specifications are met;
- (4) Storing and handling food;
- (5) Preparing and serving food;
- (6) Maintaining sanitary standards in compliance with state and local regulations; and
- (7) Orienting, training, and supervising food service personnel.

NEW SECTION

WAC 275-39-220 FOOD AND NUTRITION SERVICES—DIET REQUIREMENTS. (1) The MFCF shall provide each resident with a nourishing, well-balanced diet.

- (2) Modified diets shall be:
 - (a) Prescribed by the resident's interdisciplinary team with a record of the prescription kept on file;
 - (b) Planned, prepared, and served by individuals who have received adequate instruction; and
 - (c) Periodically reviewed and adjusted as needed.

(3) The MFCF shall furnish a nourishing, well-balanced diet, in accordance with the recommended dietary allowances of the food and nutrition board of the National Research Council, National Academy of Sciences, adjusted for age, sex, activity, and disability, unless otherwise required by medical needs.

(4) A resident may not be denied a nutritionally adequate diet as a form of punishment.

NEW SECTION

WAC 275-39-225 FOOD AND NUTRITION SERVICES—MEAL SERVICE. (1) The MFCF must

serve at least three meals daily, at regular times comparable to normal mealtimes in the community but consistent with the resident's age and medical condition and with:

- (a) Not more than fourteen hours between a substantial evening meal and breakfast of the following day; and
 - (b) Not less than ten hours between breakfast and the evening meal of the same day.
- (2) Food shall be served:
- (a) In appropriate quantity;
 - (b) At appropriate temperature;
 - (c) In a form consistent with the developmental level of the resident; and
 - (d) With appropriate utensils.
- (3) Food served and uneaten shall be discarded.

NEW SECTION

WAC 275-39-230 FOOD AND NUTRITION SERVICES—MENUS. (1) Menus shall:

- (a) Be written in advance;
 - (b) Provide a variety of foods at each meal; and
 - (c) Be different for the same days of each week; adjusted for seasonal changes; and be age appropriate.
- (2) The MFCF shall keep on file, for at least two years, records of menus as served and of food purchased.

NEW SECTION

WAC 275-39-235 FOOD AND NUTRITION SERVICES—FOOD STORAGE. The MFCF shall store:

- (1) Dry or staple food items at least twelve inches above the floor, in a ventilated room not subject to sewage or waste water backflow or contamination by condensation, leakage, rodents or vermin; and
- (2) Perishable foods at proper temperatures to conserve nutritive values.

NEW SECTION

WAC 275-39-240 FOOD AND NUTRITION SERVICES—WORK AREAS. The MFCF shall:

- (1) Have effective procedures for cleaning all equipment and work areas; and
- (2) Provide handwashing facilities, including hot and cold water, soap, and paper towels adjacent to work areas.

NEW SECTION

WAC 275-39-245 FOOD AND NUTRITION SERVICES—DINING AREAS AND SERVICE. The MFCF shall:

- (1) Serve meals for all residents, including the mobile nonambulatory, in dining rooms, unless otherwise required for health reasons or by decision of the team responsible for the resident's program;
- (2) Provide table service for all residents who can and will eat at a table, including residents in wheelchairs;
- (3) Equip areas with table, chairs, eating utensils, and dishes designed to meet the developmental needs of each resident;

(4) Supervise and staff dining rooms adequately to direct self-help dining procedures and to assure that each resident receives enough food; and

(5) Dining area should be large enough to allow the children to eat together.

NEW SECTION

WAC 275-39-250 FOOD AND NUTRITION SERVICES—TRAINING OF RESIDENTS AND DIRECT-CARE STAFF. (1) The MFCF shall provide residents with systematic training to develop appropriate eating skills, using special eating equipment and utensils if it serves the developmental process.

(2) Direct-care staff shall be trained in and use proper feeding techniques.

(3) The MFCF shall insure that residents eat in an upright position unless medically contraindicated, and in a manner consistent with their developmental needs.

NEW SECTION

WAC 275-39-255 FOOD AND NUTRITION SERVICES—STAFF. (1) The MFCF shall have enough competent personnel to meet the food and nutrition needs of residents.

(2) A dietitian who directs food and nutrition services as a consultant to the MFCF shall meet the qualification requirements of WAC 275-39-260.

(3) The MFCF shall designate a staff member who is trained or experienced in food management or nutrition to direct food and nutrition services in their MFCF who shall meet the requirements of a food service supervisor in WAC 248-14-230.

NEW SECTION

WAC 275-39-260 FOOD AND NUTRITION SERVICES—DIETITIAN (QUALIFIED CONSULTANT). A person who:

(1) Is eligible for registration by the American dietetic association under its requirements in effect on January 17, 1974; or

(2) Has a baccalaureate degree with major studies in food and nutrition, dietetics, or food service management; has one year of supervisory experience in the dietetic service of a residential health care institution; and participates annually in continuing dietetic education.

NEW SECTION

WAC 275-39-265 MEDICAL SERVICES—REQUIRED SERVICES. The MFCF shall:

(1) Provide medical services through direct contact between physicians and residents and through contact between physicians and individuals working with the residents;

(2) Provide health services including treatment, medications, diet, and any other health service prescribed or planned for the resident twenty-four hours a day;

(3) Have available electroencephalographic services as needed;

(4) Have enough space, facilities, and equipment to fulfill the medical needs of residents;

(5) Provide evidence, such as utilization review committee records, that hospital and laboratory services are used in accordance with professional standards;

(6) Provide a pediatrician trained in or experienced in treatment of chronic lung disease of infancy and childhood when appropriate; a pediatrician trained in or experienced in rehabilitation medicine for infants and children when appropriate; who; and/or a pediatrician trained in or experienced in neurology when appropriate; who must:

(a) Participate in the interdisciplinary team process including but not limited to:

(i) Admission evaluation study, plan, and placement of the child at time of admission;

(ii) The continuing evaluation study and program design;

(iii) The development of a discharge plan;

(iv) The referral to appropriate community facilities;

(b) At least weekly participate in reevaluation of the type, extent and quality of services and programming;

(c) Consult with other physicians, nursing staff and respiratory therapy staff;

(d) Maintain clearly legible records for each resident;

(7) Provide emergency physicians or emergency room facilities and services and, if appropriate, such facilities and services shall be available within thirty minutes.

NEW SECTION

WAC 275-39-270 **MEDICAL SERVICES—GOALS AND EVALUATIONS.** (1) Physicians shall participate, when appropriate, in:

(a) The continuing interdisciplinary evaluation of individual residents for the purposes of beginning, monitoring, and following up on individualized habilitation programs; and

(b) The development for each resident of a detailed, written statement of:

(i) Case management goals for physical and mental health, education, and functional and social competence; and

(ii) A management plan detailing the various habilitation or rehabilitation services to achieve those goals, with clear designation of responsibility for implementation.

(2) The MFCF shall review and update the statement of treatment goals and management plans as needed, but at least quarterly, to insure:

(a) Continuing appropriateness of the goals;

(b) Consistency of management methods with the goals; and

(c) The achievement of progress toward the goals.

NEW SECTION

WAC 275-39-275 **MEDICAL SERVICES—ARRANGEMENTS WITH OUTSIDE RESOURCES.** The MFCF shall:

(1) Have a formal arrangement for providing each resident with medical care that includes care for medical emergencies on a twenty-four hour-a-day basis;

(2) Designate a physician, licensed to practice medicine in the state, to be responsible for maintaining the

general health conditions and practices of the MFCF; and

(3) Maintain effective arrangements, for residents to receive prompt medical and remedial services that they require but that the MFCF does not regularly provide.

NEW SECTION

WAC 275-39-280 **MEDICAL SERVICES—PREVENTIVE HEALTH SERVICES.** The MFCF shall have preventive health services for residents that include:

(1) Means for the prompt detection and referral of health problems, through adequate medical surveillance, periodic inspection, and regular medical examinations;

(2) Periodic, but not less than annual physical examinations that may include:

(a) Examination of vision, hearing and dentition;

(b) Screening laboratory examinations as determined necessary by the physician, and special studies when needed;

(3) Immunizations, using as a guide the recommendations of the public health service advisory committee on immunization practices and of the committee on the control of infectious diseases of the American Academy of Pediatrics;

(4) Tuberculosis control, appropriate to the MFCF population, in accordance with the recommendations of the American College of Chest Physicians or the section on diseases of the chest of the American Academy of Pediatrics or both;

(5) Reporting of communicable diseases and infections in accordance with law; and

(6) Nutritional assessment and recommendations for dietary supplementation based on individual and general needs.

NEW SECTION

WAC 275-39-285 **MEDICAL SERVICES—PHYSICIAN (QUALIFIED CONSULTANT).** A physician is a person who is licensed to practice medicine in the state of Washington, and:

(1) Has graduated from a four year school of medicine approved by the Liaison Committee for Education of the American Medical Association or of the American College of Osteopathy.

(2) If a pediatrician, is qualified by the American Board of Pediatrics, Inc., or has equivalent qualifications or experience and at least two years of experience in developmental pediatrics;

(3) If a pulmonary diseases expert, is qualified by American Board of Pediatrics, Inc., as a diplomate of the Subboard for Neonatology or has equivalent qualifications;

(4) If a physiatrist, is qualified by the American Board of Pediatrics, Inc., and the American Board of Rehabilitation Medicine, or:

(a) Is qualified by the American Board of Rehabilitation Medicine, Inc., and has at least two years experience in pediatric medicine or pediatric rehabilitation;

(b) Is qualified by the American Board of Pediatrics, Inc., and has at least two years experience in rehabilitation of children; or

(c) Has equivalent experience;

(5) If a neurologist, is qualified by the American Board of Neurologists and Psychiatry, Inc., or has equivalent experience and at least two years experience in pediatric neurology and management of seizure disorders.

NEW SECTION

WAC 275-39-290 NURSING SERVICES—REQUIRED SERVICES. The MFCF shall provide residents with nursing services, in accordance with their needs, that include, as appropriate, the following:

(1) Registered nurse participation in:

(a) Interdisciplinary team process including but not limited to:

(i) The admission evaluation study, plan, and placement of the resident at the time of admission;

(ii) The continuing evaluation study and program design;

(iii) The development of the discharge plan; and

(iv) The referral to appropriate community resources.

(b) At least weekly reevaluation of the type, extent, and quality of services and programming;

(c) Administration of and daily observation of the effects of seizure medications;

(d) Administration of and daily observation of the effects of cardiotropic and diuretic medications;

(e) Management and observation of seizures, apnea and cardiac arrest;

(f) Management of ventilated dependent children;

(g) Management of tracheostomies;

(h) Management of ventilated dependent children without the assistance of mechanical devices for a period of time up to thirty minutes in order to provide for interval care;

(i) Evaluation of neurological, pulmonary, nutritional and cardiac status, as well as, growth and development of children;

(j) Evaluation of common acute illnesses of children;

(k) Provision of well child care;

(l) Maintenance of clearly legible records for each child.

(2) Training in habits of personal hygiene, family life, and sex education that includes but is not limited to family planning and venereal disease counseling.

(3) Control of communicable diseases and infections through:

(a) Identification and assessment;

(b) Reporting to medical authorities;

(c) Implementation of appropriate protective and preventive measures;

(d) Development of a written nursing services plan for each resident as part of the total habilitation program; and

(e) Modification of the nursing plan, in terms of the resident's daily needs, at least semiannually or more frequently where needed, in accordance with developmental changes.

NEW SECTION

WAC 275-39-295 NURSING SERVICES—IN-SERVICE TRAINING. (1) A registered nurse with experience in pediatric pulmonary medicine, pediatric rehabilitation, occupational and physical therapy, respiratory therapy, and seizure disorders of children shall participate, as appropriate, in the planning and implementation of training of the MFCF's personnel.

(2) The MFCF shall have direct-care personnel trained in:

(a) Detecting signs of illness or dysfunction that warrant medical or nursing intervention;

(b) Basic skills required to meet the health needs and problems of the residents;

(c) First aid for accident or illness;

(d) Management and observation of seizures, apnea and cardiac arrest;

(e) Management of ventilators including tracheostomy care;

(f) Management of respiratory dependent children without mechanical assistance for up to thirty minutes (CPR certified); and

(g) Evaluation of neurological status, pulmonary status, general nutrition and growth and development including normal children illnesses.

NEW SECTION

WAC 275-39-300 NURSING SERVICES—STAFF. (1) The MFCF shall have available enough nursing staff, which may include currently licensed practical nurses and other supporting personnel, to carry out the various nursing services.

(2) The individual responsible for the delivery of nursing services shall have knowledge and experience in the field of developmental disabilities, pediatric medicine, acute pediatric care, ventilator management, sudden demise, chronic lung diseases of childhood, pediatric rehabilitation, and well child care.

(3) Nursing service personnel at all levels of experience and competence shall be:

(a) Assigned responsibilities in accordance with their qualifications. Medications must be administered and care of ventilated dependent infants and children must be provided by registered nurses only;

(b) Delegated authority commensurate with their responsibility; and

(c) Provided appropriate professional nursing supervision.

NEW SECTION

WAC 275-39-305 NURSING SERVICES—SUPERVISION OF HEALTH SERVICES. (1) The MFCF shall have a registered nurse to supervise the health services full time, seven days a week, on all shifts who shall have all the qualifications of a staff nurse as stated in WAC 275-39-315 and in addition shall have at least two years experience in acute care pediatric and developmental nursing.

(2) The MFCF shall have responsible staff members on duty and awake twenty-four hours a day to take

prompt, appropriate action in case of injury, illness, fire, or other emergency.

(3) The health services supervisor is responsible for developing, supervising the implementation of, reviewing, and revising a written health care plan for each resident that is:

(a) Developed and implemented according to the instructions of the attending or staff physician; and

(b) Reviewed and revised as needed but not less often than quarterly.

NEW SECTION

WAC 275-39-310 NURSING SERVICES—DIRECTOR OF NURSING SERVICES. The director of nursing services shall be a registered nurse who is licensed by the state of Washington, and has one year of additional education or experience in nursing service administration, as well as additional education or experience in pediatric, rehabilitative, pulmonary, and developmental nursing. The director of nursing must participate annually in continuing nursing education. The director of nursing shall also fulfill the requirements of a staff nurse, see WAC 275-39-315.

NEW SECTION

WAC 275-39-315 NURSING SERVICES—A STAFF NURSE. A staff nurse shall be a registered nurse licensed in the state of Washington and:

(1) A graduate of a nursing program certified by the American Nursing Association; or

(2) A graduate of a college of nursing with a baccalaureate degree approved by the American Nursing Association; and

(3) If in a MFCF, caring for ventilator or tracheostomy dependent children, the nurse must have an additional two years training or experience in the care of chronic lung disease of children; or

(4) If in any MFCF, caring for medically fragile children other than ventilator dependent children, the nurse must have training or equivalent experience of at least one year in:

(a) Infant and child development and well child care;

(b) Rehabilitation nursing of children;

(c) Pediatric CPR;

(d) Evaluation of and management of neurological disorders and seizures; and

(e) Nursing care of acute common illnesses of childhood.

NEW SECTION

WAC 275-39-320 PHARMACY SERVICES—REQUIRED SERVICES. The MFCF shall:

(1) Make formal arrangements for qualified pharmacy services, including provision for emergency service;

(2) Have a current pharmacy manual that:

(a) Includes policies and procedures and defines the functions and responsibilities relating to pharmacy services; and

(b) Is revised annually to keep abreast of current developments in services and management techniques;

(3) Have a formulary system consistent with DSHS policies approved by a responsible physician and pharmacist and other appropriate staff. Copies of the MFCF's formulary system and of the American Hospital Formulary Service shall be located and available in the facility;

(4) Modify all drugs, containers, and delivery vehicles to be appropriate for and safe from infants and children;

(5) Stock syrup of ipecac; and

(6) Post appropriate labels.

NEW SECTION

WAC 275-39-325 PHARMACY SERVICES—PHARMACIST. (1) Pharmacy services shall be provided under the direction of a qualified licensed pharmacist.

(2) The pharmacist shall:

(a) When a resident is admitted, obtain, if possible, a history of prescription and nonprescription drugs used and enter this information in the resident's record;

(b) Receive the original, or a direct copy, of the physician's drug treatment order;

(c) Maintain for each resident an individual record of all prescription and nonprescription medications dispensed, including quantities and frequency of refills;

(d) Participate, as appropriate, in the continuing interdisciplinary evaluation of individual residents for the purposes of beginning, monitoring, and following up on individualized habilitation programs; and

(e) Establish quality specifications consistent with DSHS policies for drug purchases and insure that they are met.

(3) A pharmacist or registered nurse shall weekly review the medication record of each resident for potential adverse reactions, allergies, interactions, contradictions, rationality and laboratory test modifications and advise the physician of any recommended changes with reasons and with an alternate drug regimen.

(4) As appropriate to the MFCF, the responsible pharmacist, physician, nurse, and other professional staff shall write policies and procedures that govern the safe administration and handling of all drugs. The following policies and procedures shall be included:

(a) There shall be a written policy governing the self administration of drugs, whether prescribed or not.

(b) The pharmacist or an individual under his supervision shall compound, package, label, and dispense drugs including samples and investigational drugs. Proper controls and records shall be kept of these processes.

(c) Each drug shall be identified up to the point of administration.

(d) Whenever possible, the pharmacist shall dispense drugs that require dosage measurements in a form ready to be administered to the resident.

(5) The pharmacist shall comply with all applicable regulations promulgated by the Washington State Board of Pharmacy, not otherwise stated above.

NEW SECTION

WAC 275-39-330 PHARMACY SERVICES—DRUGS AND MEDICATIONS. (1) A medication shall be used only by the resident for whom it is issued.

Only appropriately trained and licensed staff may administer drugs.

(2) Any drug that is discontinued or outdated and any container with a worn, illegible, or missing label shall be returned to the pharmacy for proper disposition.

(3) The MFCF shall have:

(a) An automatic stop order on all drugs, to include a notification system to the physician or nurse prior to discontinuance of any drug;

(b) A drug recall procedure that can be readily used;

(c) A procedure for reporting adverse drug reactions to the food and drug administration; and

(d) An emergency kit available to each living unit and appropriate to the needs of its residents and approved by the physician(s) in charge.

(4) Medication errors and drug reactions shall be recorded and reported immediately to the practitioner who ordered the drug.

NEW SECTION

WAC 275-39-335 PHARMACY SERVICES—DRUG STORAGE. The MFCF shall:

(1) Store drugs under proper conditions of sanitation, temperature, light, moisture, ventilation, segregation, and security;

(2) Store poisons, drugs used externally, and drugs taken internally on separate shelves in a locked or in separate locked cabinets at all locations;

(3) Keep medication that is stored in a refrigerator containing other items in a separate compartment with proper security;

(4) Keep all drugs under lock and key unless an authorized individual is in attendance;

(5) If there is a drug storeroom separate from the pharmacy, keep a perpetual inventory of receipts and issues of all drugs from that storeroom; and

(6) Meet the drug security requirements of federal and state laws that apply to storerooms, pharmacies, and living units.

NEW SECTION

WAC 275-39-340 PHYSICAL AND OCCUPATIONAL THERAPY SERVICES—REQUIRED SERVICES. (1) The MFCF shall provide physical and occupational therapy services through direct contact between therapists and residents and through contact between therapists and individuals involved with the residents.

(2) Physical and occupational therapy staff shall provide treatment training programs that are designed to:

(a) Preserve and improve abilities for independent function, such as range of motion, strength, tolerance, coordination, and activities of daily living; and

(b) Prevent, insofar as possible, irreducible or progressive disabilities through means such as the use of orthotic and prosthetic appliances, assistive and adaptive devices, positioning, behavior adaptations, and sensory stimulation.

(3) The therapist shall:

(a) Work closely with the resident's primary physician and with other medical specialists to include physiatrists,

orthopedists, neurologists, and experts in pulmonary disorders all with pediatric training or experience;

(b) Record regularly and evaluate quarterly the treatment training progress; and

(c) Use the treatment training progress as the basis for continuation or change in the resident's program.

(4) The therapist shall participate in:

(a) The interdisciplinary team process including but not limited to:

(i) Admission evaluation study and plan;

(ii) The continuing evaluation study, program design, and placement of the resident at the time of admission;

(iii) The development of a discharge plan;

(iv) The referral to appropriate community facilities;

(b) Staff training;

(c) At least weekly reevaluation of the type, extent and quality of services and programming, including but not limited to:

(i) Feeding;

(ii) Gross motor;

(iii) Fine motor;

(iv) Toilet training;

(v) Self-care skills, grooming, dressing, and mobility;

(d) Maintenance of clearly legible records for each resident.

NEW SECTION

WAC 275-39-345 PHYSICAL AND OCCUPATIONAL THERAPY SERVICES—RECORDS AND EVALUATIONS. The MFCF shall have evaluation results, treatment objectives, plans and procedures, and continuing observations of treatment progress:

(1) Recorded accurately, summarized, and communicated to all relevant parties;

(2) Used in evaluating progress; and

(3) Included in the resident's record kept in the living unit.

NEW SECTION

WAC 275-39-350 PHYSICAL AND OCCUPATIONAL THERAPY SERVICES—STAFF AND FACILITIES. (1) The MFCF shall have available enough qualified staff and support personnel to carry out the various physical and occupational therapy services in accordance with stated goals and objectives.

(2) Physical and occupational therapy personnel shall be:

(a) Assigned responsibilities in accordance with their qualifications;

(b) Delegated authority commensurate with their responsibilities; and

(c) Provided professional direction and consultation.

(3) Therapy assistants shall work under the supervision of a qualified therapist.

(4) Physical and occupational therapists and therapy assistants shall meet the qualification requirements of WAC 275-39-355 through 275-39-370.

(5) The MFCF shall provide enough space and equipment and supplies for efficient and effective physical and occupational therapy services.

NEW SECTION

WAC 275-39-355 PHYSICAL AND OCCUPATIONAL THERAPY SERVICES—OCCUPATIONAL THERAPIST (QUALIFIED CONSULTANT). An occupational therapist is a person who:

(1) Is a graduate of an occupational therapy curriculum accredited jointly by the Council on Medical Education of the American Medical Association and the American Occupational Therapy Association;

(2) Has two years of professional pediatric experience as an occupational therapist and is registered with the national association.

NEW SECTION

WAC 275-39-360 PHYSICAL AND OCCUPATIONAL THERAPY SERVICES—OCCUPATIONAL THERAPY ASSISTANT. An occupational therapy assistant is a person who:

(1) Has graduated from a certified occupational therapy assistant two-year college program accredited by the American Occupational Therapy Association or has an equivalent work experience to qualify for subsection (2) of this section according to the standards of the American Occupational Therapy Association; and

(2) Has two years of pediatric experience as an occupational therapy assistant.

NEW SECTION

WAC 275-39-365 PHYSICAL AND OCCUPATIONAL THERAPY SERVICES—PHYSICAL THERAPIST (QUALIFIED CONSULTANT). A physical therapist is a person who is licensed by the state of Washington as a physical therapist, and:

(1) Has graduated from a physical therapy curriculum approved by the American Physical Therapy Association, or by the Council on Medical Education and Hospitals of the American Medical Association, or jointly by the Council on Medical Education of the American Medical Association and the American Physical Therapy Association; or

(2) Prior to January 1, 1966, was admitted to membership by the American Physical Therapy Association, or was admitted to registration by the American Registry of Physical Therapists, or has graduated from a physical therapy curriculum in a four-year college or university; or

(3) Has two years of appropriate experience as a physical therapist, and has achieved a satisfactory grade on a proficiency examination approved by the secretary, except that such determinations of proficiency shall not apply with respect to persons initially licensed by the state or seeking qualification as a physical therapist after December 31, 1977; or

(4) Was licensed or registered prior to January 1, 1966, and prior to January 1, 1970, had fifteen years of full-time experience in the treatment of illness or injury through the practice of physical therapy in which services were rendered under the order and direction of attending and referring physicians; or

(5) If trained outside the United States, was graduated since 1928 from a physical therapy curriculum approved in the country in which the curriculum was located and in which there is a member organization of the World Confederation for Physical Therapy, meets the requirements for membership in a member organization of the World Confederation for Physical Therapy, has one year of experience under the supervision of an active member of the American Physical Therapy Association and has successfully completed a qualifying examination as prescribed by the American Physical Therapy Association; or

(6) Has at least one year experience in physical therapy with infants and children.

NEW SECTION

WAC 275-39-370 PHYSICAL AND OCCUPATIONAL THERAPY SERVICES—PHYSICAL THERAPIST ASSISTANT. A physical therapist assistant is a person who:

(1) Has graduated from a two-year college-level program approved by the American Physical Therapy Association; or

(2) Has two years of appropriate experience as a physical therapist assistant, and has achieved a satisfactory grade on a proficiency examination approved by the secretary, except that such determinations of proficiency shall not apply with respect to persons seeking initial qualification as a physical therapist assistant after December 31, 1977.

NEW SECTION

WAC 275-39-375 PSYCHOLOGICAL SERVICES—REQUIRED SERVICES. The MFCF shall:

(1) Provide psychological services through personal contact between psychologists and residents and through contact between psychologists and individuals involved with the residents;

(2) Have available enough qualified staff and support personnel to furnish the following psychological services based on need:

(a) Psychological services for residents, including evaluation, consultation, therapy, and program development;

(b) Administration and supervision of psychological services;

(c) Staff training;

(d) Maintain clearly legible records for each child;

(3) The psychologist shall when appropriate participate in the weekly reevaluation of the type, extent, and quality of services and programming.

NEW SECTION

WAC 275-39-380 PSYCHOLOGICAL SERVICES—PSYCHOLOGIST. Psychologists shall:

(1) Have at least a master's degree from an accredited program and experience or training in the field of mental retardation and early childhood development;

(2) Must be licensed as a psychologist or carry a certificate of qualification issued by the state of

Washington, department of licensing, professional licensing division;

(3) Participate, when appropriate, in the continuing interdisciplinary evaluation of each individual resident, for the purposes of beginning, monitoring, and following up on the resident's individualized habilitation program;

(4) Report and disseminate evaluation results in a manner that:

(a) Promptly provides information useful to staff working directly with the resident; and

(b) Maintains accepted standards of confidentiality;

(5) Participate, when appropriate, in the development of written, detailed, specific, and individualized habilitation program plans that:

(a) Provide for periodic review, followup, and updating; and

(b) Are designed to maximize each resident's development and acquisition of the following: Perceptual skills, sensorimotor skills, self-help skills, communication skills, social skills, self-direction, emotional stability, and effective use of time, including leisure time.

NEW SECTION

WAC 275-39-385 RECREATIONAL SERVICES—REQUIRED SERVICES. The MFCF shall:

(1) Coordinate recreational services with other services and programs provided to each resident, in order to:

(a) Make the fullest possible use of the MFCF's resources; and

(b) Maximize benefits to the residents.

(2) Design and construct or modify recreation areas and facilities so that all residents, regardless of their disabilities, have access to them; and

(3) Provide recreation equipment and supplies in a quantity and variety that is sufficient to carry out the stated objectives of the activities programs and are age appropriate.

NEW SECTION

WAC 275-39-390 RECREATIONAL SERVICES—RECORDS. The MFCF's resident records shall include:

(1) Periodic surveys of the residents' recreation interests; and

(2) The extent and level of the residents' participation in the recreation program.

NEW SECTION

WAC 275-39-395 RECREATIONAL SERVICES—STAFF. (1) The MFCF shall have enough qualified staff and support personnel available to carry out the various recreation services in accordance with stated goals and objectives.

(2) Staff conducting the recreation program shall have:

(a) A bachelor's degree in recreation;

(b) Demonstrated proficiency and experience of one year in conducting activities in one or more pediatric recreation program areas;

(c) Experience working with an interdisciplinary team.

NEW SECTION

WAC 275-39-400 RESIDENTIAL SERVICES—RESPONSIBILITIES OF LIVING UNIT STAFF. (1) The living unit staff shall make care and development of the residents their primary responsibility. This includes training each resident in the activities of daily living and in the development of self-help and social skills.

(2) The MFCF shall insure that the staff are not diverted from their primary responsibilities by excessive housekeeping or clerical duties or other activities not related to resident care.

(3) Members of the living unit staff from all shifts shall participate in appropriate activities relating to the care and development of the resident including, at least, referral, planning, initiation, coordination, implementation, follow-through, monitoring, and evaluation.

NEW SECTION

WAC 275-39-405 RESIDENTIAL SERVICES—RESIDENT EVALUATION AND PROGRAM PLANS. The MFCF shall have specific evaluation and program plans for each resident that are:

(1) Available to direct care staff in each living unit; and

(2) Reviewed by a member or members of an interdisciplinary professional team at least monthly with documentation of the review entered in the resident's record.

NEW SECTION

WAC 275-39-410 RESIDENTIAL SERVICES—RESIDENT ACTIVITIES. (1) The MFCF shall develop an activity schedule for each resident that:

(a) Does not allow periods of unscheduled activity to extend longer than two continuous hours;

(b) Allows free time for individual or group activities using appropriate materials, as specified by the program team; and

(c) Includes planned outdoor periods all year round.

(2) Each resident's activity schedule shall be available to direct care staff and be carried out daily.

(3) The MFCF shall insure that a multiple-handicapped or nonambulatory resident:

(a) Spends a major portion of the waking day out of bed;

(b) Spends a portion of the waking day out of his bedroom area;

(c) Has planned daily activity and exercise periods; and

(d) Moves around by various methods and devices whenever possible.

(4) The MFCF must record and evaluate behavior and seizure activity as indices of possible frustration associated with excess stimulation.

NEW SECTION

WAC 275-39-415 RESIDENTIAL SERVICES—PERSONAL POSSESSIONS. The MFCF shall allow the residents to have personal possessions such as toys, books, pictures, games, radios, arts and crafts materials, religious articles, toiletries, jewelry, and letters. Personal items that are potentially hazardous or inappropriate or illegal shall be disallowed by the program director.

NEW SECTION

WAC 275-39-420 RESIDENTIAL SERVICES—CONTROL AND DISCIPLINE OF RESIDENTS. (1) The MFCF shall have written policies and procedures for the control and discipline of residents that are available in each living unit and to parents and guardians.

(2) If appropriate, residents shall participate in formulating these policies and procedures.

(3) The MFCF may not allow:

- (a) Corporal punishment of a resident;
 - (b) A resident to discipline another resident, unless it is done as part of an organized self-government program conducted in accordance with written policy;
 - (c) A resident to be placed in seclusion, defined as placement in a locked room;
 - (d) Any disciplinary action that involves prohibition of any educational or social activity;
 - (e) Use of physical restraint as a punishment;
 - (f) Withholding or delaying adequate food or drink;
- or
- (g) Use of abusive language.

NEW SECTION

WAC 275-39-425 RESIDENTIAL SERVICES—PHYSICAL RESTRAINT OF RESIDENTS. (1) Except as provided for behavior modification programs in WAC 275-39-440, the MFCF may allow the use of physical restraint on a resident only if absolutely necessary to protect the resident from injuring himself/herself or others.

(2) The MFCF may not use physical restraint:

- (a) As punishment;
- (b) For the convenience of the staff; or
- (c) As a substitute for activities or treatment.

(3) The MFCF shall have a written policy that specifies:

- (a) How and when physical restraint may be used;
 - (b) The staff members who shall authorize its use; and
 - (c) The method for monitoring and controlling its use.
- (4) An order for physical restraint may not be in effect longer than eight hours.

(5) Appropriately trained staff shall check a resident placed in a physical restraint at least every thirty minutes and keep a record of these checks.

(6) A resident who is in a physical restraint shall be given an opportunity for motion and exercise for a period of not less than ten minutes during each two hours of restraint.

NEW SECTION

WAC 275-39-430 RESIDENTIAL SERVICES—MECHANICAL DEVICES USED FOR PHYSICAL RESTRAINT. (1) Mechanical devices used for physical restraint shall be designed and used in a way that causes the resident no physical injury and the least possible physical discomfort.

(2) A totally enclosed crib or a barred enclosure is a physical restraint.

(3) Mechanical supports used to achieve proper body position and balance are not physical restraints. However, mechanical supports shall be designed and applied:

- (a) Under the supervision of a qualified professional; and
- (b) In accordance with principles of good body alignment, concern for circulation, and allowance for change of position.

NEW SECTION

WAC 275-39-435 RESIDENTIAL SERVICES—CHEMICAL RESTRAINT OF RESIDENTS. The MFCF may not use chemical restraint:

- (1) Excessively;
- (2) As punishment;
- (3) For the convenience of the staff;
- (4) As a substitute for activities or treatment; or
- (5) In quantities that interfere with a resident's habilitation program.

NEW SECTION

WAC 275-39-440 RESIDENTIAL SERVICES—BEHAVIOR MODIFICATION PROGRAMS. (1) For purposes of this section:

(a) "Aversive stimuli" means things or events that the resident finds unpleasant or painful that are used to immediately discourage undesired behavior;

(b) "Time out" means a procedure designed to improve a resident's behavior by removing positive reinforcement when his/her behavior is undesirable.

(2) Behavior modification programs involving the use of aversive stimuli or time-out devices shall be:

(a) Reviewed and approved by the MFCF's human rights committee; facility committee on behavior therapy; and the qualified mental retardation professional;

(b) Conducted only with the consent of the affected resident's parents or legal guardian; and

(c) Described in written plans that are kept on file in the MFCF.

(3) A physical restraint used as a time-out device may be applied only during behavior modification exercises and only in the presence of the trainer.

(4) For time-out purposes, time-out devices, and aversive stimuli may not be used for longer than one hour, and then only during the behavior modification program and only under the supervision of the trainer.

NEW SECTION

WAC 275-39-445 RESIDENTIAL SERVICES—RESIDENT CLOTHING. The MFCF shall insure that each resident:

(1) Has enough neat, clean, suitable, and seasonable clothing which is age and size appropriate;

(2) Has his/her own clothing marked with his/her name when necessary;

(3) Is dressed daily in his/her own clothes unless this is contraindicated in written medical orders;

(4) Is trained and encouraged, as appropriate, to:

(a) Select his/her daily clothing;

(b) Dress himself or herself;

(c) Change his/her clothes to suit his/her activities; and

(5) Has storage space for his/her clothing that is accessible to him/her even if he/she is in a wheelchair.

NEW SECTION

WAC 275-39-450 RESIDENTIAL SERVICES—HEALTH, HYGIENE, GROOMING AND TOILET TRAINING. (1) Each resident shall be trained to be as independent as possible in daily health, hygiene, and grooming practices, including bathing, brushing teeth, shampooing, combing and brushing hair, shaving, and caring for toenails and fingernails.

(2) Each resident who does not eliminate appropriately and independently shall be in a regular, systematic toilet training program and a record shall be kept of his/her progress in the program.

(3) A resident who is incontinent shall be bathed or cleaned immediately upon voiding or soiling, unless specifically contraindicated by the training program, and all soiled items shall be changed.

(4) The MFCF shall establish procedures for:

(a) Weighing each resident monthly unless the special needs of the resident require more frequent weighing;

(b) Measuring the height of each resident every three months until the resident reaches the age of maximum growth;

(c) Maintaining weight and height records for each resident; and

(d) Insuring that each resident maintains a normal weight.

(5) At least every three days, a physician shall review orders prescribing bed rest or prohibiting a resident from being outdoors.

(6) The MFCF shall furnish, maintain in good repair, and encourage the use of dentures, eyeglasses, hearing aids, braces, and other aids prescribed for a resident by an appropriate specialist.

NEW SECTION

WAC 275-39-455 RESIDENTIAL SERVICES—GROUPING AND ORGANIZATION OF LIVING UNITS. (1) The MFCF may not house residents of grossly different ages, developmental levels, and social needs in close physical or social proximity unless the housing is planned to promote the growth and development of all those housed together.

(2) The MFCF may not segregate residents on the basis of their physical handicaps. It shall integrate residents who are mobile nonambulatory, deaf, blind, epileptic, and so forth with others of comparable social and intellectual development.

(3) The MFCF should segregate children with respiratory fragility and those with acute, contagious illnesses of childhood.

NEW SECTION

WAC 275-39-460 RESIDENTIAL SERVICES—RESIDENT LIVING STAFF. (1) Each resident living unit shall have sufficient, appropriately qualified, and adequately trained personnel who must be certified by the Washington state board of health or enrolled in a certified training program within twenty days of the commencement of employment to conduct the resident living program.

(2) The MFCF shall have an individual, whose training and experience is appropriate to the program, who is administratively responsible for resident living personnel.

(3) Each resident living unit, regardless of organization or design, shall have, as a minimum, overall staff-resident ratios (allowing for a five-day work week plus holiday, vacation, and sick time) as follows unless program needs justify otherwise:

For units serving children under the age of six years, severely and profoundly retarded, severely physically handicapped, or residents who are aggressive, assaultive, or security risks, or who manifest severely hyperactive or psychotic-like behavior, the overall ratio is 1 to 2.

NEW SECTION

WAC 275-39-465 RESIDENTIAL SERVICES—RESIDENT LIVING AREAS. The MFCF shall design and equip the resident living areas for the comfort and privacy of each resident.

NEW SECTION

WAC 275-39-470 RESIDENTIAL SERVICES—RESIDENT BEDROOMS—SPACE AND OCCUPANCY. Bedrooms shall:

(1) Be at or above street grade level;

(2) Be outside rooms;

(3) Be equipped with or located near adequate toilet and bathing facilities;

(4) Accommodate no more than four residents;

(5) Measure at least eighty square feet per resident in multiple resident bedrooms and at least one hundred square feet in single resident bedrooms;

(6) Measure at least one hundred square feet per resident for bedrooms housing ventilator dependent residents.

NEW SECTION

WAC 275-39-475 RESIDENTIAL SERVICES—RESIDENT BEDROOMS—FURNITURE AND BEDDING. The MFCF shall provide each resident with:

(1) A separate bed of proper size and height for the convenience of the resident;

(2) A clean, comfortable mattress;

(3) Bedding appropriate to the weather and climate; and

(4) Appropriate furniture, such as a chest of drawers, a table or desk, and an individual closet with clothes racks and shelves accessible to the resident.

NEW SECTION

WAC 275-39-480 RESIDENTIAL SERVICES—STORAGE SPACE IN LIVING UNITS. The MFCF shall provide:

- (1) Space for equipment for daily out-of-bed activity for all residents who are not yet mobile, except those who have a short-term illness or those few residents for whom out-of-bed activity is a threat to life;
- (2) Suitable storage space, accessible to the resident, for personal possessions, such as toys and prosthetic equipment; and
- (3) Adequate clean linen and dirty linen storage areas for each living unit.

NEW SECTION

WAC 275-39-485 RESIDENTIAL SERVICES—RESIDENT BATHROOMS. The MFCF shall:

- (1) Have toilet and bathing facilities appropriate in number, size, and design to meet the needs of the residents;
- (2) Provide for individual privacy in toilets, bathtubs, and showers;
- (3) Equip bathrooms and bathroom appliances for use by the physically handicapped; and
- (4) Control the temperature of the hot water at all taps to which residents have access, by using thermostatically controlled mixing valves or other means, so that the water does not exceed 110 degrees Fahrenheit.

NEW SECTION

WAC 275-39-490 RESIDENTIAL SERVICES—HEATING AND VENTILATION IN LIVING UNITS. (1) Each habitable room in the MFCF shall have:

- (a) At least one window;
 - (b) Direct outside ventilation by means of windows, louvers, air conditioning, or mechanical ventilation horizontally and vertically.
- (2) The MFCF shall:
- (a) Maintain the temperature and humidity within a normal comfort range by heating, air conditioning or other means; and
 - (b) Use a heating apparatus that does not constitute a burn hazard to residents.

NEW SECTION

WAC 275-39-495 RESIDENTIAL SERVICES—FLOORS IN LIVING UNITS. The MFCF shall have:

- (1) Floors that have a resilient, nonabrasive, and slip-resistant surface; and
- (2) Nonabrasive carpeting, if the living unit is carpeted and serves residents who crawl.

NEW SECTION

WAC 275-39-500 RESIDENTIAL SERVICES—EMERGENCY LIGHTING. If a living unit houses

more than fifteen residents, it must have emergency lighting with automatic switches for stairs and exits.

NEW SECTION

WAC 275-39-505 RESPIRATORY THERAPY SERVICES—RESPIRATORY THERAPIST (QUALIFIED CONSULTANT). A respiratory therapist is a person who:

- (1) Has graduated from a two year respiratory therapy school approved by the Council on Medical Education of the American Medical Association or has equivalent experience; and
- (2) Has at least one year experience with chronic respiratory problems of childhood.

NEW SECTION

WAC 275-39-510 TRAINING AND HABILITATION SERVICES—REQUIRED SERVICES. (1) The MFCF shall provide training and habilitation services to all residents, regardless of age, degree of retardation, or accompanying disabilities or handicaps.

- (2) Individual evaluations of residents shall:
 - (a) Be based upon the use of empirically reliable and valid instruments, whenever these instruments are available; and
 - (b) Provide the basis for prescribing an appropriate program of training experiences for the resident.
- (3) The MFCF shall have written training and habilitation objectives for each resident that are:
 - (a) Based upon complete and relevant diagnostic and prognostic data; and
 - (b) Stated in specific behavioral terms that permit the progress of each resident to be assessed.
- (4) The MFCF shall provide evidence of services designed to meet the training and habilitation objectives for each resident.
- (5) The training and habilitation staff shall:
 - (a) Maintain a functional training and habilitation record for each resident; and
 - (b) Provide training and habilitation services to residents with hearing, vision, perceptual, or motor impairments.

NEW SECTION

WAC 275-39-515 TRAINING AND HABILITATION SERVICES—STAFF. The MFCF shall have enough qualified training and habilitation personnel and support staff, supervised by a qualified mental retardation professional, to carry out the training and habilitation program.

NEW SECTION

WAC 275-39-520 TRAINING AND HABILITATION SERVICES—NEEDED SERVICES. In addition to the resident living services detailed in WAC 275-39-400 through 275-39-450, the MFCF shall provide professional and special programs and services to residents based upon their needs for these programs and services.

NEW SECTION

WAC 275-39-525 TRAINING AND HABILITATION SERVICES—AGREEMENTS WITH OUTSIDE RESOURCES. (1) If the MFCF does not employ a qualified professional to furnish a required institutional service, it shall have in effect a written agreement with a qualified professional outside the MFCF to furnish the required service.

(2) The agreement shall:

(a) Contain the responsibilities, functions, objectives, and other terms agreed to by the MFCF and the qualified professional; and

(b) Be signed by the administrator or his representative and by the qualified professional.

NEW SECTION

WAC 275-39-530 TRAINING AND HABILITATION SERVICES—QUALITY STANDARDS FOR OUTSIDE RESOURCES. (1) Programs and services provided by the MFCF or to the MFCF by outside agencies or individuals shall meet the standards for quality of services required in this subchapter.

(2) All contracts for these services shall state that these standards will be met.

NEW SECTION

WAC 275-39-535 TRAINING AND HABILITATION SERVICES—PLANNING AND EVALUATION. Interdisciplinary teams consisting of individuals representative of the professions or service areas that are relevant in each particular case, shall:

(1) Evaluate each resident's needs;

(2) Plan an individualized habilitation program which may include divisions for medical care and educational training to meet each resident's identified needs; and

(3) At least every three months or as specified in individual habilitation plan review each resident's responses to his/her program and revise the program accordingly.

NEW SECTION

WAC 275-39-545 SPEECH PATHOLOGY AND AUDIOLOGY SERVICES—REQUIRED SERVICES. (1) The MFCF shall provide speech pathology and audiology services through direct contact between speech pathologists and audiologists and residents, and working with other personnel, including but not limited to teachers and direct-care staff.

(2) Speech pathology and audiology services available to the MFCF shall include:

(a) Screening and evaluation of residents with respect to speech and hearing functions;

(b) Comprehensive audiological assessment of residents, as indicated by screening results, that include tests of puretone air and bone conduction, speech audiometry, and other procedures, as necessary, and the assessment of the use of visual cues;

(c) Assessment of the use of amplification;

(d) Provision for procurement, maintenance, and replacement of hearing aids, as specified by a qualified audiologist;

(e) Comprehensive speech and language evaluation of residents, as indicated by screening results, including appraisal of articulation, voice, rhythm, and language;

(f) Participation in the continuing interdisciplinary evaluation of individual residents for purposes of beginning, monitoring, and following up on individualized habilitation programs;

(g) Treatment services as an extension of the evaluation process, that include:

(i) Direct counseling with residents;

(ii) Consultation with appropriate staff for speech improvement and speech education activities; and

(iii) Work with appropriate staff to develop specialized programs for developing each resident's communication skills in comprehension, including speech, reading, auditory training, and hearing aid utilization, and skills in expression, including improvement in articulation, voice, rhythm, and language; and

(h) Participation in inservice training programs for direct-care and other staff.

(3) Maintenance of clearly legible records for each child.

(4) The MFCF must demonstrate that speech pathology and audiology services are being provided as part of their program or initiate a contract with qualified outside services.

NEW SECTION

WAC 275-39-550 SPEECH PATHOLOGY AND AUDIOLOGY SERVICES—EVALUATIONS AND ASSESSMENTS. (1) Speech pathologists and audiologists shall accurately and systematically report evaluation and assessment results in order to:

(a) Provide information, when appropriate, that is useful to other staff working directly with the resident; and

(b) Include evaluative and summary reports in the resident's record kept in the living unit.

(2) Continuing observations of treatment progress shall be:

(a) Recorded accurately, summarized, and communicated; and

(b) Used in evaluating progress.

NEW SECTION

WAC 275-39-555 SPEECH PATHOLOGY AND AUDIOLOGY SERVICES—STAFF AND FACILITIES. (1) The MFCF shall have available enough qualified staff and support personnel to carry out the various speech pathology and audiology services, in accordance with stated goals and objectives.

(2) Staff who assume independent responsibilities for clinical services shall meet the qualification requirements of this chapter.

(3) The MFCF shall provide adequate, direct, and continuing supervision to personnel, volunteers, or support personnel used in providing clinical services.

(4) The MFCF shall have enough space, equipment, and supplies to provide efficient and effective speech pathology and audiology services.

NEW SECTION

WAC 275-39-560 SPEECH PATHOLOGY AND AUDIOLOGY SERVICES—SPEECH PATHOLOGIST OR AUDIOLOGIST (QUALIFIED CONSULTANT). A speech pathologist or audiologist is a person who:

(1) Is eligible for a certificate of clinical competence in the appropriate area (speech pathology or audiology) granted by the American Speech and Hearing Association under its requirements in effect on the publication of this provision; or

(2) Meets the educational requirements for certification, and is in the process of accumulating the supervised experience required for certification.

NEW SECTION

WAC 275-39-565 SOCIAL SERVICES—REQUIRED SERVICES. The MFCF shall provide, as part of an interdisciplinary set of services, social services to each resident directed toward:

(1) Maximizing the social functioning of each resident;

(2) Enhancing the coping capacity of each resident's family;

(3) Asserting and safeguarding the human and civil rights of the residents and their families;

(4) Fostering the human dignity and personal worth of each resident;

(5) Assisting the resident and family with the stress of severe illness, death, and dying; and

(6) Assisting the resident and family with finding services in the community.

NEW SECTION

WAC 275-39-570 SOCIAL SERVICES—SOCIAL WORKERS. (1) During the evaluation process to determine whether or not admission to the MFCF is necessary, social workers shall help the resident and his/her family:

(a) Consider alternative services, based on the resident's status and important family and community factors; and

(b) Make a responsible choice as to whether and when residential placement is indicated.

(2) Social workers shall participate, when appropriate, in the continuing interdisciplinary evaluation of individual residents for the purposes of beginning, monitoring, and following up on individualized habilitation programs.

(3) During the resident's admission to, and residence in the facility or while he/she is receiving services from the facility, social workers shall as appropriate, provide liaison between him/her, the MFCF, the family, and the community, in order to:

(a) Help the staff:

(i) Individualize and understand the needs of the resident and his/her family in relation to each other;

(ii) Understand social factors in the resident's day-to-day behavior, including staff-resident relationships; and

(iii) Prepare the resident for changes in his/her living situation;

(b) Help the family develop constructive and personally meaningful ways to support the resident's experience in the MFCF through:

(i) Counseling concerning the problems of changes in family structure and functioning; and

(ii) Referral to specific services, as appropriate; and

(c) Help the family participate in planning for the resident's return to home or other community placement.

(4) After the resident leaves the MFCF, social workers must provide systematic followup to assure referral to appropriate community agencies.

(5) The MFCF shall have available enough qualified staff and support personnel to carry out the various social services activities.

(6) Social workers providing service to the MFCF shall meet the qualification requirements of WAC 275-39-575.

(7) Social work assistants or aides employed by the MFCF shall be supervised by a social worker.

NEW SECTION

WAC 275-39-575 SOCIAL SERVICES—SOCIAL WORKER (QUALIFIED CONSULTANT). A social worker is a person who has a master's degree from a school of social work accredited or approved by the Council on Social Work Education, and has two years of social work experience in a health care setting with experience in counseling families involved with terminal illnesses.

NEW SECTION

WAC 275-39-580 RECORDS—MAINTENANCE OF RESIDENT RECORDS. (1) The MFCF shall maintain a record for each resident that is adequate for:

(a) Planning and continuous evaluation of the resident's habilitation program;

(b) Furnishing documentary evidence of each resident's progress and response to his/her habilitation program; and

(c) Protecting the legal rights of the residents, the MFCF, and the staff.

(2) Any individual who makes an entry in a resident's record shall make it legibly, date it, sign it, and include his job title and professional capacity.

(3) The MFCF shall provide a legend to explain any symbol or abbreviation used in a resident's record.

NEW SECTION

WAC 275-39-585 RECORDS—ADMISSION RECORDS. At the time a resident is admitted, the MFCF shall enter in the individual's record the following information:

(1) Name, date of admission, birth date and place, citizenship status, marital status, and social security number.

(2) Father's name and birthplace, mother's maiden name and birthplace, and parents' marital status.

(3) Name and address of parents, legal guardian, and next of kin if needed.

(4) Sex, race, height, weight, color of hair, color of eyes, identifying marks, and recent photograph.

(5) Reason for admission or referral problem.

(6) type and legal status of admission.

(7) Legal competency status.

(8) Language spoken or understood.

(9) Sources of support, including social security, veterans' benefits, and insurance.

(10) Religious affiliation, if any.

(11) Reports of the preadmission evaluations.

(12) Reports of previous histories and evaluations, if any.

NEW SECTION

WAC 275-39-590 RECORDS—RECORD ENTRIES DURING RESIDENCE. (1) Within one week after the admission of each resident, the MFCF shall enter in the resident's record:

(a) A report of the review and updating of the preadmission evaluation;

(b) A prognosis that can be used for programming and placement; and

(c) A comprehensive evaluation and individual habilitation plan, designed by an interdisciplinary team.

(2) The MFCF shall enter the following information in a resident's record during his residence:

(a) Reports of accidents, seizures, illnesses, and treatments for these conditions;

(b) Records of immunizations;

(c) Records of all periods that restraints were used, with justification and authorization for each;

(d) Reports of regular, at least quarterly, review and evaluation of the program, developmental progress, and status of each resident;

(e) Enough observations of the resident's response to his program to enable evaluation of its effectiveness;

(f) Records of significant behavior incidents;

(g) Records of family visits and contacts;

(h) Records of attendance and absences;

(i) Correspondence pertaining to the resident;

(j) Periodic updates of the information recorded at the time of admission;

(k) Appropriate authorizations and consents;

(l) Pertinent medical information including laboratory data.

(3) The MFCF shall enter a discharge summary in the resident's record at the time he is discharged.

NEW SECTION

WAC 275-39-595 RECORDS—CONFIDENTIALITY. (1) The MFCF shall keep confidential all information contained in a resident's records, including information contained in an automated data bank.

(2) The record is the property of the MFCF which shall protect it from loss, damage, tampering, or use by unauthorized individuals.

(3) The MFCF shall have written policies governing access to, duplication of, and release of information from the record.

(4) The MFCF shall obtain written consent of the resident, if competent, or his guardian before it releases information to individuals not otherwise authorized to receive it.

NEW SECTION

WAC 275-39-600 RECORDS—CENTRAL RECORD SERVICE. The MFCF shall:

(1) Maintain an organized central record service for the collection and release of resident information;

(2) Make records readily accessible to authorized personnel if a centralized system is used;

(3) Have appropriate records available in the resident living units;

(4) Have a master alphabetical index of all residents admitted to the MFCF; and

(5) Retain records for a period consistent with the federal Department of Health and Human Services regulations and the statute of limitations of the state of Washington.

NEW SECTION

WAC 275-39-605 RECORDS—STAFF AND FACILITIES. The MFCF shall have:

(1) Enough qualified staff and support personnel to accurately process, check, index, file, and retrieve records and record data promptly; and

(2) Adequate space, equipment, and supplies to provide efficient and effective record services.

NEW SECTION

WAC 275-39-610 FACILITY SUPPORT SERVICES—ADMINISTRATIVE SUPPORT SERVICES. (1) The MFCF shall provide adequate, modern administrative support to efficiently meet the needs of residents and facilitate attainment of the MFCF's goals and objectives.

(2) The MFCF shall:

(a) Document its purchasing process;

(b) Adequately operate its inventory control system and stockroom;

(c) Have appropriate storage facilities for all supplies and surplus equipment; and

(d) Have enough trained and experienced personnel to do purchase, supply, and property control functions.

NEW SECTION

WAC 275-39-615 FACILITY SUPPORT SERVICES—COMMUNICATION SYSTEM. The MFCF shall have an adequate communication system, including telephone service, that insures:

(1) Prompt contact of on duty personnel; and

(2) Prompt notification of responsible personnel in an emergency.

NEW SECTION

WAC 275-39-620 FACILITY SUPPORT SERVICES—ENGINEERING AND MAINTENANCE. The MFCF shall have:

- (1) An appropriate, written preventive maintenance program; and
- (2) Enough trained and experienced personnel for engineering and maintenance functions.

NEW SECTION

WAC 275-39-625 FACILITY SUPPORT SERVICES—LAUNDRY SERVICES. The MFCF shall manage its laundry services so that it meets daily clothing and linen needs without delay.

NEW SECTION

WAC 275-39-630 FACILITY REQUIREMENTS—EQUIPMENT. The MFCF shall have equipment appropriate to the needs of the residents including but not limited to:

- (1) Ventilatory dependent children:
 - (a) Either piped in oxygen and compressed air or an additional thirty-six square feet per child with oxygen and compressed air tanks with a safe storage area for a supply of used and unused tanks safe from child access;
 - (b) Portable O₂ and compressed air tanks;
 - (c) Appropriate, physician ordered respiratory equipment and attachments (humidifier, flow meters, disconnecter line, compressor and tubing);
 - (d) Suction apparatus;
 - (e) Emergency respiratory resuscitation tray;
 - (f) Individual bag and mask for changing;
 - (g) Cardiac monitor.
- (2) Tracheostomy dependent children:
 - (a) Tracheostomy tubes, two spares;
 - (b) Tracheostomy collar;
 - (c) Tracheostomy ties;
 - (d) Suction apparatus;
 - (e) Saline and gloves;
 - (f) Dressing, creams and hydrogen peroxide;
 - (g) Cardiac monitor.
- (3) The physically handicapped:
 - (a) Mobility device (wheelchair or stretcher);
 - (b) Braces and crutches;
 - (c) Parallel bars;
 - (d) Mats;
 - (e) Tumbling ball;
 - (f) Set of stairs with railing.
- (4) All children:
 - (a) Toys of age appropriate;
 - (b) High chairs;
 - (c) Play pens;
 - (d) Scooters;
 - (e) Walkers;
 - (f) Infant seats;
 - (g) Jonny Jump ups;
 - (h) Wagons;
 - (i) Self-propelled tricycles, scooters, etc.;
 - (j) Radio, music devices, and television sets.

NEW SECTION

WAC 275-39-635 SAFETY AND SANITATION—EMERGENCY PLAN AND PROCEDURES.

(1) The MFCF shall have a written staff organization plan and detailed written procedures to meet all potential emergencies and disasters such as fire, severe weather, and missing residents.

(2) The MFCF shall:

- (a) Clearly communicate and periodically review the plan and procedures with the staff; and
- (b) Post the plan and procedures at suitable locations through the facility.

NEW SECTION

WAC 275-39-640 SAFETY AND SANITATION—EVACUATION DRILLS. (1) The MFCF shall hold evacuation drills at least quarterly for each shift of personnel and under varied conditions to:

- (a) Insure that all personnel on all shifts are trained to perform assigned tasks;
- (b) Insure that all personnel on all shifts are familiar with the use of the MFCF's firefighting equipment; and
- (c) Evaluate the effectiveness of emergency and disaster plans and procedures.

(2) The MFCF shall:

- (a) Actually evacuate residents to safe areas during at least one evacuation drill each year, on each shift;
- (b) Make special provisions for the evacuation of the physically handicapped, such as fire chutes and mattress loops with poles;
- (c) Write and file a report and evaluation of each evacuation drill;
- (d) Investigate all accidents and take corrective action to prevent similar accidents in the future; and
- (e) For evacuation drills including use of motor vehicles for transportation, the motor vehicle must be equipped with suitable passenger restraints to be used by the residents to reduce the possibility of injury from a motor vehicle accident or sudden stop.

NEW SECTION

WAC 275-39-645 SAFETY AND SANITATION—FIRE PROTECTION. Except as provided in WAC 275-39-655, all Medically Fragile Children's Facilities shall conform to the rules and regulations adopted by the Washington state fire marshall for nursing homes, chapter 212-32 WAC, or hospitals, chapter 212-28 WAC, as appropriate, establishing minimum standards for the prevention of fire and for the protection of life and property against fire.

NEW SECTION

WAC 275-39-655 SAFETY AND SANITATION—FIRE PROTECTION WAIVERS. (1) The state survey agency may waive specific provisions of the life safety code required by WAC 275-39-645, for as long as it considers appropriate, if:

- (a) The waiver would not adversely affect the health and safety of the residents;

(b) Rigid application of specific provisions would result in unreasonable hardship for the MFCF as determined under guidelines contained in the HCFA long-term care manual; and

(c) The waiver is granted in accordance with criteria contained in the long-term care manual.

(2) If a state agency waives provisions of the code for an existing building of two or more stories that is not built of at least two-hour fire-resistive construction, the MFCF may not house a blind, nonambulatory, or physically handicapped resident above the street-level floor unless it is built of:

(a) One-hour protected, noncombustible construction as defined in National Fire Protection Association Standard No. 220;

(b) Full sprinklered, one-hour protected, ordinary construction;

(c) Full sprinklered, one-hour protected, wood frame construction.

NEW SECTION

WAC 275-39-660 SAFETY AND SANITATION—PAINT. The MFCF shall:

- (1) Use lead-free paint inside the facility; and
- (2) Remove or cover old paint or plaster containing lead so that it is not accessible to residents.

NEW SECTION

WAC 275-39-665 SAFETY AND SANITATION—BUILDING ACCESSIBILITY AND USE.

(1) The MFCF shall:

(a) Be accessible to and usable by all residents, personnel, and the public, including individuals with disabilities; and

(b) Meet the requirements of American National Standards Institute (ANSI) Standard No. A117.1 (1961), (reaffirmed 1971) American Standard Specifications and the Washington State Building Code, chapter 19.27 RCW, chapter 96, Laws of 1974 as amended by chapter 110, Laws of 1975, for making buildings and facilities accessible to and usable by the physically handicapped.

(2) The state survey agency may waive, for as long as it considers appropriate, specific provisions of ANSI Standard No. A117.1 (1961), (reaffirmed 1971) if:

(a) The provision would result in unreasonable hardship on the MFCF if strictly enforced; and

(b) The waiver does not adversely affect the health and safety of the residents.

NEW SECTION

WAC 275-39-670 SAFETY AND SANITATION—SANITATION RECORDS AND REPORTS.

The MFCF shall keep:

(1) Records that document compliance with the sanitation, health, and environmental safety codes of the state or local authorities having primary jurisdiction over the MFCF; and

(2) Written reports of inspections by state or local health authorities, and records of action taken on their recommendations.

NEW SECTION

WAC 275-39-675 SAFETY AND SANITATION—HEALTH AND SAFETY LAWS. The MFCF shall meet all federal, state, and local laws, regulations and codes pertaining to health and safety, such as provisions regulating:

(1) Buying, dispensing, safeguarding, administering, and disposing of medications and controlled substances;

(2) Construction, maintenance, and equipment for the MFCF;

(3) Sanitation;

(4) Communicable and reportable diseases; and

(5) Post-mortem procedures.

WSR 80-15-084

PROPOSED RULES

INSURANCE COMMISSIONER

[Filed October 21, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025 and 48.02.060, that the Insurance Commissioner intends to adopt, amend, or repeal rules concerning recodifying regulations dealing with surplus line insurance and updating regulations pertinent to surplus line brokers. The conditions that must be met by an applicant prior to taking the surplus line broker's examination are defined. The regulation explains the trust account requirements for alien surplus line insurance companies and how surplus line brokers can request information. The regulation also clarifies the position of the commissioner concerning maintaining an office in the state of Washington and the restriction for not licensing nonresident surplus line brokers;

that such agency will at 10:00 a.m., Thursday, December 11, 1980, in the Insurance Commissioner's Office, Modular Office Building, Airdustrial Park, Tumwater, Washington, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 10:00 a.m., Tuesday, December 16, 1980, in the Insurance Commissioner's Office, Modular Office Building, Airdustrial Park, Tumwater, Washington.

The authority under which these rules are proposed is RCW 48.02.060 and 48.15.090.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to December 9, 1980, and/or orally at 10:00 a.m., Thursday, December 11, 1980, Insurance Commissioner's Office, Modular Office Building, Airdustrial Park, Tumwater, Washington.

Dated: October 21, 1980

By: Robert M. Higley
Deputy Commissioner

STATEMENT OF PURPOSE

The purpose of the attached rule is to create a new Washington Administrative Code chapter 284-15 WAC, titled Surplus Line Insurance, which will be used to clarify the statutes governing the same subject. The rules

prescribe the commissioner's regulations for surplus line brokers and records that they are to maintain.

RCW 48.15.070 permits the commissioner to issue a surplus line broker's license to any person he deems to be competent and trustworthy and while maintaining an office at a designated location in the state. This rule will describe the commissioner's position on determining the competency (RCW 48.15.010) and will clarify the issue of maintaining an office in the state of Washington (RCW 48.15.030).

For many years, the surplus line broker took a simple test on the Washington insurance code, which was the only test of competency. It has been found that surplus line brokers need to be tested on not only the code but the overall operation of the surplus line insurance marketplace. WAC 284-15-010 is a complete rewrite of WAC 284-12-025 which covered the same subject.

The licensed insurance agent sells insurance to the consumers of our state for the companies he represents. The companies' rates and forms are submitted to the commissioner and approved prior to their use. The companies he represents are examined every three years by various insurance department examiners testing for solvency and proper insurance practices.

The casualty-property broker represents companies whose rates and forms are filed with and approved by the commissioner. The companies he or she uses are examined by various insurance department examiners every three years. The principal difference between the broker and the agent is that the broker may represent the consumer instead of representing only the company.

A surplus line broker deals in an entirely different environment than either the licensed agent or the licensed casualty-property broker. The surplus line broker must determine that a good faith diligent effort was made to place the coverage with an authorized insurer and, if it could not be placed with an authorized insurer, he may then look to unauthorized insurers commonly referred to as surplus line, to place the coverage (RCW 48.15.040). A surplus line broker must be able to evaluate the financial strength of an unauthorized insurer before he places the insurance with that company. Because of the complexity of this process, the commissioner concludes the regulation defining the experience requirements and procedures in WAC 284-15-010 will clarify to interested persons how to comply with the statute RCW 48.15.070.

In the 1980 session, the legislature changed the minimum financial reserves required for a company to do business in this state. This change also affected the financial requirements for unauthorized insurers that surplus line brokers may use in accordance with RCW 48.15.090. WAC 284-15-020 clarifies the \$1,500,000 capital and \$1,500,000 surplus required for unauthorized insurers and \$1,500,000 required to be on deposit in the United States for the benefit of United States policyholders by alien insurers.

The regulation will also explain how the National Association of Insurance Commissioner (NAIC) Quarterly Listing of Alien Insurers may be used by surplus line brokers as evidence of the financial condition of the carriers listed.

WAC 284-15-030 clarifies the commissioner's interpretation of the statutory requirements for maintaining an office, including records that must be available for his audit. This section in the administrative code also clarifies why the commissioner will not issue a nonresident surplus line brokers' license.

Two sections of chapter 284-11 WAC are repealed by this administrative procedure, WAC 284-12-027 and 284-12-028, which are recodified in the surplus line chapter as WAC 284-15-050 and 284-15-040. This is being done to improve the numbering system of Title 284 WAC, and locates all of the surplus line regulations in one chapter.

This rule is proposed and prepared under the supervision of David H. Rodgers, Chief Deputy Insurance Commissioner, (206) 753-7302, Insurance Building, Olympia, Washington 98504, and will be implemented by Robert M. Higley, Deputy Insurance Commissioner, (206) 753-2408, Insurance Building, Olympia, Washington 98504.

The insurance commissioner's statutory authority for the adoption of this rule is RCW 48.02.060 which permits the adoption of reasonable rules and regulations for effectuating provisions of the insurance code. The specific statutes which are implemented are RCW 48.15-.040, 48.15.070, 48.15.090, 48.15.100 and 48.15.150.

Chapter 284-15 WAC
SURPLUS LINE INSURANCE

NEW SECTION

WAC 284-15-010 BROKERS—SURPLUS LINE—QUALIFICATIONS AND EXAMINATION. (1) Each applicant for license as a surplus line broker shall, prior to issuance of any such license, take and pass to the satisfaction of the commissioner an examination given by the commissioner. It shall be a test of his or her qualifications and competence in all areas of surplus line insurance. The examination shall be given in the same manner and under the same conditions as are prescribed for brokers in chapter 48.17 RCW, except that such surplus line examination will generally be given twice each year at times set by the commissioner.

(2) Minimum requirements to be met by an applicant before he or she will be permitted to take the examination are:

(a) An applicant must have been licensed as a casualty-property broker in accordance with RCW 48.17.150 for not less than five years preceding the date of the application,

OR

have received the Chartered Property Casualty Underwriter (CPCU) designation with not less than five years' experience in the insurance industry preceding the date of the application,

OR

have not less than ten years' experience as an insurance company employee, or an employee of an insurance broker's office or other related insurance industry experience preceding the date of the application,

OR

have other equivalent experience acceptable to the insurance commissioner.

(b) Such applicants shall complete application forms supplied by the commissioner.

(3) For the purpose of this regulation "applicant" and "surplus line broker" are defined to include any individual who is to be empowered and designated in the license as authorized to exercise the powers conferred thereby.

NEW SECTION

WAC 284-15-020 SURPLUS LINE BROKER—SOLVENT INSURER REQUIRED. (1) A surplus line broker shall not knowingly place surplus line insurance with insurers unsound financially.

Foreign and alien insurers must meet or exceed the minimum financial conditions required by RCW 48.15.090.

(2) A surplus line broker shall ascertain the financial condition of the unauthorized insurer and maintain written evidence thereof before placing insurance therewith.

(a) When the surplus line broker uses an alien unauthorized insurer shown on the National Association of Insurance Commissioners (NAIC) Quarterly Listing of Alien Insurers dated within three months of the placement of the risk, it shall be deemed to be adequately documented.

(b) When the surplus line broker uses an alien unauthorized insurer that is not shown on the NAIC Quarterly Listing of Alien Insurers, there must be documentation in the broker's files demonstrating subsection (1) of this section requirements are met or exceeded.

This documentation shall include at least the following:

(i) A copy of the unauthorized insurer's most recent available annual financial statement. This shall include an English version with United States dollar equivalents; and

(ii) Written verification for the commissioner of the trust agreement required by RCW 48.15.090.

(iii) Any other information obtained by the broker that verifies the financial integrity of the alien company.

(c) The surplus line broker must have at least the most recent NAIC annual statement or its equivalent on file for any foreign unauthorized insurers used.

NEW SECTION

WAC 284-15-030 SURPLUS LINE BROKER—MAINTAINING AN OFFICE. RCW 48.15.070 authorizes the commissioner to license any person deemed by him to be competent and trustworthy and while maintaining an office at a designated location in this state. Therefore the commissioner rules:

(1) The surplus line broker licensed in the state of Washington shall have his or her principal place of surplus line business in the state of Washington. Such business shall include:

(a) Maintaining evidence that a diligent effort was made to procure the insurance from among a majority of the insurers authorized to transact the same type of insurance in this state (RCW 48.15.040).

(b) Endorsing the contract by the surplus line broker (RCW 48.15.050).

(c) Determining the solvency of the nonadmitted insurer and maintaining written evidence thereof (RCW 48.15.090).

(d) Executing the affidavit at the time of procuring any such insurance and filing the affidavit with the commissioner (RCW 48.15.040).

(e) Maintaining full and true records of each surplus line contract procured which shall be kept available and open to the commissioner at any time during the five years next following the completion of the transaction (RCW 48.15.100).

(f) Preparing the annual statement required by RCW 48.15.110 and payment of the premium taxes required by RCW 48.15.120.

(2) The activities of the surplus line broker require an extraordinary degree of competency and trustworthiness. An extra degree of examination and background evaluation is given prior to licensing. To be a competent surplus line broker, he or she must be continually active in the state of Washington insurance marketplace, being cognizant of both the admitted as well as the nonadmitted market conditions. Therefore, the commissioner concludes that maintaining a surplus line broker's office in the state of Washington requires a licensed surplus line broker be a resident of this state and routinely available at each office during normal working hours.

(3) The commissioner determines that he is precluded from issuing any nonresident surplus line brokers' licenses based on the requirements explained in subsections (1) and (2) of this section.

NEW SECTION

WAC 284-15-040 SURPLUS LINE BROKERS' FORM TO BE FILED—CONTRACT STAMP TO BE USED. (1) RCW 48.15.040 requires that a surplus line broker execute an affidavit at the time of procuring insurance from an unauthorized insurer, and to file such affidavit with the commissioner within thirty days after the insurance is procured. The form for filing such affidavit shall be in substantially the following form, and may include additional information to satisfy requirements of the Surplus Line Association of Washington:

- Policy or Certificate No.:
Premium, including any policy fee:
1. Name and license number of filing Surplus Line Broker:
2. Name and address of producing agent or broker (if any):
3. Name(s) of unauthorized insurer(s):
4. Name and address of insured:
5. Brief statement of coverages (common trade terms may be used, e.g. "furrier's block"):

STATE OF WASHINGTON)
) ss. SURPLUS LINE
) County) BROKER'S
AFFIDAVIT

I have procured insurance from an unauthorized insurer or insurers, in accordance with the laws and regulations of the State of Washington under my Surplus Line Broker's license. Details of such transaction are set forth above.

Such insurance could not be procured, after diligent effort was made to do so from among a majority of the insurers authorized to transact that kind of insurance in this state, and placing the insurance in such unauthorized insurer(s) was not done for the purpose of securing a lower premium rate than would be accepted by any authorized insurer.

I certify that I am duly authorized to place this coverage on behalf of the insured, that the risk has been duly accepted by the insurer(s), and that I ascertained the financial condition of the unauthorized insurer(s) before placing the insurance therewith.

(Signature of Surplus Line Broker)

Subscribed and sworn to before me this ... day of ..., 19...

Notary Public in and for the State of Washington, residing at

(2) Every insurance contract, including those evidenced by a binder, procured and delivered as a surplus line coverage pursuant to chapter 48.15 RCW shall have a conspicuous statement stamped upon its face, which shall be initialed by or bear the name of the surplus line broker who procured it, as follows:

"This contract is registered and delivered as a surplus line coverage under the insurance code of the state of Washington, enacted in 1947. It is not issued by a company regulated by the Washington state insurance commissioner and is not protected by any Washington state guaranty fund law."

NEW SECTION

WAC 284-15-050 FORM FOR SURPLUS LINE INSURER TO DESIGNATE PERSON TO RECEIVE LEGAL PROCESS. (1) RCW 48.15.150 permits service of legal process against an unauthorized insurer that is sued upon any cause of action arising in this state under any contract issued by it as a surplus line contract to be made upon the insurance commissioner. The commissioner will mail the documents of process to the insurer at its principal place of business last known to the commissioner, or to a person designated by the insurer for that purpose in the most recent document filed with the commissioner on a form prescribed by the commissioner. If such unauthorized insurer elects to designate a person to receive such legal process from the commissioner, the designation shall be filed with the commissioner in substantially the form set forth in subsection (2) of this section.

(2) DESIGNATION OF PERSON TO WHOM COMMISSIONER SHALL FORWARD LEGAL PROCESS.

To the Insurance Commissioner of the State of Washington:

Pursuant to RCW 48.15.150, the undersigned Insurer hereby designates:

Name

Address

as the person to whom the Insurance Commissioner shall forward legal process against the Insurer. This designation supersedes any similar designation heretofore made by this Insurer.

Executed at, this day of, 19..
.....
(Insurer)
By
.....
(Title)

(3) The "person" designated may be an individual, firm or corporation.

(4) The commissioner shall forward process to the person designated in the most recent document filed with him.

(5) Pursuant to RCW 48.15.150, each policy issued by an unauthorized insurer as a surplus line contract must contain a provision designating the commissioner as the person upon whom service of process may be made.

NEW SECTION

WAC 284-15-060 SURPLUS LINE-WAIVER OF FINANCIAL REQUIREMENTS. The commissioner may waive the financial requirements specified in RCW 48.15.090 in circumstances where insurance cannot be otherwise procured on risks located in this state. The commissioner requires at least the following information be submitted when a surplus line broker makes a request for the commissioner to waive the financial requirements:

- (1) A letter of explanation for the need to waiver the financial requirements;
(2) The financial condition of the carrier reported in the last annual report;
(3) The number of years the company has been writing the specific class of insurance;
(4) The reinsurance agreements backing up the class of coverage or the company.

NEW SECTION

WAC 284-15-090 SURPLUS LINE MISREPRESENTATIONS. Any person licensed by the commissioner who misrepresents to any surplus line broker any material fact regarding insurance coverage, or misrepresents to such surplus line broker facts with regard to the rules of submission or rates, or in any way conspires to procure nonadmitted insurance in violation of the law or of the rules and regulations and basic principles herein set forth, will subject himself to action in respect to his license, as provided by the insurance code.

WSR 80-15-085
EMERGENCY RULES
DEPARTMENT OF FISHERIES
[Order 80-165-Filed October 21, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to personal use fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is coho management needs prevail.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 21, 1980.
By Gordon Sandison
Director

NEW SECTION

WAC 220-57-40500D SAMISH RIVER. Notwithstanding the provisions of WAC 220-57-405, effective immediately until further notice, it shall be unlawful to take, fish for or possess salmon for personal use from that portion of the Samish River upstream from the Interstate 5 Bridge.

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 220-57-40500C SAMISH RIVER. (80-152)

WSR 80-15-086
EMERGENCY RULES
DEPARTMENT OF FISHERIES
[Order 80-166-Filed October 21, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is this order is necessary to allow the harvest of available chum salmon.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 21, 1980.
By Gordon Sandison
Director

NEW SECTION

WAC 220-40-02100J WILLAPA HARBOR GILL NET—SEASONS. Notwithstanding the provisions of WAC 220-40-021 and WAC 220-40-022, it shall be unlawful to take, fish for or possess salmon for commercial purposes with gill net gear in the following Willapa Harbor Fishing Areas, except during the seasons provided for hereinafter in each respective fishing area:

Areas 2G, 2K and that portion of 2J north of a line projected true east and west through marker piling 18:

6:00 p.m. October 26 to 6:00 p.m. October 27, 1980.

5-inch minimum to 7-inch maximum mesh size.

WSR 80-15-087

NOTICE OF PUBLIC MEETINGS WHATCOM COMMUNITY COLLEGE [Memorandum, President—October 20, 1980]

On October 14, 1980, the Board of Trustees took action to schedule their November 4 regular Board meeting at 3:00 p.m. and to designate it as a special meeting. They also took action to reschedule their December 9, 1980 meeting from 1:00 to 3:00 p.m.

WSR 80-15-088

PROPOSED RULES DEPARTMENT OF LICENSING (Real Estate) [Filed October 21, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Licensing, intends to adopt, amend, or repeal rules concerning the amending of WAC 308-124-005, 308-124-021, 308-124A-010, 308-124A-020, 308-124A-025, 308-124A-030, 308-124A-100. Adding new sections WAC 308-124A-110, 308-124A-120, 308-124A-130. Amending WAC 308-124A-200. Adding new sections WAC 308-124A-410 and 308-124A-420. Amending WAC 308-124B-040, 308-124B-110, 308-124B-120 and 308-124C-010. Repealing WAC 308-124A-040, 308-124A-210 and 308-124A-310;

that such agency will at 9:00 a.m., Tuesday, December 2, 1980, in the Phoenix E Room, Hyatt House, 17001 Pacific Highway South, Seattle, WA, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 9:00 a.m., Tuesday, December 2, 1980, in the Phoenix E Room, Hyatt House, 17001 Pacific Highway South, Seattle, WA.

The authority under which these rules are proposed is RCW 34.04.020, 18.85.040, 18.85.120, 18.85.161, 18.85.320 and 18.85.090.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to December 2, 1980, and/or orally at 9:00 a.m., tuesday, December 2, 1980, Phoenix E Room, Hyatt House, 17001 Pacific Highway South, Seattle, WA.

Dated: October 21, 1980
By: Richard A. Finnigan
Assistant Attorney General

STATEMENT OF PURPOSE

Title, Description Of Purpose, Statutory Authority, Summary Of Rule And Reasons Supporting Proposed Action:

Title WAC 308-124-005 Organization.

Description of Purpose: To describe the organization of the Real Estate Division of the Department of Licensing and the Real Estate Commission.

Statutory Authority: RCW 34.04.020.

Summary of Rule: This rule describes the organization and location of the Real Estate Division of the Department of Licensing and the Real Estate Commission and gives a brief outline of the functions of both bodies. Reasons Supporting Proposed Action: The proposed action is an amendment to update current WAC 308-124-005 to reflect current nomenclature and organization.

Title: WAC 308-134-021 Definitions.

Description of Purpose: The purpose of this rule is to set forth definitions applicable to the rules adopted to administer chapter 18-85 RCW.

Statutory Authority: RCW 18.85.040.

Summary of Rule: The rule repeals the definition of actual experience as a full time real estate salesperson and adds definitions of the terms "designated broker," "principal owner," "individual broker," and "incorporated associated broker," and "administrator."

Reasons Supporting Proposed Action: The definitions are set forth in order to clarify the meaning of the defined terms as they are used in the rules of the Real Estate Division. Title: WAC 308-124A-010 Credit and character report.

Description of Purpose: To set forth the requirement that a person making application for a license submit a credit report in support of the application.

Statutory Authority: RCW 18.85.040 and 18.85.120.

Summary of Rule: The proposed amendment to this rule deletes the credit report requirement for a person making application for a land development representative and retains the requirement currently in rule

that a person applying for a real estate broker's license must provide a credit report as a part of the application for that license.

Reasons Supporting Proposed Action: The experience of the Real Estate Division has shown that a credit report is not a useful tool in examining applications for a land development representative's license.

Title: WAC 308-124A-020 Application for a license—Fingerprinting.

Description of Purpose: The purpose of this rule is to set forth the procedure through which an individual complies with the requirement to submit to the Real Estate Division fingerprint identification.

Statutory Authority: RCW 18.85.040 and 18.85.120.

Summary of Rule: This amendatory rule sets forth in detail the existing requirement that an individual applying for a real estate license submit a fingerprint identification. The primary revision from current rule requirement is that an applicant for a license need not submit a new fingerprint form if he or she has filed a fingerprint form with the Real Estate Division within one calendar year preceding the date of application.

Reasons Supporting Proposed Action: The action is taken to clarify the procedure for providing fingerprint identification and to establish the validity of fingerprint identification provided within one year prior to the date of an application.

Title: WAC 308-124A-025 Notice required of intention to take examination.

Description of Purpose: The purpose of this rule is to set forth the procedure for applying for an examination for a real estate broker's or real estate salesperson's license.

Statutory Authority: RCW 18.85.040.

Summary of Rule: The rule as it currently exists set forth the procedure by which a person applies for and is permitted to take an examination for a real estate broker's or real estate salesperson's license. The only change the proposed amendment makes is to delete the archaic reference that the documents be filed with the office of the Director of Motor Vehicles. The proper office is now of course the Department of Licensing.

Reasons Supporting Proposed Action: To delete the archaic reference to the office of the Director of Motor Vehicles.

Title: WAC 308-124A-030 Successful applicants must apply for license.

Description of Purpose: The purpose of this rule is to set forth the requirement that a person who has passed an examination must make an application for a license within one year from the date of the examination to become eligible for licensure.

Statutory Authority: RCW 18.85.040.

Summary of Rule: The rule requires a person to apply for licensure within one year of passing an examination or the results of the examination become void.

Reasons Supporting Proposed Action: The proposed amendment is to clarify current language and requirements.

Title: WAC 308-124A-100 Applicant for license previously licensed in another state.

Description of Purpose: The purpose of this rule is to delineate the procedure for a person who is licensed in another state who wishes to become licensed in this state to provide evidence that they are in good standing as a licensee in the foreign state.

Statutory Authority: RCW 18.85.040 and 18.85.161.

Summary of Rule: The rule requires that a person who is licensed in another state who has applied for the examination to become licensed in this state provide evidence from the administrative officer of the licensing agency of that other state that the person is in good standing in that state. The proposed amendment to the rule is largely concerned with rephrasing the rule as it currently exists. The two substantive changes are to delete the requirement that a person be a resident of this state and that the evidence of good standing be provided under official seal.

Reasons Supporting Proposed Action: The proposed action is to bring the practices of the Real Estate Division in line with modern practice and statutory requirements.

Title: WAC 308-124A-110 Application for real estate examination, licensed in foreign state.

Description of Purpose: The purpose of this rule is to set forth the conditions under which a person who has been previously licensed in another state may become licensed in this state.

Statutory Authority: RCW 18.85.040 and 18.83.161[18.85.161].

Summary of Rule: This rule is a new section and states that a person applying for a broker or salesperson examination who has maintained a license in another state in good standing prior to the date of application for a Washington license may become licensed in this state after passing an examination on Washington law in real estate practices.

Reasons Supporting Proposed Action: The rule is proposed to clarify what requirements a person who is licensed in another state must satisfy to become licensed in this state.

Title: WAC 308-124A-120 Application for license by employing broker.

Description of Purpose: The purpose of this rule is to set forth the procedure under

which a person who is to work under the supervision of a broker applies for a license.

Statutory Authority: RCW 18.85.040.

Summary of Rule: This rule states that a person who is to be licensed with a broker must make application for that license on an application furnished by the director and signed by the broker or designated broker to whom the license would be issued. The proposed rule allows for a branch manager to sign for the broker for licenses to be issued to that branch office.

Reasons Supporting Proposed Action: The reason for this rule is to set forth the procedure through which an individual applying to work for a broker makes application for license.

Title: WAC 308-124A-130 Salesperson, associate brokers—Termination of services.

Description of Purpose: The purpose of this rule is to set forth the procedure to be followed when a broker or associate broker terminates his or her services to a broker.

Statutory Authority: RCW 18.85.040 and 18.85.320.

Summary of Rule: The rule states that a salesperson or associate broker may perform duties only as the representative of the broker. It provides that representation of a broker may be terminated by either the broker or the salesperson or associate broker and provides that if a relationship is terminated notice of that termination is to be given to the director and the license is to be returned to the Real Estate Division of the Department of Licensing.

Reasons Supporting Proposed Action: It has been the experience of the Real Estate Division that there is a great deal of confusion about how parties may terminate the relationship of broker and salesperson or associate broker. In addition, there is a great deal of confusion as to what procedure is to be followed upon termination of this relationship. This rule is to clarify that confusion in the real estate industry.

Title: WAC 308-124A-200 Corporate or copartnership applicants for licenses—Proof required.

Description of Purpose: The purpose of this rule is to set forth the requirements that a corporation or partnership must meet to receive a broker's license.

Statutory Authority: RCW 18.85.040 and 18.85.120.

Summary of Rule: The rule sets forth the minimum qualifications for a corporation or partnership to receive a broker's license. Briefly, these requirements are that there be a designated broker for the corporation who holds a valid broker's license and requires

character and credit rating and fingerprinting identification of the designated broker, officers, and principal owners of the corporation and all partners and principal owners of a partnership applying for a license. In addition, the rule requires a corporation to provide a list of its officers, directors and principal owners and their addresses and if it is a partnership a list of addresses and names of members of the partnership. Finally, the rule requires that a copy of the partnership agreement or articles of incorporation and current annual report be provided.

In addition, for a corporated associated broker license the rule specifies the name of the licensee must be the name of the designated broker and the only employee of the corporation may be the designated broker.

Reasons Supporting Proposed Action: The reason for the proposed action is to clearly set forth the requirements that a corporation or partnership must meet to receive a broker's license and associate broker's license.

Title: WAC 308-124A-410 Application for broker license examination—Two years sales experience.

Description of Purpose: The purpose of this rule is to set forth what activity will suffice to evidence full time experience as a real estate salesperson for qualification for the broker license examination.

Statutory Authority: RCW 18.85.040 and 18.85.090.

Summary of Rule: The rule provides that a person must evidence full time experience as a real estate salesperson to take a broker license examination of either a minimum of 40 hours per week for two years or a major source of income from real estate sales activity continuously for the two-year period.

Reasons Supporting Proposed Action: The reason for this rule is to establish the guidelines under which a person can qualify through two years of full time real estate salesperson experience to take the broker license examination.

Title: WAC 308-124A-420 Application for broker license examination, other qualification or related experience.

Description of Purpose: The purpose of this rule is to set forth the procedure and qualifications which will be considered for an applicant applying for a real estate broker license examination who does not have two years of actual experience as a full time real estate salesperson.

Statutory Authority: RCW 18.85.040 and 18.85.090.

Summary of Rule: This new proposed rule states that a person who does not have two years of actual experience as a full time real

estate salesperson but wishes to apply for the broker license examination submits an application to the Real Estate Division in Olympia, Washington. The application must be accompanied by a letter requesting approval of alternative experience indicating the basis for such approval. It must also contain a detailed personal history or work resume with appropriate documentation and letters from five persons describing from their personal knowledge the qualifications and experience of the applicant. The rule sets forth alternative qualifications which will be considered: post secondary education with major study in real estate; experience as an attorney at law in real estate transactions; experience with decision responsibility in closing real estate transactions; experience as an officer of a commercial bank or other lending institution in real estate transactions; experience as an appraiser for a governmental agency; experience in all phases of land development; construction financing, selling and leasing of residences, apartments or commercial buildings; and experience in real estate investment, property management or analysis of investments or business opportunities.

Reasons Supporting Proposed Action: In the real estate industry there appears to be some confusion as to what will qualify as alternative experience to two years of actual experience as a full time real estate salesperson. The purpose of this rule is to set forth the procedure for making application for approval of alternative experience and to delineate the types of alternative experience that will be considered.

Title: WAC 308-124B-040 Branch offices operating under another name.

Description of Purpose: The purpose of this rule is to set forth the conditions under which a broker may operate a branch office under a name different from the main office. **Statutory Authority:** RCW 18.85.040 and 18.85.170.

Summary of Rule: This rule states that a broker may establish one or more branch offices under a name or names different from that of the main office if the director of the Real Estate Division so approves and limits the use to no more than three different names. It also requires that the name of the branch office and the main office must clearly appear on the sign identifying the branch office and in any advertisements or letterhead stationery or signs used by the real estate firm.

Reasons Supporting Proposed Action: The amendatory action proposed for this rule is to clarify approval responsibility.

Title: WAC 308-124B-110 Display of licenses.

Description of Purposes: The purpose of this rule is to require that all licenses be permanently displayed at the office shown on the individual license.

Statutory Authority: RCW 18.85.040 and 18.85.180.

Summary of Rule: This rule requires that the licenses of real estate brokers, associate brokers, branch managers, salespersons, and land development representatives be permanently displayed at the office which is located at the address appearing on the individual license.

Reasons Supporting Proposed Action: The proposed amendment to this rule simply clarifies language, changing salesmen to salespersons and deleting temporary permittees and adding land development representatives.

Title: WAC 308-124B-120 Change of office location.

Description of Purpose: The purpose of this rule is to set forth the procedure through which a real estate broker notifies the director of a change of location and mailing address of the broker's office.

Statutory Authority: RCW 18.85.040 and 18.85.200.

Summary of Rule: This rule requires a real estate broker to notify the director of the change of location and mailing address of the broker's office by filing a change of address application and returning all licenses issued to the old location and paying the fees established by statutes.

Reasons Supporting Proposed Action: The amendment proposed for this rule is to update the language used in the old rule. It is not a substantive change.

Title: WAC 308-124C-010 Broker responsibilities.

Description of Purpose: The purpose of this rule is to clearly state the responsibility of the broker for the custody and correctness of all real estate records required to be maintained by that broker and that all licensees must know the rules.

Statutory Authority: RCW 18.85.040.

Summary of Rule: This rule states that a real estate broker is responsible for the custody, safety, and correctness of all entries in real estate records required to be maintained even though the broker assigns the duties of preparation, custody, or recording to another person or persons. The present rule also makes it the responsibility for a broker to obtain a copy of the rules and regulations implementing chapter 18.85 RCW and to keep them available in the office.

Reasons Supporting Proposed Action: The Real Estate Division has found that the requirement that a broker maintain a copy of the rules available in its office where licensed persons licensed to that broker is difficult to enforce and places responsibility on the broker's knowledge of the rules and regulations where it should be the responsibility of each individual licensee.

Agency Personnel Responsible For Drafting, Implementation and Enforcement:

R. Y. Woodhouse, Fourth Floor, Highways-Licenses Building, Olympia, WA 98504, (206) 753-6915.

Gordon L. Smith, Sixth Floor, Highways-Licenses Building, Olympia, WA 98504, (206) 753-6681.

Person Or Organization Proposing Rule: The rule amendments are proposed by the Real Estate Division of the Department of Licensing.

Agency Comments Or Recommendations Regarding Statutory Language, Implementation, Enforcement, And Fiscal Matters: None.

Is This Rule Necessary As A Result Of Federal Law Or Federal Or State Court Action: No. None of the rules are required as a result of federal law or court action.

AMENDATORY SECTION (Amending Order RE 114, filed 7/2/75)

WAC 308-124-005 ORGANIZATION. The principal location of the division of real estate is located on the ~~((third))~~ sixth floor, highways-licenses building, 12th and Franklin Street, Olympia, Washington 98504. The division maintains a Seattle office at ~~((the department of motor vehicles examining station,))~~ 320 north 85th street, Seattle, Washington 98103. The division maintains a Spokane office at 25 South Ferrall, Spokane, Washington 99202.

The real estate division of the business and professions administration of the department of ~~((motor vehicles))~~ licensing administers the Washington real estate license law, chapter 18.85 RCW. The real estate commission, composed of the director of the department of ~~((motor vehicles))~~ licensing and six ~~((board))~~ commission members, appointed by the governor from the real estate industry, prepares or reviews and approves examination questions for license applicants, holds real estate education conferences, advises the director as to the issuance of rules and regulations governing the activities of real estate brokers and salesmen and performs such other duties and functions as prescribed by chapter 18.85 RCW. Submissions and requests from the public may be directed to the real estate commission, Olympia, Washington. Information regarding real estate licenses, the real estate commission, or the real estate division, may be obtained by writing to the administrator, real estate division, department of ~~((motor vehicles))~~ licensing, p.o. box 247, Olympia, Washington 98504.

AMENDATORY SECTION (Amending Order RE 125, filed 10/23/78)

WAC 308-124-021 DEFINITIONS. ~~(("Actual experience as a full-time real estate salesperson" under the provisions of RCW 18.85-090 shall not include activities as a land development representative or temporary salesperson permit under the provisions of chapter 18.85-150 RCW.))~~ (1) Words and terms used in these rules shall have the same meaning as each has under chapter 18.85 RCW unless otherwise clearly provided in these rules, or the context in which they are used in these rules clearly indicates that they be given some other meaning.

(2) "Designated broker" is the natural person designated by a corporation or partnership to act as a broker on behalf of the corporation

or partnership. The designated broker must be an officer of the corporation or a general partner of the partnership and must be separately qualified for licensure as a real estate broker.

(3) "Principal owner" is a person who owns or controls, directly or indirectly, ten percent or more of a real estate brokerage, regardless of whether such interest stands in the person's true name or in the name of a nominee.

(4) "Individual broker" is the natural person who owns a sole proprietorship brokerage company and is the licensed broker of the firm.

(5) "Incorporated associate broker" is the natural person qualified as a broker who works with a broker and who is licensed as a corporation and whose license states that he or she is associated with a broker.

(6) "Administrator" is the person appointed by the director of the department of licensing to administer the real estate division of the department of licensing.

Reviser's Note: The typographical errors in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

AMENDATORY SECTION (Amending Order RE 125, filed 10/23/78)

WAC 308-124A-010 CREDIT AND CHARACTER REPORT. ~~((1))~~ Any person making application for registration as a land development representative pursuant to chapter 18.85 RCW, must as an integral part of the application, supply the director with satisfactory proof of applicant's identification, character and credit rating. Proof of credit and character rating shall be obtained and attested by the employing broker upon a form to be provided by the real estate division.

~~((2))~~ Any person making application for a real estate broker~~((s))~~ license must as an integral part of the application, supply the director with satisfactory proof of applicant's character and credit rating. Such proof shall be obtained and provided by a recognized credit reporting agency (credit bureau) in a form approved by the real estate division.

AMENDATORY SECTION (Amending Order RE 120, filed 9/20/77)

WAC 308-124A-020 APPLICATION FOR A LICENSE - FINGERPRINTING. ~~((A person making application for a real estate license or land development representative registration must, with the application, submit fingerprints of applicant on forms provided by the director.))~~ All persons must submit fingerprint identification, on a form provided by the Real Estate Division when making application for:

- (1) a real estate salesperson license;
- (2) an individual broker license;
- (3) a corporation or partnership broker license; or
- (4) a land development representative registration.

The applicant is not required to submit a new fingerprint form if he or she has filed a fingerprint form with the real estate division within one calendar year preceding the application.

Reviser's Note: RCW 34.04.058 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

AMENDATORY SECTION (Amending Order 114, filed 7/2/75)

WAC 308-124A-025 NOTICE REQUIRED OF INTENTION TO TAKE EXAMINATION. Any person desiring to take an examination for a real estate broker or real estate ~~((salesman))~~ salesperson license must file a completed application together with the correct fee~~((;))~~ and supporting documents ~~((with the office of the director of motor vehicles prior to the date of such examination)).~~ The applicant will be assigned to the first available examination subsequent to determination of eligibility. The cutoff date for ~~((notice of))~~ eligibility for any specific examination is available to the applicant upon request. An applicant shall forfeit all examination fees for any examination or examinations for which the applicant has applied and does not take for any reason, other than through the fault or mistake of the real estate division.

AMENDATORY SECTION (Amending Order RE 114, filed 7/2/75)

WAC 308-124A-030 SUCCESSFUL APPLICANTS MUST APPLY FOR LICENSE. (1) Examination results are valid for one year only. Any person who has passed the examination for real estate

broker or real estate ((salesman)) salesperson licensure must become licensed within one year from the date of such examination ((in order to become eligible for such license)). Failure to comply with this provision will necessitate the taking and passing of another examination prior to licensure.

AMENDATORY SECTION (Amending Order RE 114, filed 7/2/75)

WAC 308-124A-100 APPLICANT FOR LICENSE PREVIOUSLY LICENSED IN ANOTHER STATE. Any ((resident of this state)) person making an application for examination who has previously been licensed in another state shall, ((with the application, furnish satisfactory proof)) evidence by a letter from ((the)) an administrative ((head)) officer of the real estate ((division)) agency of such other state ((bearing the official seal setting out)) that the applicant's relationship with such ((division)) state is and has been in good standing.

NEW SECTION

WAC 308-124A-110 APPLICATION FOR REAL ESTATE EXAMINATION, LICENSED IN FOREIGN STATE. Any person applying for a real estate broker or real estate salesperson examination who is actively licensed in another state, territory of the United States or province of the Dominion of Canada and has maintained his or her license in good standing may become licensed as a Washington resident real estate broker, associate broker or salesperson after passing an examination on Washington law and real estate practices if he or she meets the minimum requirements established by RCW 18.85.090, RCW 18.85.095, and/or RCW 18.85.120 whichever is (are) applicable.

NEW SECTION

WAC 308-124A-120 APPLICATION FOR LICENSE BY EMPLOYING BROKER. A person who desires to be licensed as a real estate salesperson or associate broker shall make application on a form furnished by the director and signed by the broker or designated broker to whom the license will be issued. The branch manager may sign for the broker or designated broker for licenses to be issued to that branch office.

NEW SECTION

WAC 308-124A-130 SALESPERSON, ASSOCIATE BROKERS - TERMINATION OF SERVICES. A person licensed as salesperson or associate broker may perform duties and activities as licensed only under the direction and supervision of a licensed individual broker or designated broker and as a representative of such broker. This relationship may be terminated unilaterally by either the broker or salesperson or associate broker. Notice of such termination shall be given by the broker to the director without delay and such notice shall be accompanied by and include the surrender of the salesperson's or associate broker's license. The broker may not condition his or her surrender of license to the director upon performance of any act by the salesperson or associate broker. Notice of termination shall be provided by signature of the broker, or a person authorized by the broker to sign for the broker, on the surrendered license of the salesperson or associate broker.

AMENDATORY SECTION (Amending Order RE 114, filed 7/2/75)

WAC 308-124A-200 CORPORATE OR COPARTNERSHIP APPLICANTS FOR LICENSES - PROOF REQUIRED. ((WAC 308-124A-010, WAC 308-124A-020 and 308-124A-100 shall apply to corporations or co-partnerships to the extent that each officer of such corporation or each partner of a co-partnership, under RCW 18.85.120(2) and 18.85.120(3) and 18.85.120(4) shall be required to furnish the proof required as to their individual character credit, and fingerprint identification.)) The minimum qualifications for a corporation or partnership to receive a broker's license are:

(1) An officer in the corporation or a general partner in the partnership, as the case may be, shall be designated as the broker and shall separately qualify for a valid broker's license. The corporation or partnership and the designated broker are required to pay only a single license and license renewal fee.

(2) The applicant shall furnish a character and credit rating, WAC 308-124A-010 and fingerprint identification, WAC 308-124C-020 of the designated broker, officers, and principal owners of the corporation directly involved in the company's Washington real estate activity and, in the case of a partnership, the general partners and all principal owners.

(3) If the applicant is a corporation, it shall furnish a list of its officers, directors and principal owners, and their addresses. If the applicant is a partnership, it shall furnish a list of the members of the partnership and their addresses.

(4) If the applicant is a corporation, it shall furnish a copy of its articles of incorporation and current annual report. If the applicant is a partnership, it shall furnish a copy of its partnership agreement.

(5) If a corporation applies for licensure as an incorporated associate broker, the name of the incorporated associate broker as licensed to do business shall be the name of the natural person who is the designated broker for the corporation, and only one person may be licensed to each incorporated associate broker and that person shall be the corporation's designated broker.

NEW SECTION

WAC 308-124A-410 APPLICATION FOR BROKER LICENSE EXAMINATION - TWO YEARS SALES EXPERIENCE. To qualify for two years of actual experience as a full time real estate salesperson applicants for a real estate broker license examination shall provide evidence of either:

- (1) a minimum of forty hours per week spent in real estate sales activity for the period; or
- (2) a major source of income from real estate sales activity continuously for the period.

NEW SECTION

WAC 308-124A-420 APPLICATION FOR BROKER LICENSE EXAMINATION, OTHER QUALIFICATION OR RELATED EXPERIENCE. Applications for a real estate broker license examination by persons who do not possess two years of actual experience as a full time real estate salesperson as required by RCW 18.85.090 which show other and similar qualifications, or qualification by reason of practical experience in a business allied with or related to real estate (alternative qualifications or experience) shall be submitted to the administrator of the real estate division, P.O. Box 247, Olympia, Washington 98504. The application shall be accompanied by a letter requesting approval of alternative qualifications or experience and indicating the basis for such approval. The letter must include a detailed personal history or work resume, with appropriate documentation, and a letter from each of five persons describing from personal knowledge the qualifications and experience of the applicant. The following guidelines are provided as examples of experience which may qualify in lieu of two years of full time sales experience:

- (1) Post-secondary education with major study in real estate.
- (2) Experience as an attorney at law with practice in real estate transactions.
- (3) Experience, with decision responsibility, in closing real estate transactions for escrow companies, mortgage companies, or similar institutions.
- (4) Experience as an officer of a commercial bank, savings and loan association, title company or mortgage company, involving all phases of real estate transactions.
- (5) Experience as a real property fee appraiser or salaried appraiser for a governmental agency.
- (6) Experience in all phases of land development, construction, financing, selling and leasing of residences, apartments of commercial buildings.
- (7) Experience in real estate investment, property management, or analysis of investments or business opportunities.

Reviser's Note: Errors of punctuation or spelling in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

AMENDATORY SECTION (Amending Order RE 114, filed 7/2/75)

WAC 308-124B-040 BRANCH OFFICES OPERATING UNDER ANOTHER NAME. It shall not be a violation of RCW 18.85.190 if a broker establishes one or more branch offices under a name or names different from that of the main office if the name or names are

approved by the ((division)) director, so long as each branch office is clearly identified as a branch or division of the main office. No broker may establish branch offices under more than three names. Both the name of the branch office and of the main office must clearly appear on the sign identifying the branch office, ((if any;)) and in any advertisement or on any letterhead of any stationery or any forms, or signs used by the real estate firm on which either the name of the main or branch offices appears.

AMENDATORY SECTION (Amending Order RE 114, filed 7/2/75)

WAC 308-124B-110 DISPLAY OF LICENSES. Licenses of the real estate broker, all associate real estate brokers, branch managers, ((salesmen)) salespersons and ((temporary permittees)) land development representatives shall be displayed prominently in the office located at the address appearing on the individual license.

AMENDATORY SECTION (Amending Order RE 114, filed 7/2/75)

WAC 308-124B-120 CHANGE OF OFFICE LOCATION. The real estate broker shall notify the director of the change of location and mailing address of the broker's office by promptly ((completing and mailing)) filing a change of address application with the administrator ((to:

**REAL ESTATE DIVISION
BUSINESS AND PROFESSIONS ADMINISTRATION
P.O. Box 247
Olympia, Washington - 98504**)

together with the return of all licenses and ((a check for)) payment of the correct fees ((payable to the state treasurer)).

AMENDATORY SECTION (Amending Order RE 114, filed 7/2/75)

WAC 308-124C-010 ((BROKERS)) LICENSEE'S RESPONSIBILITIES. (1) The real estate broker shall be responsible for the custody, safety(;) and correctness of entries of all required real estate records. The broker retains this responsibility even though another person or persons may be assigned by the broker the duties of preparation, custody or recording.

(2) ~~((It shall be the responsibility of the individual or designated broker of a corporation or copartnership to obtain a copy of these rules and regulations. Such rules and regulations shall be on file in all the licensed offices for the ready availability and use of all licensees licensed to said broker.))~~ It is the responsibility of each and every licensee to obtain a copy of and be knowledgeable of and keep current with the rules implementing chapter 18.85 RCW.

REPEALER

The following sections of the Washington Administrative Code are repealed:

- WAC 308-124A-040 UNSUCCESSFUL BROKER APPLICANTS - LOSS OF WAIVER PRIVILEGE.
- WAC 308-124A-210 CORPORATE OR COPARTNERSHIP APPLICATIONS FOR TEMPORARY SALESMAN'S PERMIT - PROOF REQUIRED.
- WAC 308-124A-310 SALESMAN SECOND RENEWAL REQUIREMENTS.

**WSR 80-15-089
PROPOSED RULES
DEPARTMENT OF LICENSING
(Real Estate Division)
[Filed October 21, 1980]**

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Licensing intends to adopt, amend, or repeal rules

concerning the amending of WAC 308-124E-010, 308-124F-010, 308-124H-020, 308-124H-030, 308-124H-040, 308-124H-045, 308-124H-050 and 308-124H-060. Repealing WAC 308-124F-050, 308-124F-200 and 308-124G-010;

that such agency will at 1:30 p.m., Tuesday, December 2, 1980, in the Phoenix E Room, Hyatt House, 17001 Pacific Highway South, Seattle, WA, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 1:30 p.m., Tuesday, December 2, 1980, in the Phoenix E Room, Hyatt House, 17001 Pacific Highway South, Seattle, WA.

The authority under which these rules are proposed is RCW 18.85.040, 18.85.310 and 18.85.180.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to December 2, 1980, and/or orally at 1:30 p.m., Tuesday, December 2, 1980, Phoenix E Room, Hyatt House, 17001 Pacific Highway South, Seattle, WA.

Dated: October 21, 1980
By: Richard A. Finnigan
Assistant Attorney General

STATEMENT OF PURPOSE

Title, description of purpose, statutory authority, summary of rule, and reasons supporting proposed action:

Title: WAC 308-124E-010 Administration of trust accounts.

Description of Purpose: The purpose of this rule is to set forth the requirements that a real estate broker meet in maintaining his or her trust accounts.

Statutory Authority: RCW 18.85.040 and 18.85.310.

Summary of Rule: This rule is very long and therefore in this section only the proposed amendments to the rule will be discussed. There are three proposed amendments. The first is to broaden the authority for a real estate broker to use an individual trust account from only property management services to authorization to use an individual trust account in any instance if there is a written agreement signed by the principals to the transaction. The individual trust account may be maintained in an interest-bearing account if the written agreement specifies the distribution of the accumulated interest. The next proposed amendment is to modify the exclusion from depositing funds in a trust account for funds or monies received as rent, contract payments or mortgage payments on real estate or business opportunities or mortgages owned by the real estate broker or the broker's firm to be that the ownership must be exclusively by the broker or the firm before the exception applies. The third proposed amendment is to the requirement that no disbursements from

the real estate trust account may be made in the advance of closing of a real estate or business opportunity transaction or before the happening of a condition in the earnest money receipt agreement absent a written release from purchaser and seller. The change allows disbursement if the agreement terminates according to its own terms prior to closing. Then disbursement may be made as provided in the agreement.

Reasons Supporting Proposed Action: The reason for the proposed amendment to allow individual interest-bearing trust accounts is to allow the parties to use their funds while the real estate transaction is pending rather than simply let them lay idle. The reason to limit the exclusion from depositing funds in the trust account to the real estate or business opportunities or mortgages owned exclusively by the broker or the real estate firm is to limit the possibilities for conversion and self dealing and to make it more difficult for a person to avoid the trust account requirements of statute and rule. Finally, the reason to allow disbursement according to the terms of an agreement upon termination of the agreement under its own terms is to allow parties to receive their monies even though a transaction has failed where a release may not be obtainable.

Title: WAC 308-124F-010 Real estate office in same building as residence requirements.

Description of Purpose: The purpose of this rule is to set forth the conditions under which a broker may maintain an office in the building where the broker resides.

Statutory Authority: RCW 18.85.040 and 18.85.180.

Summary of Rule: The rule allows a real estate broker to maintain an office in the building where the broker resides if the office is separate from any living quarters, it is identified as a real estate office by a sign at the office entrance which is visible to the public, the entrance to the office is open to the public and does not lead through any living quarters, the office is in conformance with existing zoning, and the office is accessible to the public by a reasonably locatable street address. The amendments proposed to the rule add the requirements that the office entrance must be open to the public and does not lead through any living quarters, that the office is in conformance with existing zoning and that the office is accessible to the public by a reasonably locatable street address.

Reasons Supporting Proposed Action: The reasons for the proposed amendment are to ensure that an office in a residence is actually accessible to the public and to ensure

that the office is maintained in a professional manner.

Title: WAC 308-124H-020 Administration.
Description of Purpose: The purpose of this rule is to set forth the administrative requirements placed upon an applicant from a private school, individual or agency seeking approval for real estate courses.

Statutory Authority: RCW 18.85.040.

Summary of Rule: This rule in its current form requires than an applicant seeking approval of courses to be offered real estate licenses to designate one person to be responsible for the real estate course, file evidence showing previous experience in educational administration or supervision or related activities and showing evidence of experience in the area of real estate which that person or the instructors of that school propose to offer or teach. In addition, the rule requires that a school, individual or agency must not use the word "college" or "university" unless it has met the standards and qualifications and has been approved by a state agency having jurisdiction. Finally, the rule states that the head of the real estate department of a public community college, university, or vocational technical school is conclusively presumed to meet the educational and experimental requirements of the rule. The proposed amendments to the rule require that the applicant designate one person responsible for administration of the real estate school rather than simply the real estate courses to be conducted by the school and add a limitation that applications submitted by a private school, individual or agency that is owned or controlled by a licensed real estate broker shall not be considered for approval. In addition, the proposed amendments state that real estate educational courses offered by national institutions with uniform scope and quality may be approved regardless of course location and instructors used.

Reasons Supporting Proposed Action: The two major changes in the rule are the limitation upon application submitted by applicants owned or controlled by licensed real estate brokers and the approval of real estate educational courses offered by national institutions with uniform scope and quality of presentation. The reason for the latter change is to broaden the availability of quality courses for real estate licensees. Without this rule change the courses offered by national institutions would probably not be able to comply with the technical requirements of the rules. The reason for the limitation upon applications from schools, individuals or agencies owned or controlled by licensed real estate brokers is to prevent

a broker from establishing a school as a means of solicitation and recruitment of employees. It is the experience of the Real Estate Division and the Real Estate Commission that the danger of solicitation, indoctrination, and recruitment is inherent in such broker controlled schools.

Title: WAC 308-124H-030 Filing of courses.

Description of Purpose: The purpose of this rule is to set forth the procedure through which an entity may apply for approval of a course and to establish the criteria a course must meet to be approved.

Statutory Authority: RCW 18.85.040.

Summary of Rule: The rule says that an entity seeking approval of a real estate course must apply on a form provided by the director. In addition, it provides that a course must include at least one text book or other like material in general circulation, add to the practical knowledge of the real estate profession, contain a statement justifying the need for the course, deal with substantive real estate subject matter and not general sales motivation, have a comprehensive final examination and a final grade and require a minimum of thirty classroom hours of work for the student. The amendments proposed to the rule which are of substance delete the requirement that a statement must accompany the application justifying the need for the course, delete the requirement that there be a comprehensive final examination and instead require a comprehensive examination or examinations and add a requirement that each course must include at least one natural person who is a qualified instructor.

Reasons Supporting Proposed Action: These changes are proposed to remove artificial restrictions on the structure of courses and to ensure the quality of the offerings.

WAC 308-124H-040 Approval of courses.

Description of Purpose: The purpose of this rule is to set forth the procedure for submission of a course for approval and the procedure through which approval may be granted or denied. In addition, it sets the procedure through which changes in the course must be reported.

Statutory Authority: RCW 18.85.040.

Summary of Rule: This rule requires that persons seeking approval of a course are required to file an application at least thirty days prior to the date of a regular meeting of the Real Estate Commission. Timely applications will be reviewed by the Commission for recommendation to the director for consideration of approval or disapproval. Courses may be recommended solely for broker requirements or solely for second renewal requirement. A course may be denied

if it does not meet the requirements of the chapter or the needs of the majority of licensees. Changes in course content, material, instructors, directors, or ownership or location must be submitted to the administrator of the Real Estate Division within twenty days of the date of the change for submission to the director and Real Estate Commission for consideration of continued approval. A proposed amendment to the rule would change this last requirement so that changes in course instructors, text materials or location must be submitted for approval prior to implementing such change. In addition, the proposed amendment would delete an expiration date of approval of the course of December 1 of the year for which the course was approved.

Reasons Supporting Proposed Action: The Real Estate Division has found that certain types of changes in the course are too important to allow then to occur without prior approval. In addition, the Real Estate Division has found that the December 1 expiration date for approval is not a workable date.

Title: WAC 308-124H-045 Record keeping.

Description of Purpose: The purpose of this rule is to set forth the record keeping requirements which must be met by an entity which operates a course approved by the director.

Statutory Authority: RCW 18.85.040.

Summary of Rule: This rule requires a school offering a course approved by the director to maintain records for a period of six years of each student's attendance, total number of hours of instruction undertaken, and completed areas of study in real estate subjects prescribed by the regulations. The records are to be made available to the director for the purpose of determining whether the student has satisfied statutory educational requirements. The rule also makes it the responsibility of the entity having the approved course to furnish each student with a grade report or transcript for each course attended and number of clock hours earned.

Reasons Supporting Proposed Action: The proposed amendment to this rule is primarily a matter of form. The only substantive change is to make the records available for the student as well as the director. This is to make it easier for the student to demonstrate to the Real Estate Division that they qualify for licensure.

Title: WAC 308-124H-050 Review applications.

Description of Purpose: The purpose of this rule is to set forth the procedure and the

standards for review applications of a course having once been initially approved.

Statutory Authority: RCW 18.85.040.

Summary of Rule: This is a rule amendment which substantially amends the existing rule. In its proposed form it requires that all courses which have been approved shall be reviewed annually. The school must make application within thirty days prior to the review date. Approval is for one year and the review date is the anniversary date of the initial approval. Courses not submitted for review prior to thirty days to the review date are cancelled and a cancelled course must be submitted as a new application. Review applications are submitted to the Real Estate Commission for recommendation at the next scheduled commission meeting following the cutoff date for submission of the renewal application.

Reasons Supporting Proposed Action: The Real Estate Commission and Real Estate Division have found that the old system of all courses expiring on December 1 of a year is not a workable system. This system established by the proposed rule would spread the expiration date of courses throughout the calendar year. This ensures licensees that courses will be available throughout the entire year and there will not be a lapse period when no course has approval.

Title: WAC 308-124H-060 Teachers (and/) or instructors.

Description of Purpose: The purpose of this rule is to set forth the qualifications of the teachers or instructors which are to be utilized in conjunction with the course offering.

Statutory Authority: RCW 18.85.040.

Summary of Rule: This rule states that a course must be under the supervision of a qualified teacher or instructor present in the classroom at all sessions. The rule goes on to state that such teacher or instructor must demonstrate competency in the field of real estate he or she proposes to teach through demonstrating two years of teaching experience or other specialized experience approved by the director or two years of practical experience in the area of real estate that the person proposes to teach and evidence of satisfactory completion of eight hours of training and teaching techniques as approved by the director. The proposed amendment to the rule would authorize the use of instructional methods incorporating audio-visual instructional materials so long as a qualified teacher or instructor was available by telephone to respond to specific questions by students.

Reasons Supporting Proposed Action: The reason for this action is to allow courses

which utilize audio-visual materials as the primary instructional tool.

Agency Personnel Responsible for Drafting, Implementation and Enforcement: R. Y. Woodhouse, Fourth Floor, Highways-Licenses Building, Olympia, WA 98504, (206) 753-6915; and Gordon L. Smith, Sixth Floor, Highways-Licenses Building, Olympia, WA 98504, (206) 753-6681.

Person or Organization Proposing Rule: The rule amendments are proposed by the Real Estate Division of the Department of Licensing.

Agency Comments or Recommendations Regarding Statutory Language, Implementation, Enforcement, and Fiscal Matters: None.

Is This Rule Necessary as a Result of Federal Law or Federal or State Court Action: No. None of the rules are necessary as a result of federal law or court action.

AMENDATORY SECTION (Amending Order RE 114, filed 7/2/75)

WAC 308-124E-010 ADMINISTRATION OF TRUST ACCOUNTS. The real estate broker shall be responsible for establishing ((a)) trust bank accounts in a recognized Washington state depository for money received from clients and for keeping trust account records as follows:

(1) The trust bank accounts shall be ((a)) demand deposit accounts designated as a trust account in the name (firm name) of the real estate broker as licensed. ~~((Rents collected in performing property management services may at the option of a licensed real estate broker be deposited in an identified account separate from other trust accounts maintained by the broker.))~~ Provided, individual transaction trust accounts may be in a separate, interest-bearing account if directed by written agreement signed by the principals to the transaction. The agreement must specify the distribution of accumulated interest.

(2) The real estate broker shall sign all real estate trust account checks or assume all responsibility for any person or persons authorized by the broker to sign such checks.

(3) All funds or moneys received for any reason pertaining to the sale, renting, leasing or option of real estate or business opportunities or contract or mortgage collections shall be deposited in the broker's real estate trust bank account not later than the first banking day following receipt thereof, except

(a) Checks received as earnest money deposits when the earnest money agreement states that a check is to be held for a specified length of time, and

(b) Funds or moneys received as rent, contract payments or mortgage payments on real estate or business opportunities or mortgages owned exclusively by the real estate broker or the broker's real estate firm.

(4) Each deposit made to the real estate trust bank account shall be identified on the duplicate deposit slip to the specific transaction to which it applies.

(5) The real estate trust bank account must be in agreement at all times with the outstanding trust liability. The balance shown in the checkbook must equal the total of the outstanding liability as shown in the clients' ledger.

(6) The broker shall prepare a monthly trial balance of the clients' ledger, reconciling the ledger with the trust account bank statement and the trust account checkbook.

(7) The debit entries made to a client's ledger sheet must show the date of the check, check number, the amount of the check, the name of payee and the item covered.

(8) The credit entries made to a client's ledger sheet must show the date of deposit, amount of deposit, item covered to include but not limited to earnest money deposit, down payment, rent, damage deposit, rent or lease deposit.

(9) All disbursements of trust funds shall be made by check, drawn on the real estate trust bank account, identified thereon to a specific

real estate or business opportunity transaction. The number of each check, amount, date, payee, items covered and the specific transaction, rental, contract, mortgage or collection account must be shown on all check stubs or check register and agree exactly with the check written.

(10) Voided checks written on the real estate trust bank account shall have the "signature line" removed, be marked void, and be retained.

(11) A separate check shall be drawn on the real estate trust bank account, payable to the real estate broker as licensed, for each commission earned upon the final closing of the real estate or business opportunity transaction. Each commission check shall be identified to the specific transaction to which it applies.

(12) Commissions due another real estate broker or real estate firm may be paid from the real estate trust bank account. Such commissions shall be paid upon receipt of the funds. Commissions shared with another broker shall constitute a reduction of the gross commission.

(13) No deposits to the real estate trust bank account shall be made of funds received:

(a) Of any kind that belong to the real estate broker or the real estate firm, including funds to "open" the bank account or to keep the account from being "closed".

(b) That do not pertain to a client's real estate or business opportunity sales transaction or received in connection with a client's rental, contract or mortgage collection account.

(14) No disbursements from the real estate trust bank account shall be made:

(a) For items not pertaining to a specific real estate or business opportunity transaction or rental, contract or mortgage collection account.

(b) In advance of the closing of a real estate or business opportunity transaction, or before the happening of a condition set forth in the earnest money receipt and agreement, to the seller or to an escrow agent or to any person or for any reason without a written release from both the purchaser and the seller; provided, that in the event the agreement terminates according to its own terms prior to closing, disbursement or funds may be made as provided by said agreement.

(c) Pertaining to a specific real estate or business opportunity transaction or rental, contract or mortgage collection account in excess of the actual amount held in the real estate trust bank account in connection with such account.

(d) In payment of a commission due any person licensed to the real estate broker or in payment of any "overhead expense". Such expenditures must be paid from the regular business bank account.

(e) For bank charges of any nature to include the cost of printing checks. Such charges are "overhead expense". Arrangements must be made with the bank to have any charges that may be applicable to the real estate trust bank account charged to the regular business bank account or to have the bank submit a separate monthly statement of such charges in order that they may be paid from the regular business bank account.

(f) Of funds received as damage deposit on a lease or rental to the landlord (lessor-owner) or to any person or persons without the specific written authority of the tenant (lessee). Such deposits belong to the (lessee) tenant and are to remain in the real estate trust bank account until the end of the tenancy when they are to be disbursed to the person or persons (tenant or landlord) entitled to the deposit.

Reviser's Note: The typographical errors in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

AMENDATORY SECTION (Amending Order RE 114, filed 7/2/75)

WAC 308-124F-010 REAL ESTATE OFFICE IN SAME BUILDING AS RESIDENCE REQUIREMENTS. A real estate broker may maintain an office in the building wherein the broker resides (~~(-PROVIDING, such)~~) Provided: (1) the office is separate from any living quarters (~~(- AND PROVIDING That)~~) (2) the office is identified as a real estate office by a sign at the office entrance that is visible to the public; (3) the office entrance is open to the public and does not lead through any living quarters; (4) the office is in conformance with existing zoning; and (5) the office is accessible to the public by a reasonably locatable street address.

AMENDATORY SECTION (Amending Order RE 116, filed 4/30/76)

WAC 308-124H-020 ADMINISTRATION. (1) Each application from a private school, individual or agency seeking approval or consideration of courses shall designate one person responsible for administration of the real estate (~~(course to be conducted)~~) school.

~~((2))~~ Such person shall file with the real estate administrator, ~~((letters from employers))~~ evidence showing previous experience in educational administration or supervision or other activities related to education, and possessing experience in the area of real estate which that person or his instructors proposes to offer or teach.

~~((3))~~ In the case of a public community college, university, or vocational technical school, the head of the real estate department shall be conclusively presumed to meet the foregoing requirements.

(2) Any school, individual or agency requesting approval or consideration of courses shall not apply to itself, either as part of its name or in any manner, the designation of "college" or "university", unless it, in fact, meets the standards and qualifications and has been approved by the state agency having jurisdiction.

(3) Any application submitted by a school, individual or agency that is owned or controlled by licensed real estate brokerage business shall not be considered for approval.

(4) Real estate educational courses offered by national institutions with uniform scope and quality of representation may be approved regardless of the course location and instructors used.

Reviser's Note: RCW 34.04.058 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

AMENDATORY SECTION (Amending Order RE 125, filed 10/23/78)

WAC 308-124H-030 FILING OF COURSES. Each proprietary school, individual, association or agency seeking approval of courses, must apply on a form provided by the director. Courses must meet the following:

(1) Each course (~~((must))~~) shall include at least one text book that is in general circulation or other like material. ~~((If no text book is in general circulation, other material may be submitted for approval.))~~

(2) Each course must add to the practical knowledge of the real estate profession.

~~((A statement must accompany the application justifying the need for the course(s).))~~ Each course must be supervised or under the direction of at least one natural person who meets the qualifications of WAC 308-124H-060.

(4) Each course must deal with substantive real estate subject matter such as, but not limited to, legal aspects of real estate, real estate principles and practices, real estate finance, appraising, deposit receipts and earnest money agreements. General sales motivation courses will not qualify.

(5) Each course must require a comprehensive examination or (~~(final)~~) examination(s) and a final grade.

(6) Each course must require a minimum of thirty hours of classroom work for the student; a classroom hour is a period of fifty minutes of actual classroom or workshop instruction. The time allotted for examinations shall not be applicable towards the minimum hours of course study.

Reviser's Note: RCW 34.04.058 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

AMENDATORY SECTION (Amending Order RE 127, filed 6/27/79)

WAC 308-124H-040 APPROVAL OF COURSES. Each proprietary school, individual, association or agency seeking approval of a course or courses shall be required to file an application, on forms provided by the director, with the real estate administrator at least thirty days prior to the date of a regular meeting of the real estate commission. Applications which are completed and filed in a timely manner will be reviewed by the commission for recommendation to the director for consideration of approval or disapproval. The commission may recommend approval of courses solely for the broker requirement or solely for the second renewal requirement.

The director, with the advice of the real estate commission, may deny a course of instruction which, in the opinion of the director, does not meet the requirements of this chapter or meet the needs of the majority of licensees.

Upon approval or disapproval of a course or courses, the applicant will be so advised in writing by the director.

Any changes in course content~~((:))~~ or ~~((material, instructors:))~~ the directors~~((:))~~ or ownership ~~((or location))~~ of schools must be submitted to the administrator within twenty days from date of such change for referral to the director and real estate commission for consideration of continued approval.

Any change in course instructors, curriculum or instruction location must be submitted to the administrator prior to implementing such change, for approval by the director.

Approval may be withdrawn if the course is not conducted in accordance with this chapter or the school, or its owners, managers or employees, directly or indirectly, solicits information from applicants for a real estate license following the administration of any real estate examination to discover the context of and/or answer to any examination question or questions.

((Approval obtained prior to the effective date of these amended regulations shall expire on December 1, 1978. Subsequent approval and renewals shall expire on December 1, of each year thereafter.

Reviser's Note: The typographical errors in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

AMENDATORY SECTION (Amending Order RE 125, filed 10/23/78.)

WAC 308-124H-045 RECORD-KEEPING. Upon approval of a course or courses, each proprietary school, individual, association or agency shall, for a period of six years, establish and maintain for each student a complete, accurate and detailed record which shall include the student's attendance, total number of hours of instruction undertaken, and completed areas of study in real estate subjects prescribed by these regulations.

Upon request, a copy of these records shall be made available to the director or student for purposes of determining whether the student~~((s have met))~~ has satisfied the provisions of RCW 18.85.090 and/or 18.85.095.

It shall be the responsibility of the proprietary school, individual, association or agency to furnish each student with a grade report or transcript showing name of course, final grade, number of clock hours earned, and beginning and ending dates of each course attended.

AMENDATORY SECTION (Amending Order RE 125, filed 10/23/78)

WAC 308-124H-050 ((RENEWAL)) REVIEW APPLICATIONS. ~~((Renewal applications must be filed on a form provided by the director with the real estate administrator not later than November 1. All courses will be reviewed for compliance with the requirements of this chapter before continuing approval may be considered.))~~ All approved courses shall be submitted to the director for review annually for continued approval. The school shall make application on a form provided by the director. The application must be submitted not later than thirty days prior to the expiration of one year after the effective date of approval, which date will henceforth be the review date. Approval of any course not submitted for review prior to thirty days before the annual review date shall be cancelled. A cancelled course may be submitted for reapproval by making application as a new course.

((All renewal)) Review applications which are filed in a timely manner shall be submitted to the real estate commission for recommendation at the next scheduled commission meeting after thirty days from receipt of such application by the director ~~((for their recommendation))~~. Approval of a course remains in effect until the review application is acted upon by the commission and director. Upon approval or disapproval of a course or courses, the applicant will be so advised in writing by the director.

Courses which have received approval on or before November 1, 1980 will be assigned an annual review date by the director.

Reviser's Note: RCW 34.04.058 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

AMENDATORY SECTION (Amending Order RE 125, filed 10/23/78)

WAC 308-124H-060 TEACHERS [AND/]OR INSTRUCTORS. Each course of instruction herein being considered for approval shall be under the supervision of a qualified teacher and/or instructor who shall be present in the classroom at all sessions; provided, that if the instructional methods include use of pre-recorded audio and/or visual instructional materials, presentation shall be under the supervision of a monitor who shall be present in the classroom at all sessions and a qualified teacher and/or instructor who shall at the minimum be available by telephone to respond to specific questions from students.

Any teacher or instructor must demonstrate competency in the field of real estate they propose to teach. Such competency shall be demonstrated by any of the following:

- (1) Two years of teaching experience or other specialized ~~((expertise))~~ experience approved by the director; or
- (2) Two years experience in the area of real estate which that person proposes to teach; and evidence of satisfactory completion of eight hours of training in teaching techniques as approved by the director.

All persons seeking to qualify as a teacher or instructor after April 1, 1979, must have met the qualifications of subsection (1) or (2) of this section.

Reviser's Note: RCW 34.04.058 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

REPEALER

The following sections of the Washington Administrative Code are each repealed:

- (1) WAC 308-124F-050 SUBDIVISION ADVERTISING—FILING WITH DIRECTOR.
- (2) WAC 308-124F-200 SUMMARY REVOCATION OF LICENSES.
- (3) WAC 308-124G-010 GUIDELINES FOR WAIVER.

WSR 80-15-090

ADOPTED RULES

INSURANCE COMMISSIONER STATE FIRE MARSHAL

[Order FM 80-2—Filed October 21, 1980]

I, Thomas R. Brace, director of the State Fire Marshal Division, Office of Insurance Commissioner/State Fire Marshal, do promulgate and adopt at the Insurance Building, Room 325, Olympia, Washington 98504, the annexed rules relating to standards for fire protection residential treatment facilities for psychiatrically impaired children and youth, chapter 212-42 WAC.

This action is taken pursuant to Notice No. WSR 80-10-047 filed with the code reviser on August 6, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated pursuant to RCW 71.12.485 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 21, 1980.
By Thomas R. Brace
Director
Division of State Fire Marshal

Chapter 212-42 WAC
STANDARDS FOR FIRE PROTECTION RESI-
DENTIAL TREATMENT FACILITIES FOR PSY-
CHIATRICALY IMPAIRED CHILDREN AND
YOUTH

NEW SECTION

WAC 212-42-001 PURPOSE. The purpose of this regulation is to adopt recognized standards for the protection of life against the cause and spread of fire and fire hazards pursuant to RCW 71.12.485, with respect to all facilities to be licensed as residential treatment facilities for psychiatrically impaired children and youth.

NEW SECTION

WAC 212-42-005 DEFINITIONS. The following definitions shall apply to this regulation:

(1) "Building official" means the person or agency appointed by the governing body of each city, town or county for the administration and enforcement of the Uniform Fire Code, adopted by reference by the State Building Code Act.

(2) "Fire chief" means the chief of the fire department providing fire protection services to the facility.

(3) "Fire official" means the person or agency appointed by the governing body of each city, town or county for the administration and enforcement of the Uniform Fire Code, adopted by reference by the State Building Code Act.

(4) "Licensing agency" means the Washington state department of social and health services.

(5) "Psychiatric impairment" means severe emotional disturbance corroborated by clear psychiatric diagnosis provided that one or more of the following symptomatic behaviors is exhibited:

(a) Bizarreness, severe self-destructiveness, schizophrenic ideation, chronic school failure, or other signs or symptoms which are the result of gross, ongoing distortions in thought processes;

(b) School phobias, suicide attempts, or other signs or symptoms associated with marked severe or chronic effective disorders as defined in the most recent edition of "American Psychiatric Association Diagnostic and Statistical Manual;"

(c) Chronic sexual maladjustment, history of aggressive unmanageability including violent, chronic, grossly maladaptive behaviors which are associated with (a) or (b) above.

(6) "Residential treatment facility for psychiatrically impaired children and youth" means a residence, place or facility designed and organized to provide twenty-four hour residential care and long-term individualized, active treatment for clients who have been diagnosed or evaluated as psychiatrically impaired.

(7) "State Building Code Act" means chapter 19.27 RCW, effective January 1, 1975, which establishes state-wide building and fire prevention codes and mandates enforcement by each city, town and county.

NEW SECTION

WAC 212-42-010 APPLICABILITY. This regulation applies to all facilities licensed or subject to licensure as residential treatment facilities for psychiatrically impaired children and youth by the department of social and health services under chapter 71.12 RCW.

NEW SECTION

WAC 212-42-015 COMPLIANCE. All facilities licensed by the department of social and health services as residential treatment facilities for psychiatrically impaired children and youth shall comply with the provisions of this regulation.

NEW SECTION

WAC 212-42-020 INSPECTION. The licensing agency, upon receipt of an application for a license or at least thirty days before the expiration date of an existing license, shall submit to the state fire marshal in writing, a request for an inspection. The state fire marshal or his authorized representative shall make an inspection of the facility, and if it is found that the facility does not comply with the standards contained in this regulation, a written report shall be made to the facility listing the violations found, corrective actions necessary and time allowed for correction. As soon as practicable after the expiration date of the time allowed to effect the corrective measures, a reinspection shall be made to determine compliance.

NEW SECTION

WAC 212-42-025 APPROVAL. Upon the completion of the inspection, if the facility is in reasonable compliance with applicable standards, a notice of approval for licensing shall be forwarded to the licensing agency.

NEW SECTION

WAC 212-42-030 RIGHT OF APPEAL. A facility, aggrieved by the corrective orders of the state fire marshal or his authorized representative may appeal to the state fire marshal within five days of the order. If the state fire marshal confirms the order, it shall remain in force.

NEW SECTION

WAC 212-42-035 LOCAL CODES. Approvals are issued or denied on the basis of applicant's compliance with the state fire marshal's minimum fire and life safety standards. The enforcement of local fire and building codes is the responsibility of the respective fire and building officials.

NEW SECTION

WAC 212-42-040 STANDARDS. The following standards shall be applicable to all facilities built or licensed after the effective date of this regulation.

NEW SECTION

WAC 212-42-045 CONSTRUCTION REQUIREMENTS. New construction or major remodeling shall comply with the Group I, Division 1 requirements of the 1976 Uniform Building Code. This classification is advisory but not binding on local building officials charged with the administration and enforcement of the State Building Code Act.

NEW SECTION

WAC 212-42-050 MODERNIZATION OR RENOVATION. No construction in either modernization or renovation projects shall diminish the fire safety features of the facility below the level of new construction, as required elsewhere in this regulation. Alterations or installations of new building services equipment shall be accomplished as near as possible in conformance with the requirements for new construction.

NEW SECTION

WAC 212-42-055 ADDITIONS. Any addition shall be separated from any existing nonconforming structure by a noncombustible or limited-combustible fire partition having at least a two hour fire-resistance rating. Communicating openings in dividing fire partitions shall occur only in corridors and shall be protected by approved self-closing doors.

NEW SECTION

WAC 212-42-060 DESIGN, OPERATION. All facilities shall be so designed, constructed, maintained and operated as to minimize the possibility of a fire emergency requiring the evacuation of clients. The protection of clients from fire shall be provided by appropriate arrangement of facilities, adequate staffing and careful development of operating and maintenance procedures composed of the following:

- (1) Proper design, construction and compartmentation.
- (2) Provision for detection, alarm and extinguishment.
- (3) Fire prevention and planning, training and drilling programs for the isolation of fire, transfer of clients to areas of refuge or evacuation of the building.

NEW SECTION

WAC 212-42-065 COMPARTMENTATION. Every story used by clients for sleeping or treatment or any story having an occupant load of fifty or more persons, shall be divided into at least two compartments by smoke partitions having a fire resistance of at least one hour. No one compartment shall contain more than twenty-two thousand five hundred square feet or be over one hundred fifty feet in length or width.

NEW SECTION

WAC 212-42-070 SMOKE DETECTION. An approved, automatic smoke detection system shall be installed in all corridors. Detectors shall not be spaced further than thirty feet apart or more than fifteen feet from any wall, and shall be electrically interconnected with the fire alarm system. EXCEPTION: Where each client sleeping room is protected by such an approved detection system and a local detector is provided at the smoke partition and horizontal exits, such corridor systems will not be required on the client sleeping room floors.

NEW SECTION

WAC 212-42-075 FIRE ALARM. Every facility shall have an approved electrically supervised manual fire alarm system. Operation of any fire alarm activating device shall automatically, without delay, accomplish general alarm indication and sound an audible alarm in the affected fire zone. Coded systems shall be permitted. The fire alarm system shall be arranged to transmit an alarm automatically to the fire department legally committed to serve the area in which the facility is located or to an approved central station providing the alarm service.

NEW SECTION

WAC 212-42-080 EMERGENCY LIGHTING. Emergency lighting for means of egress shall be provided for every facility and shall comply with the following provisions:

- (1) Where maintenance of illumination depends upon changing from one energy source to another, there shall be no appreciable interruption of illumination during the changeover. Where emergency lighting is provided by a prime mover-operated electric generator, a delay of not more than ten seconds shall be permitted.
- (2) Emergency lighting facilities shall be arranged to maintain illumination to values of not less than one foot-candle measured at the floor for a period of one and one-half hours in the event of failure of normal lighting.
- (3) Electric battery-operated emergency lights shall use only reliable types of storage batteries, provided with suitable facilities for maintenance in properly charged condition.
- (4) An emergency lighting system shall be so arranged as to provide the required illumination automatically in the event of any interruption of normal lighting, such as any failure of public utility or other outside electrical power supply, opening of a circuit breaker or fuse, or any manual act(s), including accidental opening of a switch controlling normal lighting facilities.

NEW SECTION

WAC 212-42-085 SPRINKLER PROTECTION. Complete, approved automatic fire extinguishing protection shall be provided throughout all residential treatment facilities. The main sprinkler control valve(s) shall

be electrically supervised and the system electrically interconnected with the fire alarm system. The fire department connection shall be located as directed by the fire chief.

NEW SECTION

WAC 212-42-090 RESTRAINED CLIENTS. In buildings housing occupancies in which the personal liberties of clients are restrained within the building, reliable means shall be provided to permit the prompt release of clients confined in locked sections, spaces, or rooms in the event of fire or other emergency.

NEW SECTION

WAC 212-42-095 CLIENT RELEASE. Prompt release shall be guaranteed by adequate staff personnel that are continuously on duty (24 hours a day) and keys which shall be readily accessible.

NEW SECTION

WAC 212-42-100 LOCKED EXITS. Any emergency entrance which is locked may be classified as an exit provided that keys are readily available to attendants.

NOTE: Although locking exit doors and barring windows is always undesirable from the view of life safety, the code recognizes that this is necessary in some cases to restrain people. In these instances, provision shall be made for the continuous supervision and prompt release of restrained persons. Release of occupants shall be accomplished either by a system capable of automatically unlocking the doors in a means of egress, or by the presence of attendants who are continuously available and equipped with keys. In any event, continuous supervision is considered essential.

NEW SECTION

WAC 212-42-105 FIRE AND EVACUATION PLAN. The administration of every residential treatment facility for psychiatrically impaired children and adults shall have in effect and available to all supervisory personnel written copies of a plan for the protection of all persons in the event of fire and for their evacuation to areas of refuge and from the building when necessary. All employees shall be instructed and kept informed respecting their duties under the plan.

NEW SECTION

WAC 212-42-110 SMOKE CONTROL. Every client room shall have an outside window or outside door arranged and located so that it can be opened from the inside without the use of tools or keys to permit the venting of products of combustion and to permit any occupant to have direct access to fresh air in case of emergency.

EXCEPTION: Buildings designed with an engineered smoke control system in accordance with NFPA 90A need not comply with this requirement.

NEW SECTION

WAC 212-42-115 FIRE DRILLS. At least twelve fire drills shall be held every year. Drills shall be conducted quarterly on each shift to familiarize personnel with signals and emergency action required under varied conditions. When drills are conducted between 9:00 p.m. and 6:00 a.m., a coded announcement may be used instead of audible alarm. Fire drills shall include the transmission of a fire alarm signal and simulation of emergency fire conditions, except that the movement of infirm or bedridden clients to safe areas is not required.

NEW SECTION

WAC 212-42-120 EQUIPMENT MAINTENANCE. Every required automatic sprinkler system, fire detection and alarm system, exit lighting, fire door and other items or equipment required by this regulation or the applicable building and/or fire code shall be continuously maintained in proper operating condition. Equipment shall be tested or operated in accordance with manufacturers' recommendations and/or at sufficient intervals to assure reliability. Records of all tests and inspections shall be maintained for review. Tests and inspections shall be under the supervision of a responsible person.

NEW SECTION

WAC 212-42-125 SEVERABILITY. If any provision of this regulation or its application to any person is held invalid, the remainder of the regulation or the application of the provision to other persons or circumstances is not affected.

WSR 80-15-091
RULES OF COURT
STATE SUPREME COURT
[October 21, 1980]

IN THE MATTER OF THE CORRECTION
OF ERRORS IN CR 4(b)(2) AND NO. 25700-A-299
4.1(b)(2). ORDER

It having come to the attention of the Court that the forms of summons published at 93 Wn.2d 1104, 06, to accompany CR 4(b)(2) and CR 4.1(b)(2) are in error; Now, therefore, it is hereby

ORDERED:

(a) That the corrected forms as attached hereto are to be published expeditiously in the Washington Reports and are to supersede those published at 93 Wn.2d 1104, 06.

(b) That the corrected forms shall be effective upon publication thereof.

DATED at Olympia, Washington, this 21st day of October, 1980.

Hugh J. Rosellini	Robert F. Utter
Charles F. Stafford	Charles Horowitz
Charles T. Wright	James M. Dolliver
Robert F. Brachtenbach	Floyd V. Hicks
	William H. Williams

CR 4(b)(2)

(2) Form. Except in condemnation cases the summons for personal service in the state shall be substantially in the following form:

SUPERIOR COURT OF WASHINGTON
FOR () COUNTY

Plaintiff,
v.

Defendant.

No. _____

SUMMONS (20 days)

TO THE DEFENDANT: A lawsuit has been started against you in the above entitled court by _____, plaintiff. Plaintiff's claim is stated in the written complaint, a copy of which is served upon you with this summons.

In order to defend against this lawsuit, you must respond to the complaint by stating your defense in writing, and by serving a copy upon the person signing this summons within 20 days after the service of this summons, excluding the day of service, or a default judgment may be entered against you without notice. A default judgment is one where plaintiff is entitled to what he asks for because you have not responded. If you serve a notice of appearance on the undersigned person, you are entitled to notice before a default judgment may be entered.

You may demand that the plaintiff file this lawsuit with the court. If you do so, the demand must be in writing and must be served upon the person signing this summons. Within 14 days after you serve the demand, the plaintiff must file this lawsuit with the court, or the service on you of this summons and complaint will be void.

If you wish to seek the advice of an attorney in this matter, you should do so promptly so that your written response, if any, may be served on time.

This summons is issued pursuant to Rule 4 of the Superior Court Civil Rules of the State of Washington.

(signed) _____

Print or Type Name

() Plaintiff () Plaintiff's Attorney

P.O. Address _____

Telephone Number _____

Dated _____

CR 4.1(b)(2)

(2) Form. The summons for personal service in the state in an action for dissolution of marriage shall be substantially in the form below. The summons for personal service in the state in any other action authorized by RCW 26.09 should be adapted from this form. The summons for personal service out of state should be adapted from this form and must include the modifications required by statute. See RCW 4.28.180.

SUPERIOR COURT OF WASHINGTON
FOR () COUNTY

In the Matter of the
Marriage of

Petitioner,
and

Respondent.

No. _____

SUMMONS FOR
DISSOLUTION OF MARRIAGE

TO THE RESPONDENT: The petitioner has filed with the clerk of the above court a petition requesting that your marriage be dissolved. Additional requests, if any, are stated in the petition, a copy of which is attached to this summons.

You may respond to this summons and petition by filing a written response with the clerk of the court and serving a copy of your response on the person signing this summons. If you do not serve your written response within 20 days after the date this summons was served on you, exclusive of the day of service, the court may enter an order of default against you, and at the end of 90 days after service, the court may, without further notice to you, enter a decree dissolving your marriage and approving or providing for other relief requested in the petition.

One method of filing your response and serving a copy on the petitioner is to send them by certified mail with return receipt requested.

Dated _____ (signed) _____

Print or Type Name

FILE RESPONSE WITH:

() Petitioner () Petitioner's Attorney

Clerk of the Court
_____ County Courthouse

SERVE A COPY OF YOUR RESPONSE ON:

Address _____ Address _____
, Wa , Wa
(city) (zip) (city) (zip)

WSR 80-15-092
NOTICE OF PUBLIC MEETINGS
WASHINGTON STATE UNIVERSITY
[Memorandum—October 15, 1980]

On March 28, 1980, I gave you the dates and places for meetings of the Washington State University Board of Regents as changed on March 7, 1980. It has now become necessary to change the November 21, 1980, meeting from the Intercollegiate Center for Nursing Education in Spokane to the Ridpath Hotel in Spokane. Meeting time is still set for 9:00 a.m.

WSR 80-15-093
PROPOSED RULES
STATE BOARD OF EDUCATION
[Filed October 22, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the State Board of Education, intends to adopt, amend, or repeal rules concerning educational service districts, chapter 180-22 WAC;

that such agency will at 9:00 a.m., Thursday, December 4, 1980, in the Phoenix Ballroom B and C, Seattle Hyatt House, 170th and Pacific Highway South, Seattle, WA, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 9:00 a.m., Friday, December 5, 1980, in the same location as shown above.

The authority under which these rules are proposed is chapter 179, Laws of 1980.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to December 4, 1980, and/or orally at 9:00 a.m., Thursday, December 4, 1980, same location as shown above.

Dated: October 22, 1980
By: Wm. Ray Broadhead
Secretary

STATEMENT OF PURPOSE

Rule title: WAC 180-22-255 Eligibility—Declaration of candidacy—Withdrawal—Lapse of election. WAC 180-22-270 Voting. WAC 180-22-280 Postage.

Description of purpose: To bring rules into compliance with RCW, to make editorial changes and clarify election rules.

Statutory authority: chapter 179, Laws of 1980.

Summary of rule: Educational service district boards—Election rules. Chapter 179, Laws of 1980 amended RCW 28A.21.033 to set date for receipt of ballots if not post-marked or if postmark is not legible.

Reasons supporting proposed action: To bring rules into compliance with chapter 179, Laws of 1980 and clarify election rules. Agency personnel responsible for drafting, implementation and enforcement: Dr. Wm. Ray Broadhead, Old Capitol Building - Room 106, Olympia, Washington 98504 MS FG 11, Telephone: 206/753-6715
Person/organization proposing rule: State Board of Education.

Private ___ Public ___ Governmental X
Agency comments or recommendations regarding statutory language, implementation, enforcement, fiscal matters: Approve.
Necessary as result of federal law ___ federal court action ___ state court action ___ (If so, attach copy of law or court decision): N/A

AMENDATORY SECTION (Amending Order 16-77, filed 12/13/77)

WAC 180-22-255 ELIGIBILITY—DECLARATION OF CANDIDACY—WITHDRAWAL—LAPSE OF ELECTION. (1) A person is eligible to be a candidate for membership on an educational service district board if he or she is a registered voter and a resident of the board-member district for which the candidate files. Restriction on other service pursuant to RCW 28A.21.0306.

(2) A person who desires to file for candidacy shall do so by completing a declaration of candidacy and affidavit on a form prepared and provided by the secretary to the state board of education and the biographical material required by WAC 180-22-260. The filing period is from September ~~((+to))~~ first and extends through September ~~((+6))~~ sixteenth. Any declaration of candidacy which is not received or post-marked before the seventeenth day of September, or if received by mail without a postmark or an illegible postmark on or before ~~((midnight))~~ 5:00 p.m. September ~~((+6))~~ twenty-first shall not be accepted by the secretary to the state board of education and such a declarant may not be a candidate.

(3) Declaration of candidacy may not be withdrawn if request for withdrawal is not received or postmarked on or before September ~~((20))~~ twentieth.

(4) Pursuant to RCW 28A.21.033, there is no provision for write-in candidates. A scheduled election shall be lapsed, the position deemed stricken from the ballot (~~(no purported write-in votes counted)~~) and no candidate certified as elected, when a void in candidacy, including but not limited to an absence of any candidates filing for the position, occurs or a vacancy occurs involving an unexpired term to be filled on or after September ((+7)) seventeenth.

AMENDATORY SECTION (Amending Order 16-77, filed 12/13/77)

WAC 180-22-270 VOTING. (1) The election shall be conducted in strict accordance with the requirements of section ((+6)) 17, chapter 283, Laws of 1977 ex. sess. ((RCW 28A.21-)) [RCW 28A.21-032]) (RCW 28A.21.033).

(2) In addition to the timelines, methods, and provisions contained in statute, the following shall apply:

(a) Ballots shall be mailed to each eligible voter with two return envelopes, an outer or larger envelope labeled "official ballot" and an inner or smaller envelope which is unlabeled. The "official ballot" envelope shall be postage paid and preaddressed with the office of the secretary to the state board of education as the addressee;

(b) The voter shall place his or her name, in a legible manner, in the space provided on the "official ballot" envelope. The ballot when completed shall be placed in the unlabeled envelope, which may not be marked in any manner, and that envelope shall be sealed. The unlabeled envelope shall then be placed in the "official ballot" envelope, which is then sealed;

(c) The ballot should then be mailed to the secretary to the state board of education;

(d) The secretary to the state board of education and the election board shall not count any ballot which:

(i) Is contained in other than the "official ballot" envelope; or
(ii) Is received which does not identify the voter as required by subsection (2)(b) above ((or which fails to comply with the statutory deadline)); or

(iii) Is mailed and postmarked after midnight on the sixteenth day of October; or

(iv) Is received by mail without a postmark or an illegible postmark after 5:00 p.m. October twenty-first; or

(v) Cast a vote for a candidate not officially on the ballot; or
(vi) Cast a vote for more than one candidate in a board member district;

(e) The secretary to the state board of education shall compile a list of those eligible voters voting: PROVIDED, That in no event shall the list indicate in any manner how an eligible voter has cast his or her vote; and

(f) All ballots shall be counted on one day chosen by the secretary to the state board of education but not later than October twenty-fifth.

As the ballots are received by the secretary to the state board of education, he/she, or a designated representative, shall determine the eligibility of the voter and, provided the "official ballot" has been properly submitted, make a record of the voter having voted on a list of eligible voters. The "official ballot" envelope shall be opened not more than twenty-four hours prior to the day chosen for the counting of ballots. At that time the unlabeled envelope will be removed, unopened, and placed in a ballot box to await counting by the election board. On the date set for counting the ballots the secretary to the state board of education shall certify to the election board that ballots properly received were duly recorded on the list of eligible voters as received. "Official ballot" envelopes not properly submitted shall be reviewed and accepted or rejected by the election board. Those "official ballots" which are accepted by the election board shall be opened and the unlabeled envelope, unopened, shall be placed in the ballot box. The unlabeled, unopened envelopes in the ballot box shall then be opened and the votes tallied by the election board.

AMENDATORY SECTION (Amending Order 12-77, filed 8/30/77, effective 8/30/77)

WAC 180-22-280 POSTAGE. Postage for the casting of votes by mail shall be prepaid by the state board of education by providing eligible voters a preaddressed, postage paid "official ballot" envelope.

WSR 80-15-094
PROPOSED RULES
BOARD OF HEALTH
[Filed October 22, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Washington State Board of Health, intends to adopt, amend, or repeal rules concerning certificate of need, amending chapter 248-19 WAC;

that such agency will at 9:00 a.m., Wednesday, November 26, 1980, in the South Auditorium, Federal Building, 915 Second Avenue, Seattle, WA, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 9:00 a.m., Wednesday, November 26, 1980, in the South Auditorium, Federal Building, 915 Second Avenue, Seattle, WA.

The authority under which these rules are proposed is RCW 70.38.135.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to November 26, 1980, and/or orally at 9:00 a.m., Wednesday, November 26, 1980, South Auditorium, Federal Building, 915 Second Avenue, Seattle, WA.

Dated: October 22, 1980

By: John A. Beare, MD
Secretary

STATEMENT OF PURPOSE

This statement is filed pursuant to RCW 34.04.045.

Amend chapter 248-19 WAC. The amendments to this chapter include the repeal of WAC 248-19-290; the addition of six new sections (WAC 248-19-325, -355, -403, -405, -415, and -475); and the amendment of all other sections of chapter 248-19 WAC with the exceptions of WAC 248-19-380, -460, and -470.

The purpose of the amendments is to make chapter 248-19 WAC consistent with the provisions of chapter 70.38 RCW, as amended by chapter 139, Laws of 1980, 46th Legislature and Public Law 96-79.

Statutory authority for this action is found in RCW 70.38.135 (Department services and surveys - Board of Health Rules).

Summary of the Rule or Rule Change:

The rules and regulations delineate the undertakings of health care facilities which are subject to Certificate of Need Review, provide for projects involving health care facilities which will be owned or controlled by health maintenance organizations to be exempt from Certificate of Need review under certain conditions, and include requirements pertaining to the acquisition of major medical equipment.

The rules include a requirement for a concurrent review process to be followed in the review of projects involving health services

or facilities for health services. The rules prescribe the criteria to be applied and the procedures to be followed in the various review processes. They also prescribe the processes and procedures applicable to the conduct of the Certificate of Need program.

Persons responsible for drafting the rule:

Names: Myrtle O'Boyle, Head
Health Facility Development Section
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Office: Office of State Health Planning and Development

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Proponent - DSHS.

Federal Law and Rules:

These rules are necessary because of Title XV of the Public Health Service Act as amended by the Health Planning and Resources Development Amendments of 1979 (Public Law 96-79). The final federal rules pertaining to Certificate of Need Programs pursuant to Public Law 96-79 are not yet available. They are to be published in the Federal Register before the end of October 1980.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-200 PURPOSE OF CHAPTER 248-19 WAC. The following rules and regulations are adopted pursuant to ~~((chapter 161, Laws of 1979 extraordinary session (46th Legislative Session) [chapter 70.38 RCW], the State Health Planning and Resources Development Act,))~~ chapter 70.38 RCW for the purpose of establishing a certificate of need program which is consistent with the provisions of ~~((Public Law 93-641, the National Health Planning and Resources Development Act of 1974 and the provisions of the State Health Planning and Resources Development Act))~~ Title XV of the Public Health Service Act as amended by the Health Planning and Resources Development Amendments of 1979 (Public Law 96-79).

AMENDATORY SECTION (Amendatory Order 188, filed 11/30/79)

WAC 248-19-210 PURPOSE OF CERTIFICATE OF NEED PROGRAM. The purpose of the certificate of need program is to ensure the obligation of capital expenditures, the development and offering of ~~((new))~~ institutional health services, and the acquisition of major medical equipment are consistent with the public policy of the state of Washington, set forth in ~~((section 1, chapter 161, Laws of 1979 extraordinary session (46th Legislative Session) [RCW 70.38-015]))~~ RCW 70.38.015.

"(1) That planning for promoting, maintaining, and assuring a high level of health for all citizens of the state, and for the provision of health services, health manpower, health facilities, and other resources is essential to the health, safety, and welfare of the people of the state. Such planning is necessary on both a state-wide and regional basis and must maintain responsiveness to changing health and social needs and conditions. The marshaling of all health resources to assure the quality and availability of health services to every person must be the goal of such planning, which must likewise assure optimum efficiency, effectiveness, equity, coordination, and economy in development and implementation to reach that goal

(2) That the development and offering of new institutional health services should be accomplished in a manner which is orderly, timely,

economical, and consistent with the effective development of necessary and adequate means of providing quality health care for persons to be served by such facilities without unnecessary duplication or fragmentation of such facilities;

(3) That the development of health resources, including the construction, modernization, and conversion of health facilities, should be accomplished in a planned, orderly fashion, consistent with identified priorities; ~~((and))~~

(4) That the development and maintenance of adequate health care information and statistics essential to effective health planning and resources development be accomplished; and

(5) That the strengthening of competitive forces in the health services industry, wherever competition and consumer choice can constructively serve to advance the purposes of quality assurance, cost effectiveness, and access, should be implemented."

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-220 DEFINITIONS. For the purposes of ~~((these regulations))~~ chapter 248-19 WAC, the following words and phrases shall have the following meanings unless the context clearly indicates otherwise.

(1) "Acute care facilities" means hospitals and ambulatory surgical facilities.

(2) "Affected persons" means the person whose proposal is being reviewed, the health systems agency for the health service area in which the proposed ~~((new institutional health service))~~ project is to be ~~((offered or developed))~~ located, health systems agencies serving contiguous health systems areas, health care facilities and health maintenance organizations located in the health service area in which the project is proposed to be located which provide ((institutional health)) services similar to the services under review, health care facilities and health maintenance organizations, which, prior to receipt by the agency of the proposal being reviewed, have formally indicated an intention to provide similar services in the future, any agency which establishes rates for health care facilities or health maintenance organizations in the state, and ((those)) members of the public who are to be served by the proposed ((new institutional health services)) project.

(3) "Ambulatory care facility" means any place, building, institution or distinct part thereof which is not a health care facility as defined in this section and which is operated for the purpose of providing health services to individuals without providing such services with board and room on a continuous twenty-four hour basis. The term "ambulatory care facility" includes the offices of private physicians, whether for individual or group practice.

(4) "Ambulatory surgical facility" means a facility, not a part of a hospital, which provides surgical treatment to patients not requiring inpatient care in a hospital. This term does not include a facility in the offices of private physicians or dentists, whether for individual or group practice, if the privilege of using such facility is not extended to physicians or dentists outside the individual or group practice.

~~((4))~~ (5) "Applicant," except as used in WAC 248-19-390, means any person ~~((or any individual with a ten percent or greater financial interest in a partnership or corporation or other comparable legal entity that))~~ who proposes to ((offer or develop a new institutional health service)) engage in any undertaking which is subject to review under the provisions of ((the State Health Planning and Resources Development Act and Public Law 93-641, or to undertake expenditures in preparation for such offering or development of such a service)) chapter 70.38 RCW and Title XV of the Public Health Service Act as amended by Public Law 96-79.

"Applicant," as used in WAC 248-19-390, means any person or individual with a ten percent or greater financial interest in a partnership or corporation or other comparable legal entity that engages in any undertaking which is subject to review under the provisions of chapter 70.38 RCW and Title XV of the Public Health Service Act as amended by Public Law 96-79.

~~((5))~~ (6) "Annual implementation plan" means a description of objectives which will achieve goals of the health systems plan and specific priorities among the objectives. The annual implementation plan is for a one-year period and must be reviewed and amended as necessary on an annual basis.

~~((6))~~ (7) "Board" means the Washington state board of health.

~~((7))~~ (8) "Capital expenditure" means an expenditure, including a force account expenditure (i.e., an expenditure for a construction project undertaken by a facility as its own contractor), which, under generally accepted accounting principles, is not properly chargeable as

an expense of operation or maintenance. Where a person makes an acquisition under lease or comparable arrangement, or through donation, which would have required certificate of need review if the acquisition had been made by purchase, such acquisition shall be deemed a capital expenditure. Capital expenditures include donations of equipment or facilities to a health care facility which if acquired directly by such facility would be subject to review under the provisions of this chapter and transfer of equipment or facilities for less than fair market value if a transfer of the equipment or facilities at fair market value would be subject to such review.

~~((8))~~ (9) "Certificate of need" means a written authorization by the secretary for a person to implement a proposal for one or more ~~((particular new institutional health services))~~ undertakings.

~~((9))~~ (10) "Certificate of need unit" means that organizational unit of the department which is responsible for the management of the certificate of need program.

~~((10))~~ (11) "Commencement of construction" means whichever of the following occurs first: Giving notice to proceed with construction to a contractor for a construction project; beginning site preparation or development~~((excavation and));~~ excavating or starting the foundation for a construction project; or beginning alterations, modification, improvement, extension or expansion of an existing building.

~~((11))~~ (12) "Construction" means the erection, building, alteration, remodeling, modernization, improvement, extension or expansion of a physical plant of a health care facility or the conversion of a building or portion thereof to a health care facility.

~~((12))~~ (13) "Council" means the state health coordinating council established under the provisions of ~~((Public Law 93-641))~~ chapter 70.38 RCW and ~~((the State Health Planning and Resources Development Act))~~ Title XV of the Public Health Service Act as amended by Public Law 96-79.

~~((13))~~ "Defined population" means the population that is or may reasonably be expected to be served by an existing or proposed health care facility. "Defined population" shall also include persons who prefer to receive the services of a particular recognized school or theory of medical care. "Defined population" shall not be limited to a geographical area.)

(14) "Days," except when called "working days," means calendar days which are counted by beginning with the day after the date of the act, event or occurrence from which the designated period of time begins to run. If the last day of the period so counted should fall on a Saturday, Sunday or legal holiday observed by the state of Washington, a designated period shall run until the end of the first working day which follows the Saturday, Sunday or legal holiday.

"Working days" exclude all Saturdays and Sundays, January 1, February 12, the third Monday in February, the last Monday of May, July 4, the first Monday in September, November 11, the fourth Thursday in November, the day immediately following Thanksgiving day and December 25. Working days are counted by beginning with the first working day after the date of the act, event or occurrence from which a designated period of time begins to run.

(15) "Department" means the Washington state department of social and health services.

~~((15))~~ "Development" or "to develop," when used in connection with health services means undertaking those activities which upon their completion will result in the offering of a new institutional health service or the incurring of a financial obligation in relation to the offering of such a service. PROVIDED, HOWEVER, That this term shall not be interpreted to include long-range planning or site acquisition or activities involved in preparation to offer or develop including community needs assessment and feasibility or marketing studies.)

(16) "Expenditure minimum" means one hundred fifty thousand dollars for the twelve-month period beginning with October 1979, and for each twelve-month period, adjusted to reflect the change in the preceding twelve-month period, in an index established by rules and regulations by the department for the purpose of making such adjustment.

(17) "Health care facility" means hospitals, psychiatric hospitals, tuberculosis hospitals, nursing homes, both skilled nursing facilities and intermediate care facilities, kidney disease treatment centers including freestanding hemodialysis units, ambulatory surgical facilities, rehabilitation facilities, and home health agencies, and includes such facilities when owned and operated by the state or a political subdivision or instrumentality of the state and such other facilities as required by Title XV of the Public Health Service Act as amended by Public Law 93-641 and implementing regulations, but does not include Christian Science ~~((sanitoriums))~~ sanatoriums operated or listed and

certified by the First Church of Christ Scientist, Boston, Massachusetts.

~~((17))~~ (18) "Health maintenance organization" means ~~((any entity defined under RCW 48.46.020(1) and any other))~~ a public or private organization, organized under the laws of ~~((any))~~ the state, which:

(a) Is a qualified health maintenance organization under Title XIII, Section 1310(d) of the Public Health Service Act; or

~~((b))~~ (i) Provides or otherwise makes available to enrolled participants health care services, including at least the following basic health care services: Usual physician services, hospitalization, laboratory, x-ray, emergency and preventive services, and out-of-area coverage;

~~((b))~~ (ii) Is compensated (except for copayments) for the provision of the basic health care services listed in ~~((the preceding (a) of this definition))~~ ~~((b))~~ (i) of this subsection to enrolled participants ~~((on a predetermined))~~ by a payment which is paid on a periodic ~~((rate))~~ basis without regard to the date the health care services are provided and which is fixed without regard to the frequency, extent, or kind of health service actually provided; and

~~((c))~~ (iii) Provides physicians' services primarily ~~((it))~~ (A) directly through physicians who are either employees or partners of such organization, or ~~((it))~~ (B) through arrangements with individual physicians or one or more groups of physicians (organized on a group practice or individual practice basis).

~~((The term "health maintenance organization for which assistance may be provided under Title XIII" means a health maintenance organization which is qualified under section 1310(d) of the Public Health Service Act or a health maintenance organization which the secretary of the United States department of health, education and welfare determines, upon the basis of an application and the submission of any information and assurances which he finds necessary, may be eligible for assistance under Title XIII of the Public Health Service Act.~~

~~((18))~~ (19) "Health services" means clinically related (i.e., preventive, diagnostic, curative, rehabilitative, or palliative) services and includes alcoholism, drug abuse~~((;))~~ and mental health services, and radiological diagnostic health services which are provided by fixed or mobile computed tomographic scanning equipment. A computed tomographic head scanner and a computed tomographic body scanner are considered to provide separate services. A computed tomographic fixed scanner and a computed tomographic mobile scanner are considered to provide separate services.

~~((19))~~ (20) "Health systems agency" means a public regional planning body or a private nonprofit corporation which is organized and operated in a manner that is consistent with the laws of the state of Washington and Public Law 93-641 and which is capable of performing each of the functions described in ~~((section 8 of the State Health Planning and Resources Development Act))~~ RCW 70.38.085 and is capable as determined by the secretary of the United States department of health~~((education and welfare))~~ and human services, upon recommendation of the governor or the council, of performing each of the functions described in the federal law, ~~((Public Law 93-641))~~ Title XV of the Public Health Service Act as amended by Public Law 96-79.

"Appropriate health systems agency" means the health systems agency for the health service area in which a particular project is to be located.

~~((20))~~ (21) "Health systems plan" means a plan established by a health systems agency which is a detailed statement of goals and resources required to reach those goals as described in ~~((Public Law 93-641))~~ the federal law, Title XV of the Public Health Service Act as amended by Public Law 96-79. Goals describe a healthful environment and health systems in the health service area which, when developed, will assure that quality health services will be available and accessible in a manner which assures continuity of care, at reasonable cost, for all residents of the area; are responsive to the unique needs and resources of the health service area; ~~((and))~~ take into account national guidelines for health planning policy and are responsive to statewide health needs ~~((and priorities))~~ as determined by the department. The health systems plan ~~((is for a period longer than one year and must be reviewed and amended as necessary on an annual basis))~~ also describes institutional health services and such other services as described in Title XV of the Public Health Service Act as amended by Public Law 96-79, as needed to provide for the well-being of persons receiving health care within the health service area.

~~((21))~~ (22) "Home health agency" means a public agency or private organization or subdivision of such an agency or organization which is primarily engaged in providing nursing services and other

therapeutic services (e.g., physical therapy, occupational therapy, nutritionist's services, home health aide services and social services), within a defined geographic area, on a part-time, intermittent or visiting basis to ill or disabled persons in residences which are their homes.

~~((22))~~ (23) "Hospital" means any institution, place, building or agency or distinct part thereof which qualifies or is required to qualify for a license under chapter 70.41 RCW or any state owned and operated institution which is primarily engaged in providing to inpatients, by or under the supervision of physicians, diagnostic services and therapeutic services for medical diagnosis, treatment and care of injured, disabled, or sick persons, or rehabilitation services of injured, disabled, or sick persons. Such term includes tuberculosis hospitals but does not include psychiatric hospitals.

~~((23))~~ (24) "Hospital commission" means the Washington state hospital commission established pursuant to chapter 70.39 RCW.

~~((24))~~ (25) "Inpatient" means a person who receives health care services with board and room in a health care facility on a continuous twenty-four hour a day basis.

(26) "Institutional health services" means health services provided in or through health care facilities and entailing annual operating costs of at least seventy-five thousand dollars for the twelve-month period beginning with October 1979, and for each twelve-month period thereafter the figure in effect for the preceding twelve-month period adjusted to reflect the change in the preceding twelve-month period in an index established by rules and regulations by the department.

~~((25))~~ (27) "Intermediate care facility" means any institution or distinct part thereof which is certified as an intermediate care facility for participation in the Medicaid (Title XIX of the Social Security Act) program.

~~((26))~~ (28) "Kidney disease treatment center" means any place, institution, building or agency or a distinct part thereof which is equipped and operated to provide services, which include dialysis services, to persons who have end stage renal disease.

~~((27))~~ (29) "Long-range health facility plan" means a document prepared by each hospital which contains a description of its plans for substantial changes in its facilities and services for three years.

(30) "Major medical equipment" means medical equipment which is used for the provision of medical and other health services and which costs in excess of one hundred fifty thousand dollars, except that such term does not include medical equipment acquired by or on behalf of a clinical laboratory to provide clinical laboratory services if the clinical laboratory is independent of a physician's office and a hospital and it has been determined under Title XVIII of the Social Security Act to meet the requirements of paragraphs (10) and (11) of section 1861(s) of such act.

~~((28))~~ (31) "May" means permissive or discretionary.

~~((29))~~ "New institutional health services" means one or more of the following:

(a) The construction, development, or other establishment of a new health care facility including a health care facility owned, operated or otherwise utilized by a health maintenance organization;

(b) Any expenditure by or on behalf of a health care facility, including a health care facility owned, operated or otherwise utilized by a health maintenance organization, in excess of one hundred and fifty thousand dollars which under generally accepted accounting principles consistently applied is a capital expenditure, excluding: (i) Expenditures for site acquisition, (ii) acquisition of existing acute care health facilities and health maintenance organizations, and (iii) expenditures solely for the termination or reduction of beds or of a health service;

(c) Any acquisition, except of a site or an existing acute care facility, by or on behalf of a health care facility (including a health care facility owned, operated or otherwise utilized by a health maintenance organization) under lease or comparable arrangement, or through donation, which would be subject to certificate of need review if the acquisition were by purchase;

(d) A change in bed capacity of a licensed health care facility, including a health care facility owned, operated or otherwise utilized by a health maintenance organization, which increases the total number of licensed beds or redistributes beds among facility and service categories of acute care, skilled nursing, intermediate care, and boarding home care if the bed redistribution is to be effective for a period in excess of six months;

(e) In a health care facility which is not required to be licensed, a change in bed capacity which increases the total number of beds, distributes beds among various categories or relocates such beds from one physical facility or site to another by more than ten beds or more than

ten percent of total bed capacity as defined by the department, which ever is less, over a two-year period;

(f) Any health services which are offered in or through a health care facility, including a health care facility owned, operated or otherwise utilized by a health maintenance organization, which were not offered on a regular basis by, in, or through such health care facility within the twelve-month period prior to the time such services would be offered;

(g) Any expenditure by or on behalf of a health care facility, including a health care facility owned, operated or otherwise utilized by a health maintenance organization, in excess of one hundred and fifty thousand dollars made in preparation for the offering or development of a new institutional health service and any arrangement or commitment made for financing the offering, or development of the new institutional health service (expenditures in preparation for the offering of a new institutional health service shall include expenditures for architectural designs, plans, working drawings and specifications but shall exclude expenditures for feasibility surveys for health maintenance organizations and expenditures for the construction, development or other establishment of a facility or services by a health maintenance organization which are not provided in or through a health care facility owned, operated or otherwise utilized by the health maintenance organization); and

(h) Radiological diagnostic health services which are offered in, at, through, by or on behalf of a health care facility, including a health care facility owned, operated or otherwise utilized by a health maintenance organization, which are provided by fixed or mobile computed tomographic scanning equipment except where these services are an addition to or replacement of the same service offered in, at, through, by or on behalf of the health care facility. "Radiological diagnostic services," as used in this section shall be interpreted to include services offered in space leased or made available to any person by the health care facility. The service provided by a computed tomographic head scanner shall not be considered the same service as that provided by a computed tomographic body scanner. The service provided by a computed tomographic fixed scanner shall not be considered the same service as that provided by a computed tomographic mobile scanner.

~~(30))~~ (32) "Nursing home" means any home, place, institution, building or agency or distinct part thereof which operates or maintains facilities providing convalescent or chronic care, or both, for a period in excess of twenty-four consecutive hours for three or more patients not related by blood or marriage to the operator, who, by reason of illness or infirmity, are unable properly to care for themselves. Convalescent and chronic care may include, but not be limited to, any or all procedures commonly employed in waiting on the sick, such as administration of medicines, preparation of special diets, giving of bedside nursing care, application of dressings and bandages, and carrying out of treatment prescribed by a duly licensed practitioner of the healing arts. The term "nursing home" includes any such entity which is owned and operated by the state or which is licensed or required to be licensed under the provisions of chapter 18.51 RCW and any other intermediate care facility or skilled nursing facility as these terms are defined in this section ((of definitions)). The term "nursing home" does not include: General hospitals or other places which provide care and treatment for the acutely ill and maintain and operate facilities for major surgery or obstetrics or both; psychiatric hospitals as defined in this section; private establishments, other than private psychiatric hospitals, licensed or required to be licensed under the provisions of chapter 71.12 RCW; boarding homes licensed under the provisions of chapter 18.20 RCW; or any place or institution which is operated to provide only board, room and laundry to persons not in need of medical or nursing treatment or supervision.

~~((31))~~ (33) "Obligation," when used in relation to a capital expenditure, means the following has been incurred by or on behalf of a health care facility ((or a health maintenance organization)):

(a) An enforceable contract has been entered into by a health care facility ((or health maintenance organization)) or by a person proposing such capital expenditure on behalf of the health care facility ((or health maintenance organization)) for the construction, acquisition, lease or financing of a capital asset; or

(b) A formal internal commitment of funds by a health care facility ((or health maintenance organization)) for a force account expenditure which constitutes a capital expenditure((:)); or

(c) In the case of donated property, the date on which the gift is completed in accordance with state law.

~~((32))~~ (34) "Offer," when used in connection with health services, means the health facility (~~or health maintenance organization~~) provides or holds itself out as capable of providing or as having the means for the provision of one or more specific health services.

~~((33))~~ (35) "Person" means an individual, a trust or estate, a partnership, a corporation (including associations, joint stock companies, and insurance companies), the state, or a political subdivision or instrumentality of the state, including a municipal corporation or a hospital district.

~~((34))~~ "Persons directly affected" means the following: The person whose certificate of need application is being reviewed; members of the public who are to be served by the proposed new institutional health services, health care facilities and health maintenance organizations located in the health service area in which the service is proposed to be offered or developed which provide services similar to the proposed services under review; health care facilities and health maintenance organizations which, prior to receipt of the certificate of need application by the department, have formally indicated to the department an intention to provide such similar services in the future; and any agency which establishes rates for health care facilities or health maintenance organizations located in the health service area in which the new institutional health service is proposed to be offered or developed.

~~(35))~~ (36) "Predevelopment expenditures" means expenditures ~~((for the development of site, architectural, structural, mechanical or electrical drawings and specifications. Predevelopment expenditures exclude expenditures for the following: Calling or advertising for construction bids, awarding of a construction contract, incurring an obligation for construction materials or labor, and site preparation or other activities involved in the commencement of construction)), the total of which exceeds the expenditure minimum, which are made for studies, surveys, designs, plans, drawings or specifications in preparation for the acquisition or construction of physical plant facilities. "Predevelopment expenditures" exclude any obligation of a capital expenditure for the acquisition or construction of physical plant facilities and any activity which may be considered the "commencement of construction" as this term is defined in this section.~~

~~((36))~~ (37) "Project" means any and all ~~((new institutional health services))~~ undertakings which may be or are proposed in a single certificate of need application or for which a single certificate of need is issued.

~~((37))~~ (38) "Psychiatric hospital" means any institution or distinct part thereof which is licensed or required to be licensed under the provisions of chapter 71.12 RCW and any institution which is owned and operated by the state or by a political subdivision or instrumentality of the state ~~((and))~~ which is primarily engaged in providing to inpatients, by or under the supervision of a physician, psychiatric services for the diagnosis and treatment of mentally ill persons.

(39) "Rehabilitation facility" means an inpatient facility which is operated for the primary purpose of assisting in the rehabilitation of disabled persons through an integrated program of medical and other health services which are provided under competent professional supervision.

~~((38))~~ (40) "Secretary" means the secretary of the Washington state department of social and health services or his designee.

~~((39))~~ (41) "Shall" means compliance is mandatory.

~~((40))~~ (42) "Skilled nursing facility" means any institution or distinct part thereof which is certified as a skilled nursing facility for participation in the Medicare (Title XVIII) or Medicaid (Title XIX) program.

~~((41))~~ (43) "State health plan" means a document, described in ~~((Public Law 93-64))~~ Title XV of the Public Health Service Act, developed by the department ~~((;))~~ and ~~((approved by))~~ the ~~((state health coordinating))~~ council ~~((which recommends priorities for changes in the health system of the state to achieve the desired health status of the citizens of the state and describes the relationship of these priorities to national health priorities and to the priorities of the health systems agencies of the state as set forth in their health systems plans))~~ in accordance with RCW 70.38.065.

~~((42))~~ (44) "State Health Planning and Resources Development Act" means chapter ~~((161, Laws of 1979 extraordinary session-46th Legislative Session))~~ ~~chapter 70.38 RCW~~ 70.38 RCW.

(45) "Undertaking" means any action which, according to the provisions of chapter 248-19 WAC, is subject to the requirements for a certificate of need or an exemption from the requirements for a certificate of need.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-230 APPLICABILITY OF CHAPTER 248-19 WAC. (1) ~~((All new institutional health services offered or developed within the state by any person shall be subject to review under the certificate of need program and))~~ The following undertakings shall be subject to the provisions of chapter 248-19 WAC, with the exceptions provided for in this section.

~~((2))~~ For the purposes of chapter 248-19 WAC "new institutional health services" shall include any and all of the following:)

(a) The construction, development, or other establishment of a new health care facility ~~((including a health care facility owned, operated or otherwise utilized by a health maintenance organization));~~

(b) Any capital expenditure by or on behalf of a health care facility ~~((including a health care facility owned, operated or otherwise utilized by a health maintenance organization, in excess of one hundred and fifty thousand dollars which under generally accepted accounting principles consistently applied is a capital expenditure, excluding: (i) Expenditures for site acquisition, (ii) acquisition of existing acute care health facilities and health maintenance organizations, and (iii) expenditures solely for the termination or reduction of beds or of a health service))~~ which (i) substantially changes the services of the facility after January 1, 1981, or (ii) which exceeds the expenditure minimum as defined by WAC 248-19-220(16). The costs of any studies, surveys, designs, plans, working drawings, specifications, and other activities essential to the acquisition, improvement, expansion, or replacement of any plant or equipment with respect to which such expenditure is made shall be included in determining the amount of the expenditure;

(c) ~~((Any acquisition, except of a site or an existing acute care facility, by or on behalf of a health care facility (including a health care facility owned, operated or otherwise utilized by a health maintenance organization) under lease or comparable arrangement, or through donation, which would be subject to certificate of need review if the acquisition were by purchase;~~

~~((d))~~ A change in bed capacity of a licensed health care facility ~~((including a health care facility owned, operated or otherwise utilized by a health maintenance organization;))~~ which increases the total number of licensed beds or redistributes beds among facility and service categories of acute care, skilled nursing, intermediate care, and boarding home care if the bed redistribution is to be effective for a period in excess of six months;

~~((e))~~ ~~((n))~~ (d) The obligation of any capital expenditure by or on behalf of a health care facility which is not required to be licensed ~~((;))~~ for a change in bed capacity which increases the total number of beds, ~~((distributes))~~ redistributes beds among various categories, ~~((or relocates such beds from one physical facility or site to another))~~ by more than ten beds or more than ten percent of total bed capacity as defined by the department, whichever is less, over a two-year period;

(e) The obligation of any capital expenditure by or on behalf of a health care facility which decreases the total number of beds or relocates beds from one physical facility or site to another by ten beds or ten percent, whichever is less, in any two-year period.

(f) Acquisition of major medical equipment:

(i) If the equipment will be owned by or located in an inpatient health care facility; or

(ii) If the equipment is not to be owned by or located in a health care facility and the department finds consistent with WAC 248-19-403 that the equipment will be used to provide services for a hospital's inpatients on more than an occasional and irregular basis, or the person acquiring such equipment did not notify the department of the intent to acquire such equipment at least thirty days before entering into contractual arrangements for such acquisition;

(g) Any capital expenditure by or on behalf of a health care facility which results in the addition of a health service not provided in or through the facility within the previous twelve months or results in the termination of a health service provided in or through the facility;

~~((f))~~ (h) Any new institutional health services which are offered in or through a health care facility ~~((including a health care facility owned, operated or otherwise utilized by a health maintenance organization;))~~ and which were not offered on a regular basis by, in, or through such health care facility within the twelve-month period prior to the time such services would be offered;

~~((g))~~ (i) Any expenditure by or on behalf of a health care facility ~~((including a health care facility owned, operated or otherwise utilized by a health maintenance organization;))~~ in excess of ~~((one hundred and fifty thousand dollars))~~ the expenditure minimum made in preparation for ~~((the offering or development of a new institutional~~

health service)) any undertaking under this subsection and any arrangement or commitment made for financing ~~((the offering or development of the new institutional health service (i))~~ such undertaking. Expenditures ~~((m))~~ of preparation ~~((for the offering of a new institutional health service))~~ shall include expenditures for architectural designs, plans, working drawings and specifications ~~((but shall exclude expenditures for feasibility surveys for health maintenance organizations and expenditures for the construction, development or other establishment of a facility or services by a health maintenance organization which are not provided in or through a health care facility owned, operated or otherwise utilized by the health maintenance organization); and~~

~~((h))~~ Radiological diagnostic health services which are offered in, at, through, by or on behalf of a health care facility, including a health care facility owned, operated or otherwise utilized by a health maintenance organization, which are provided by fixed or mobile computed tomographic scanning equipment except where these services are an addition to or replacement of the same service offered in, at, through, by or on behalf of the health care facility. "Radiological diagnostic services," as used in this section shall be interpreted to include services offered in space leased or made available to any person by the health care facility. The service provided by a computed tomographic head scanner shall not be considered the same service as that provided by a computed tomographic body scanner. The service provided by a computed tomographic fixed scanner shall not be considered the same service as that provided by a computed tomographic mobile scanner).

~~((2))~~ With respect to ambulatory care facilities and inpatient health care facilities which are controlled (directly or indirectly) by a health maintenance organization or combination of health maintenance organizations, the provisions of chapter 248-19 WAC shall apply only to the offering of inpatient institutional health services, the acquisition of major medical equipment and the obligation of capital expenditures for the offering of inpatient institutional health services, and then only to the extent that such offering, acquisition or obligation is not exempt under the provisions of WAC 248-19-405.

~~((3))~~ The extension of a home health agency's services to a population residing outside the boundaries of a geographic area in which the agency regularly provided such services within the preceding twelve-month period shall be considered the development or establishment of a new home health agency.

~~((4))~~ A proposed change in a project associated with a capital expenditure for which a certificate of need has been issued shall be subject to certificate of need review if the change is proposed within one year after the date the activity for which the capital expenditure was approved has been undertaken.

~~((a))~~ Projects subject to review under this subsection include proposed changes in projects originally subject to review according to the provisions of subsection (1) (b), (d), (e), or (g) of this section.

~~((b))~~ No capital expenditure need be associated with a proposed change in a project subject to review under this subsection.

~~((c))~~ A proposed change in a project shall include any change in the bed capacity of a facility, the addition or termination of a health service, an expansion or reduction of an existing health service, and any other substantial change to the project.

~~((3))~~ ~~((5))~~ No person shall ~~((offer or develop a new institutional health service, or undertake a capital expenditure in preparation for such offering or development;))~~ engage in any undertaking which is subject to certificate of need review under the provisions of this chapter unless a certificate of need authorizing such ~~((new institutional health services))~~ undertaking has been issued and remains valid or an exception has been granted in accordance with the provisions of this chapter.

~~((4))~~ ~~((6))~~ No person may divide a project in order to avoid review requirements under any of the thresholds specified in this section.

~~((5))~~ ~~((7))~~ The department may issue certificates of need permitting predevelopment expenditures only, without authorizing ~~((the development or offering of new institutional health services))~~ any subsequent undertaking with respect to which such ~~((pre-development))~~ predevelopment expenditures are made.

~~((6))~~ ~~((8))~~ A certificate of need application ~~((which was submitted and declared complete)),~~ the review of which had begun but upon which final action had not been taken prior to January 1, ~~((1980))~~ 1981, shall be reviewed and final action taken based on chapter 70.38 RCW and chapter 248-19 WAC as in effect prior to January 1, ~~((1980))~~ 1981.

~~((7))~~ ~~((9))~~ Certificates of need issued prior to January 1, ~~((1980))~~ 1981, shall not be terminated and the periods of validity of such certificates of need shall not be modified under the provisions of chapter 248-19 WAC which become effective January 1, ~~((1980))~~ 1981.

~~((8))~~ The review process and the requirement for a certificate of need shall be waived for new institutional health services in a project which is in accord with the following requirements:

~~((a))~~ The project shall not have been subject to certificate of need review prior to January 1, 1980 and shall meet one of the following conditions:

~~((i))~~ The project has been reviewed under the provisions of Section 1122 of the Social Security Act and found to be in conformance with the standards, criteria and plans described in 42 CFR 100.104(a)(2) prior to January 1, 1980; or

~~((ii))~~ An application for review of the project under the provisions of Section 1122 of the Social Security Act has been submitted and declared complete but final action upon the application has not been taken prior to January 1, 1980; or

~~((iii))~~ An obligation, as defined in WAC 248-19-220, has been incurred prior to January 1, 1980 for the project, which is not subject to review under the provisions of Section 1122 of the Social Security Act.

~~((b))~~ ~~((The))~~ ~~((10))~~ A project for which certificate of need review was waived under the provisions of WAC 248-19-230(8) as in effect January 1, 1980, to January 1, 1981, shall ~~((be))~~ have been completed by January 1, 1981, or, in the case of a construction project, commencement of construction shall have occurred by January 1982. If this requirement is not met, the ~~((new institutional health service(s) included in the))~~ project shall become subject to the requirements for a certificate of need.

NOTE:

¹Examples that illustrate reviews required by subsection (4) include: (a) A certificate of need is obtained for the obligation of a capital expenditure to establish administrative offices. Within one year of the date these offices are first used, the facility decides to convert this space to activity space for a psychiatric ward. The facility previously provided psychiatric services. A certificate of need is required for this change regardless of whether a capital expenditure will be associated with the change and the fact that the conversion results merely in an expansion of services and not the addition of a new service. (b) A certificate of need is obtained for the obligation of a capital expenditure which results in the addition of ten psychiatric beds. Within one year, those beds are proposed to be converted to pediatric beds. Certificate of need review is required for the conversion, regardless of whether this later activity is tied to a capital expenditure. (c) A certificate of need is obtained for the obligation of a capital expenditure which results in the addition of a new psychiatric service. Within one year, this service is proposed to be converted to a new pediatric service. Certificate of need review is required, regardless of whether a capital expenditure associated with the new service will be incurred or annual operating costs of at least the expenditure minimum will result.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-240 APPLICABILITY DETERMINATION. (1) Any person needing to know whether ~~((a particular project the person plans to undertake))~~ an undertaking which is being considered is subject to certificate of need requirements~~((;))~~ (chapter 248-19 WAC~~((;))~~) should submit a written request ~~((in a form acceptable to the secretary))~~, to the certificate of need unit ~~((of the department))~~ requesting a formal determination of applicability of the certificate of need requirements to the ~~((project))~~ undertaking.

(a) A copy of a written request for determination of applicability shall be sent simultaneously to the appropriate health systems agency ~~((for the health service area in which the project is to be located or take place))~~ and, in the case of a hospital project, to the hospital commission.

(b) The written request shall be in a form prescribed by the department and contain an explicit description of the ~~((particular project, including))~~ undertaking. The description shall include the nature and extent of any construction, changes in services and the estimated total costs of the ~~((project))~~ undertaking.

(2) The department may request such additional written information as is reasonably necessary to making an applicability determination on the ~~((particular project))~~ undertaking.

(3) ~~((The department shall consult with the health systems agency and, when appropriate, the hospital commission in making an applicability determination:))~~

~~((4))~~ The department shall respond in writing to a request for an applicability determination within thirty days of receipt of all the information needed for such determination. In the written response, the department shall ~~((set forth))~~ state the reasons for its determination

that the ~~((project))~~ undertaking is or is not subject to certificate of need requirements.

~~((f5))~~ (4) Information or advice given by the department as to whether ~~((a project))~~ an undertaking is subject to certificate of need requirements shall not be considered an applicability determination unless it is in written form in response to a written request submitted in accordance with provisions of this section.

~~((f6))~~ (5) A written applicability determination on ~~((a particular project))~~ an undertaking in response to a written request and based on written information shall be binding upon the department: PROVIDED, The nature, extent or cost of the ~~((project))~~ undertaking does not significantly change.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-250 SANCTIONS FOR VIOLATIONS. The department may take or cause to be taken any action against a person who has failed to comply with certificate of need regulations which is provided for in ~~((chapter 161, Laws of 1979 extraordinary session (46th Legislative Session)[chapter 70.38 RCW], the State Health Planning and Resources Development Act. Section 12 of this act provides:))~~ RCW 70.38.125.

~~((4))~~ The secretary of the department, in the case of a new health facility, shall not issue any license, and the insurance commissioner, in the case of a new health maintenance organization, shall not issue any certificate of registration, unless and until a prior certificate of need shall have been issued by the department for the offering or development of such new health facility or new health maintenance organization respectively.

(5) Any person who offers or develops a new institutional health service without first being granted a certificate of need by the secretary of the department shall be liable to the state in an amount not to exceed one hundred dollars a day for each day of such unauthorized offering or development. Such amounts of money shall be recoverable in an action brought by the attorney general on behalf of the state in the superior court of any county in which the unauthorized offering or development occurred. Any amounts of money so recovered by the attorney general shall be deposited in the state general fund.

(6) The department may bring any action to enjoin a violation or the threatened violation of the provisions of this chapter or any rules and regulations adopted pursuant to this chapter, or may bring any legal proceeding authorized by law, including but not limited to the special proceedings authorized in Title 7 RCW, in the superior court in the county in which such violation occurs or is about to occur, or in the superior court of Thurston county.⁵⁾

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-260 PERIODIC REPORTS ON DEVELOPMENT OF PROPOSALS. (1) During April of each year, each health care facility and ~~((each health maintenance organization))~~ any other person considering an undertaking subject to certificate of need review shall submit to the department a report ((regarding any development of a proposal for a new institutional health service)) which ~~((is under consideration))~~ describes each such undertaking. Such report shall be submitted in a form prescribed by the department.

(2) If the appropriate health systems agency ((for the health service area in which a health care facility or health maintenance organization is located)) requires submission of reports, on at least an annual basis, regarding ~~((development of proposals on at least an annual basis))~~ undertakings which are under consideration, the department shall accept a copy of each such report sent to the health systems agency in lieu of the report required under ~~((WAC 248-19-260(h)))~~ subsection (1) of this section.

(3) Submission to the department of a long-range health facility plan which includes all ~~((new institutional health services))~~ undertakings which are under consideration by a health care facility or ((health maintenance organization)) other person shall be accepted as meeting ((this)) the requirement of this section for a periodic report ((on the development of proposals for new institutional health services)).

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-270 LETTER OF INTENT. Any person planning to develop a construction project ~~((or a new health service))~~ shall submit a letter of intent to the department at the earliest possible opportunity in the course of planning such construction project ~~((or new health service)).~~

(1) The letter of intent shall inform the department of the nature and scope of the project, clearly describing the size and extent of any new or expanded services which will be included.

(2) A copy of the letter of intent shall be sent to the health systems agency for the health service area in which the project is to be located and, in the case of a hospital project, to the hospital commission.

(3) The letter of intent submitted in accordance with the provisions of this section does not constitute "notice of intent" with respect to the acquisition of major medical equipment, as required by WAC 248-19-403.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-280 SUBMISSION AND WITHDRAWAL OF APPLICATIONS. (1) General.

~~((a))~~ A person proposing ~~((a new institutional health service))~~ an undertaking which is subject to review shall, prior to the date on which the certificate of need review of such ((service)) undertaking begins, submit a complete certificate of need application in such form and manner and containing such information as the department, after consultation with health systems agencies and the hospital commission, has prescribed and published as necessary to such a certificate of need application.

~~((a))~~ (i) The information, which the department prescribes and publishes as required for a certificate of need application, shall vary in accordance with and be appropriate to the purpose for which a particular review is being conducted or the type of proposed project: PROVIDED, HOWEVER, That the required information shall include that which is necessary to determining whether the proposed project meets applicable criteria.

~~((b))~~ (ii) Information regarding a certificate of need application which is submitted by an applicant after the department has given "notification of the beginning of review" in the manner prescribed by WAC 248-19-310 shall be submitted in writing to the department, the health systems agency, and for hospital projects, to the hospital commission.

~~((c))~~ (iii) No information regarding a certificate of need application, which is submitted by an applicant after ~~((a health systems agency or the hospital commission makes a final decision and recommendation for submission to the department;))~~ the beginning of a public hearing conducted under the provisions of WAC 248-19-320 shall be considered by the department in reviewing and taking action on a certificate of need application. An exception to this rule shall be made when, during its final review period, the department finds an unresolved pivotal issue requires submission of further information by an applicant. The department shall furnish copies of its request to the applicant for such additional information to the appropriate health systems agency and, for a hospital project, to the hospital commission. The department shall give public notice of such request for additional information through the same newspaper in which the "notification of beginning of review" for the project was published. The notice shall identify the project, the nature of the unresolved issue and the information requested of the applicant and shall state the period of time allowed for receipt of written comments from interested persons.

~~((2))~~ (b) A person submitting a certificate of need application shall simultaneously submit copies of such application to the certificate of need unit of the department, the appropriate health systems agency ~~((for the health service area in which the proposed project is to be located))~~ and, in the case of a hospital project, to the hospital commission.

~~((a))~~ (i) The original and ~~((one copy))~~ two copies of the application shall be submitted to the certificate of need unit of the department.

~~((b))~~ (ii) At least three and such additional copies of the application as may be required by the health systems agency ~~((for the health service area in which the proposed project is to be located;))~~ shall be submitted to the appropriate health systems agency.

~~((c))~~ (iii) For a hospital project, one copy shall be submitted to the hospital commission.

~~((3))~~ Within a fifteen calendar day screening period, the department, the appropriate health systems agency and, for a hospital project, the hospital commission shall each screen the application to determine whether the information provided in the application is complete and as explicit as is necessary for a certificate of need review. This screening period shall begin on the first day after which the department, the health systems agency and, when appropriate, the hospital commission have each received copies of the application.

~~((4))~~ (c) On or before the last day of the applicable screening period for a certificate of need application, as prescribed in subsections (2) and (3) of this section, the department shall send a written notice to the person who submitted the application stating whether or not the application has been declared complete. If ~~((the))~~ an application has been found to be incomplete, the notice from the department shall specifically identify the portions of the application in which the information provided has been found to be insufficient or indefinite and request the supplemental information needed to complete the application. ~~((This))~~ The notice from the department shall incorporate the findings as to insufficient or indefinite application information which have been transmitted to the department by the health systems agency and the hospital commission.

~~((5))~~ (d) The department shall not require any supplemental information of a type which has not been prescribed and published as being necessary to a certificate of need application for the type of project being proposed.

~~((6))~~ The department shall return an incomplete certificate of need application to the person who submitted the application if the department has not received a response to a request for the supplemental information needed to complete the application within forty-five calendar days after such request was sent.

~~((7))~~ (e) A response to the department's request for information to supplement an incomplete application~~(;)~~ shall be written and submitted to the same agencies and in the same numbers as required for an application under the ~~((preceding WAC 248-19-280(2)))~~ provisions of subsection (1)(b) of this section.

~~((8))~~ A person who submits a response to the department's request for supplemental information to complete a certificate of need application within forty-five days after the request was sent by the department shall have the right to exercise one of the following options:

(a) Submission of a written request that the incomplete application be reviewed without supplemental information;

(b) Submission of written supplemental information with a written request that review of the certificate of need application begin without the department's notification of the applicant as to whether the supplemental information is adequate to complete the application; or

(c) Submission of written supplemental information and a written request that such information be screened and the applicant be given opportunity to submit further supplemental information if the application is still incomplete.

(9) After receipt of a request for review of a certificate of need application, submitted in accordance with the preceding WAC 248-19-280(8)(a) or (b), the department shall give notification of the beginning of review in the manner prescribed for a complete application in WAC 248-19-310.

(10) If a person requests the screening of supplemental information in accordance with WAC 248-19-280(8)(c), such screening shall be carried out in the same number of days and in the same manner as required for an application under the preceding WAC 248-19-280(3) and (4). The process of submitting and screening supplemental information may be repeated until the department declares the certificate of need application complete, the applicant requests that review of the incomplete application begin, or the one hundred twentieth day after the beginning of the first screening period for the application, whichever occurs first. The department shall return an application to the applicant if it is still incomplete on the one hundred twentieth day after the beginning of the first screening period and the applicant has not requested review of such incomplete application.

(11) A certificate of need application shall be withdrawn from the certificate of need review process if the department receives a written request for withdrawal of the application from the person who submitted the application at any time before final action on such application has been taken by the secretary.

(12) A new submission of a certificate of need application shall be required for a certificate of need review of any new institutional health service for which the department has returned an incomplete application in accordance with the preceding WAC 248-19-280(6) or (10), or for which a certificate of need application has been withdrawn in accordance with the preceding WAC 248-19-280(11).

(13) If an applicant amends an application during the review process, the department after consultation with the appropriate health systems agency and, in the case of a hospital project, the hospital commission will determine whether or not the amendment constitutes a new application.)

(2) Emergency and expedited reviews.

(a) The department, the appropriate health systems agency, and the hospital commission for a hospital project, shall within a fifteen-day period, screen the application to determine whether the information provided in the application is complete and as explicit as is necessary for a certificate of need review. This screening period shall begin on the first day after which the department, the health systems agency and, for hospital projects, the hospital commission, have each received copies of the application.

(b) The department shall return an incomplete certificate of need application to the person who submitted the application if the department has not received a response to a request for the supplemental information sent in accordance with subsection (1)(c) of this section within forty-five days after such request was sent.

(c) A person who submits a response to the department's request for supplemental information to complete a certificate of need application within forty-five days after the request was sent by the department, in accordance with subsection (1)(c) of this section, shall have the right to exercise one of the following options:

(i) Submission of written supplemental information and a written request that such information be screened and the applicant be given opportunity to submit further supplemental information if the application is still incomplete;

(ii) Submission of written supplemental information with a written request that review of the certificate of need application begin without the department notifying the applicant as to whether the supplemental information is adequate to complete the application; or

(iii) Submission of a written request that the incomplete application be reviewed without supplemental information.

(d) After receipt of a request for review of a certificate of need application, submitted in accordance with subsection (2)(c) (i) or (iii) of this section, the department shall give notification of the beginning of review in the manner prescribed for a complete application in WAC 248-19-310.

(e) If a person requests the screening of supplemental information in accordance with subsection (2)(c)(i) of this section, such screening shall be carried out in the same number of days and in the same manner as required for an application in accordance with the provisions of subsection (1)(c) and (2)(a) of this section. The process of submitting and screening supplemental information may be repeated until the department declares the certificate of need application complete, the applicant requests that review of the incomplete application begin, or the one hundred twentieth day after the beginning of the first screening period for the application, whichever occurs first. The department shall return an application to the applicant if it is still incomplete on the one hundred twentieth day after the beginning of the first screening period and the applicant has not requested review of such incomplete application.

(3) Concurrent review.

(a) Only those applications received by the department, the health systems agency and, in the case of a hospital project, the hospital commission, during the thirty-day period prescribed for the submission of applications to be reviewed during a particular scheduled review period, shall be screened and reviewed during that concurrent review period. Applications received before such thirty-day period shall be returned to the applicant. The applicant may resubmit such application during the specified application submission period. The content of the application should be updated as indicated before resubmission.

(b) No application received by the department, the health systems agency or the hospital commission for a hospital project on or after the first day of the screening period shall be screened or reviewed during that particular concurrent review period and shall be returned by the department to the applicant.

(c) Within thirty days after the beginning of a concurrent review screening period, all applications which have been submitted in accordance with subparagraph (a) of this subsection will be screened by the department, the appropriate health systems agency and, for a hospital project, the hospital commission, to determine whether the information provided in the applications is complete and as explicit as is necessary for certificate of need review.

(d) The department shall return any incomplete certificate of need application to the person who submitted it if the department has not received a response to a request for the supplemental information sent in accordance with subsection (1)(c) of this section within thirty days after such request was sent.

(e) A person who submits a response to the department's request for supplemental information to complete a certificate of need application

within thirty days after the request was sent by the department, in accordance with subsection (1)(c) of this section, shall have the right to exercise one of the following options:

(i) Submission of the written supplemental information which has been requested by the department; or

(ii) Submission of a written request that the incomplete application be reviewed without supplemental information.

(f) Within five working days after the end of the period allowed for applicants' response to screening letters, the department shall give notification of the beginning of concurrent review in the manner prescribed in WAC 248-19-310.

(g) No review of an application for concurrent review shall begin prior to the "notification of the beginning of review" for all the applications to be reviewed concurrently.

(4) Amendment of certificate of need applications.

(a) Applications for emergency review. An amended application which qualifies for emergency review shall be considered and reviewed as a new application.

(b) Application for expedited or regular review.

(i) If an applicant amends an application during the screening or review period, the department, after consultation with the appropriate health systems agency and, in the case of a hospital project, the hospital commission shall determine whether the amended application constitutes a new application.

(ii) An application may be amended during the review period only if the amendment to the application is received by the department, the health systems agency and, in the case of a hospital project, the hospital commission not later than fourteen days prior to the date on which a public hearing is scheduled pursuant to WAC 248-19-320 or final action is taken by the public health systems agency or hospital commission, whichever occurs first.

(iii) To provide any affected person the opportunity for a public hearing on an amended application, the department may extend the expedited review period as necessary to conduct such public hearing and complete the review process.

(c) Amendment of applications subject to concurrent review.

Applications submitted for concurrent review may be amended only during the last thirty days prior to the beginning of the prescribed review period.

(5) Submission of an amendment to an application. An amendment to an application shall be submitted to the same agencies and in the same numbers as required for an application under the provisions of subsection (1)(b) of this section.

(6) Withdrawal of applications. A certificate of need application shall be withdrawn from the certificate of need process if the department receives a written request for withdrawal of the application from the person who submitted the application at any time before final action on such application has been taken by the secretary.

(7) Resubmission of applications withdrawn or returned as incomplete. A submission of a new certificate of need application shall be required for a certificate of need review of any undertaking for which the department has returned an incomplete application in accordance with subsections (2)(b) and (3)(d) of this section, or for which a certificate of need application has been withdrawn in accordance with subsection (6) of this section. The content of the application should be updated as indicated before resubmission.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-300 CATEGORIES OF REVIEW. (1) ~~((In the review of any certificate of need application))~~ Except as provided for in subsection (2)(d) of this section for certain applications received during the period January 1, 1981, through May 29, 1981, one of the following review processes shall be used in the review of any certificate of need application: ~~((Regular))~~ Emergency review, ~~((emergency))~~ expedited review or ~~((expedited))~~ concurrent review.

(2) Determination of review process.

The department, after consulting with the appropriate health systems agency and, if a hospital project, the hospital commission, shall determine which review process will be used in the review of a given certificate of need application.

(a) ~~((Regular review:~~

The regular process shall be used in the review of a certificate of need application unless the department has determined, after receipt of a written consent from the appropriate health systems agency, that an expedited or emergency review process will be used in the review of such application:

(b)) Emergency review.

(i) Beginning January 1, 1981, an emergency review may, with the written consent of the appropriate health systems agency, be conducted when an immediate capital expenditure is required in order for a health care facility to maintain or restore basic and essential patient services.

(ii) The department may, after consulting with the appropriate health systems agency and, for a hospital project, the hospital commission, determine that an application submitted for emergency review does not qualify for such review. Such a determination and notification to the applicant shall be made within five days after receipt of ~~((the))~~ a complete application. When the department makes a determination that an application is not subject to emergency review procedures, the ~~((application may, with the written consent of the appropriate health systems agency, be reviewed according to the expedited review process))~~ review of the application will be deferred by the department until the next regularly scheduled review date for that category of undertaking under the concurrent review process unless the determination is made, with the written consent of the appropriate health systems agency, that the project qualifies for an expedited review in accordance with the provisions of subsection (2)(b) of this section.

~~((fe))~~ (b) Expedited review.

(i) Beginning January 1, 1981, an expedited review shall be conducted on a certificate of need application for ~~((a hospital's project when))~~ the following:

(A) All projects which do not involve health services or the addition, replacement, expansion or alteration of facilities for health services.

(B) Projects proposed for the correction of deficiencies as described in WAC 248-19-415: PROVIDED, That any such projects do not involve the replacement or addition of inpatient rooms, additions to or partial or complete replacement of the facility, or the expansion or addition of health services.

(C) The replacement of equipment having similar functional capability and which does not result in the offering or development of any new health services.

(D) Replacement or renovation of physical plant facilities for pharmacy, medical records or dietary services.

(E) Installation, replacement, or improvement of energy conservation and mechanical and electrical systems.

(F) Demonstration or research projects related to new technology: PROVIDED, That such projects do not involve a change in bed capacity, construction, or the provisions of a new institutional health service.

(G) Acquisition of an existing health care facility.

(H) Projects which are limited to predevelopment expenditures.

(ii) An expedited review shall be conducted on a certificate of need application for a hospital's project when:

(A) The hospital has developed a long-range facility plan in accordance with the provisions of ~~((section 14 of the State Health Planning and Resources Development Act))~~ RCW 70.38.145;

(B) When an application has been found to be consistent with the applicant's long-range health facility plan and the applicable health systems plan, annual implementation plan and state health plan;

(C) When there has not been a significant change, since the long-range health facility plan was approved, in existing health facilities of the same type or in the need for such health facilities and services; and

(D) The appropriate health systems agency has given the department a written consent to an expedited review of the project.

~~((ii))~~ An expedited review may, with the written consent of the appropriate health systems agency, be conducted for a project, the type, scope and location of which has been specifically described and provided for in a current health systems plan, annual implementation plan or state health plan:

(iii) An expedited review may, with the written consent of the appropriate health systems agency, be conducted for a project which is for the correction of fire, safety or health deficiencies cited by appropriate licensing or accrediting authorities or physical plant alterations which would eliminate functional obsolescence: PROVIDED, That such project does not involve the replacement or addition of inpatient rooms, additions to or partial or complete replacement of the facilities, or the expansion or addition of health services;

(iv) An expedited review may, with the written consent of the appropriate health systems agency, be conducted for any of the following types of projects: PROVIDED, That such a project appears to have a minimal impact on the health care system:

(A) Replacement of equipment having similar functional capability and not resulting in the offering or development of any new health services;

~~(B) Purchase, lease, donation or substantial acquisition by comparable arrangement of a nonacute care health care facility;~~

~~(C) Construction of nonclinical improvements outside a health care facility such as parking facilities, landscaping, lighting and similar projects;~~

~~(D) A project which is limited to predevelopment expenditures and does not involve the development or offering of new institutional health services with respect to which such predevelopment expenditures are to be made;~~

~~(E) New institutional health services involving capital costs of less than one hundred and fifty thousand dollars and projected annual operating costs of less than one hundred and fifty thousand dollars per year for the first three years of operation;~~

~~(F) Projects involving an increase in licensed bed capacity of 10 percent or 10 beds whichever is less; and~~

~~(G) Replacement or improvement of nonpatient systems (e.g., air conditioning, energy conservation, administrative systems);~~

~~(v) Prior to January 1, 1984, an expedited review of a hospital project may be conducted when:~~

~~(A) The hospital has developed a long-range plan in accordance with a common form for such plan developed by the department in cooperation with the health systems agency and the hospital commission;~~

~~(B) The certificate of need application for the project has been found to be consistent with the hospital's long-range health facility plan and the applicable health systems plan, annual implementation plan and state health plan;~~

~~(C) There has not been a significant change, since the long-range health facility plan was approved, in existing health facilities of the same type or in the need for such health facilities and services; and~~

~~(D) The appropriate health systems agency has given the department a written consent to an expedited review of the project.))~~

(c) Concurrent review.

(i) Beginning June 1, 1981, certificate of need applications received by the department which do not qualify for review under (a) or (b) of this subsection, shall be reviewed under the concurrent review process. Applications received by the department during the period January 1, 1981, through May 29, 1981, which do not qualify for review under (a) or (b) of this subsection shall be reviewed under the regular review process, in accordance with the provisions of (d) of this subsection.

(ii) The department, in consultation with the health systems agencies and, for hospital projects, the hospital commission, shall prescribe time schedules for the submission, screening and supplementation, and concurrent review of certificate of need applications within a health service area. Schedules for submission, concurrent screening and supplementation, and concurrent review periods shall provide for at least a semiannual review of specific types of projects within each health service area and shall be for the purpose of providing a basis for the comparative analysis of competing or similar undertakings to ascertain which of such undertakings may best meet the applicable criteria in chapter 248-19 WAC.

(iii) Before establishing time schedules for concurrent review of projects, the department shall provide health care facilities and other persons, upon request, the opportunity to review and offer written comment on the schedules the department proposes to prescribe.

(iv) Prescribed schedules shall be published and distributed to all health care facilities and other persons who request copies of such schedules. The publication and distribution of concurrent review schedules shall be at least three months prior to implementation of the prescribed schedules.

(d) Regular review process. For any application received during the period January 1, 1981, through May 29, 1981, the regular review process shall be used unless the department has determined, after receipt of a written consent from the appropriate health systems agency, and in the case of a hospital project, the hospital commission, that the emergency or expedited review process will be used in the review of such application.

(3) Preapplication determination of expedited review. Any person planning to submit a certificate of need application for a particular project may, prior to the preparation of such application, obtain a determination as to whether the project will be given an expedited review by submission of a written request for such determination to the department.

(a) A written request for a determination as to whether an application for a particular project will qualify for an expedited review shall be submitted in a form and manner and contain such information as the department may, after consultation with the health systems agencies and the hospital commission, prescribe and publish as necessary to

such a determination. The person submitting the request for the determination shall simultaneously submit a copy of the request to the appropriate health systems agency and, in the case of a hospital project, to the hospital commission.

(b) The department shall consult with the appropriate health systems agency and, in the case of a hospital project, the hospital commission before determining that an application for a proposed project will be given an expedited review.

(c) The department shall respond in writing to a request for a determination as to whether a project will be given an expedited review within thirty calendar days of the first day on which the department, the appropriate health systems agency and, if a hospital project, the hospital commission has each received the written request. The department shall not make a determination that a project will be given an expedited review without the written consent of the appropriate health systems agency.

(d) A written determination by the department that an application will be given an expedited review shall be binding upon the department, the health systems agency and, if a hospital project, the hospital commission: PROVIDED, The nature, location, or extent of the project does not significantly change and there is not a significant increase in the estimated cost of the project.

~~(4) ((Review processes for regular, expedited and emergency certificate of need applications shall be in accordance with WAC 248-19-330, 248-19-340 and 248-19-350.)) Waiver of requirement for review under scheduled concurrent review process.~~

(a) Under the following circumstances, the department may waive the requirement that a certificate of need application for a proposed project be reviewed according to a scheduled concurrent review process if the department has received a written consent to the waiver from the appropriate health systems agency.

(i) An unforeseeable event has occurred or is imminent within the area in which the proposed project is to be located and such event has caused or will cause:

(A) A sudden and substantial change in the health facilities or services of the type proposed which severely curtails the availability of health services needed by the population of the area; or

(B) A large and rapid increase in the area's population appears to necessitate accelerated development of additional health facilities or services to meet the population's need for health services.

(ii) The person proposing the project has submitted a written request for waiver of the requirement for review under a scheduled concurrent review process to the department, the appropriate health systems agency and, for a hospital project, to the hospital commission. Such written request shall include information that describes the nature and substantiates the impact of the unforeseeable event which prompted the request for a waiver.

(b) Within five working days of receipt of a request that the requirement for review according to a scheduled concurrent review process be waived, the department shall give written notice of the request to affected persons in the same service area. Such notice shall:

(i) Be mailed to health care facilities which offer services similar to those to be provided through the proposed project;

(ii) Be published in a newspaper of general circulation; and

(iii) Include the name of the person who made the request, the type of facilities or services to be included in the proposed project, the reason for the request for waiver, and the period of time allowed for submission of written statements and information in support of or in opposition to the requested waiver.

(c) The department shall not take action on a request for waiver of the requirements for review under a scheduled concurrent review process until ten working days have lapsed since notice of the request was published in a newspaper of general circulation.

(d) An application, for which the requirement for review according to a scheduled concurrent review process has been waived, shall be reviewed according to the expedited review process.

(e) If more than one person requests a waiver under the provisions of this subsection because of the same event within an area, the department shall not grant a waiver to any person before receiving the person's written consent to adjustments in the expedited review process which the department finds necessary to ensure proposals for similar types of facilities or services are considered in relation to one another.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-310 NOTIFICATION OF BEGINNING OF REVIEW. (1) Notice required. The department shall provide written (notice) notification of the beginning of the review of a certificate of

need application and notification of the beginning of the review of a proposed withdrawal of a certificate of need to ~~((persons directly))~~ affected persons and ~~((notice to the public to be served by the proposed project of the beginning of the review of a certificate of need application. Such notice shall be given within twenty calendar days after receipt of a complete application unless the department has determined the certificate of need application is to be reviewed under an emergency review process))~~ any other person who has submitted a written request that the person's name be on the mailing list for such notice.

(2) Specific notice requirements.

(a) The department shall give "notification of the beginning of review" of an application after the department, the appropriate health systems agency and, for a hospital project, the hospital commission have each received a complete application or the applicant's request, submitted in accordance with WAC 248-19-280 (2)(c) or (3)(e) that review of the application begin. Such notice shall be given according to the following requirements.

(i) Emergency review. When an application is being reviewed under the emergency review process, required notices shall be given on the fifth working day following the receipt of a complete application or the applicant's written request that review of the application begin.

(ii) Concurrent review. When an application is being reviewed under the concurrent review process, required notices shall be given within five working days after the end of the period allowed for applicants' response to screening letters.

(iii) Expedited and regular review. When an application is being reviewed under the expedited or regular review process, required notices shall be given within twenty days of the receipt of a complete application or the applicant's request that review of the application begin.

(b) The department shall give notification of the beginning of the review of a proposed withdrawal of a certificate of need when it determines that there may be good cause to withdraw a certificate of need.

~~((a))~~ (c) The notices shall include:

(i) ~~((The proposed review schedule))~~ A general description of the project;

(ii) In the case of a certificate of need application, a statement as to whether the application is complete or incomplete;

(iii) In the case of a proposed withdrawal of a certificate of need, the reasons for the proposed withdrawal;

(iv) The proposed review schedule;

(v) The period within which one or more affected persons ~~((directly affected by the review))~~ may request the ~~((department to))~~ conduct of a public hearing during the review~~((PROVIDED, Such persons have not been afforded such opportunity for a public hearing by the appropriate health systems agency));~~ ~~((and))~~

(vi) The name and address of the agency to which a request for a public hearing should be sent; and

~~((iii))~~ (vii) The manner in which notification will be provided of the time and place of any hearing so requested.

~~((b))~~ (d) Notice to the general public to be served by the proposed project shall be through a newspaper of general circulation in the health service area of the project.

~~((2))~~ A regular or expedited review of a certificate of need application shall begin on the date the department sends notification to persons directly affected and the public notice on the beginning of the review; except, in the case of a project proposed by a health maintenance organization, the review period shall begin on the date all information needed for a complete application is received by the department, the applicable health systems agency and, if a hospital project, the hospital commission.

(3) Written notification to persons directly affected and the public notice on the beginning of an emergency review shall be sent on the fifth working day after all the information needed for a complete application is received by the department, the appropriate health systems agency and, if a hospital project, the hospital commission. A public hearing will not be conducted on an application reviewed on an emergency review basis.

(4) The review of a certificate of need application according to emergency review process shall begin on that day by which the department, the appropriate health systems agency, and the hospital commission in the case of hospital projects, have each received copies of the application.)

(e) The notices to other affected persons shall be mailed on the same date the notice to the public is mailed to the newspaper for publication.

(3) Beginning of review.

(a) Review of a certificate of need application under the expedited, regular or concurrent review process shall begin on the day the department sends notification of the beginning of review to the general public and other affected persons.

(b) Review of a certificate of need application under the emergency review process shall begin on the day the department, the appropriate health systems agency and, for a hospital project, the hospital commission has received a complete application or the day the department receives written notice from the applicant requesting review of an application.

(c) Review of a proposed withdrawal of a certificate of need shall begin on the day the department sends notification of the beginning of review to the general public and to other affected persons.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-320 PUBLIC HEARINGS. (1) "Opportunity for a public hearing," as used in this section, shall mean a public hearing will be conducted if a valid request for such a hearing has been submitted by one or more affected persons ~~((directly affected by the proposed project for which a particular certificate of need application is under review))~~.

(2) The department shall provide opportunity to affected persons ~~((directly affected))~~ for a public hearing on:

(a) A certificate of need application which is under review, unless the application is being reviewed according to the emergency review process; and

(b) The proposed withdrawal of a certificate of need.

~~((a))~~ This requirement for a public hearing shall be deemed satisfied if the appropriate health systems agency has provided opportunity for such a public hearing to "affected persons ~~((directly affected))~~" as this term is defined in WAC 248-19-220~~((3))~~; PROVIDED, HOWEVER, That the department has delegated the responsibility for such hearing to the appropriate health systems agency, and such health systems agency has followed public hearing procedures required under the provisions of this section.

~~((b))~~ If the appropriate health systems agency defines "persons directly affected" to whom it affords opportunity for such a public hearing to exclude one or more persons included in the definition of this term in WAC 248-19-220~~((3))~~, the department shall conduct such a public hearing if:

(i) The health systems agency has not scheduled and given notice of a public hearing on the particular certificate of need application which is under review; and

(ii) The department receives a valid request for a public hearing on the particular certificate of need application from one or more "persons directly affected" who are excluded in the health systems agency's definition of such term.)

(3) To be valid, a request for a public hearing on a certificate of need application ~~((under review))~~ or on the proposed withdrawal of a certificate of need shall:

(a) Be submitted in writing;

(b) Be received by the ~~((department))~~ agency identified in the "notification of beginning of review" within ~~((fourteen calendar))~~ thirty days after ~~((Notification on Beginning of Review" was given by the department for the particular certificate of need application))~~ the date on which the department's "notification of beginning of review" for the particular certificate of need application or proposed withdrawal of a certificate of need was published in a newspaper of general circulation; and

(c) Include identification of the particular certificate of need application or proposed certificate of need withdrawal for which the public hearing is requested and the full name, complete address and signature of the person making the request.

(4) ~~((At least ten calendar days prior to a public hearing conducted by the department on a certificate of need application.))~~ The department or the health systems agency to which the department delegated responsibility for public hearings shall give written notice of ~~((such))~~ a public hearing ~~((to persons directly affected and notice to the public))~~ conducted pursuant to this section.

(a) Written notice shall be given to affected persons and the public at least fifteen days prior to the beginning of the public hearing.

(b) The notices shall include: Identification of the certificate of need application or certificate of need on which the public hearing is to be conducted and the date, time and place of the public hearing.

~~((b))~~ (c) Notice to the general public to be served by the proposed project to which the certificate of need application or certificate of need pertains shall be through a newspaper of general circulation in

the health service area of the proposed project. The notices to other affected persons shall be mailed on the same date the notice to the public is mailed to the newspaper for publication.

(5) In a public hearing on a certificate of need application or on a proposed withdrawal of a certificate of need, any person shall have the right to be represented by counsel and to present oral or written arguments and evidence relevant to the matter which is the subject of the hearing. Any person affected by the matter may conduct reasonable questioning of persons who make relevant factual allegations.

(6) The department or health systems agency, whichever conducts the hearing, shall maintain a verbatim record of a public hearing and shall not impose fees for the hearing.

~~((5))~~ (7) The department shall not be required to conduct a public hearing on a certificate of need application which is being reviewed according to the emergency review procedure.

NEW SECTION

WAC 248-19-325 PROHIBITION OF EX PARTE CONTACTS. (1) Review of certificate of need application. There shall be no ex parte contacts between the time of the beginning of a hearing held under the provisions of WAC 248-19-320 and 248-19-430 and the time the department's final decision is made on such hearing. Ex parte contact, as used in this subsection, is a contact between the applicant for a certificate of need, any person acting on behalf of the applicant, or any person opposed to the issuance of a certificate of need for the applicant and any person in the department who exercises any responsibility respecting the certificate of need application.

(2) Withdrawal of a certificate of need. There shall be no ex parte contact between the time of beginning a hearing held under the provisions of WAC 248-19-320 and 248-19-430 and the time the department makes its final decision regarding the withdrawal of a certificate of need because the holder of a certificate of need is not meeting the time table specified in the certificate of need application for making a service or equipment available or obligating an expenditure and is not making a good faith effort to meet that timetable. Ex parte contact, as used in this subsection, is a contact between the holder of a certificate of need, any person opposed to or in favor of the withdrawal and any person in the department who exercises responsibility respecting withdrawal of the certificate.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-330 REGULAR REVIEW PROCESS. (1) Any application received during the period January 1, 1981, through May 29, 1981, shall be reviewed under the following regular review process unless the department has determined, after receipt of written consent from the appropriate health systems agency, that the emergency or expedited review process will be used in the review of such applications. Any application received on or after June 1, 1981, which does not qualify for emergency or expedited review, shall be reviewed according to the concurrent review process.

(2) The regular review process shall not exceed ninety days from the beginning of the review period and shall be conducted in accordance with the following subdivisions of this subsection unless the review period is extended in accordance with the provisions of subsection (2) of this section(~~, WAC 248-19-330(2)(a) and (b), and (4) and (5):~~ PROVIDED, HOWEVER, That in the case of a review of a new institutional health service proposed by a health maintenance organization, no review shall take longer than ninety days from the beginning of the review period)).

~~((2))~~ (a) Within sixty ((calendar)) days from the first day of the review period the health systems agency and, in the case of a hospital project, the hospital commission, shall submit written findings and recommendations on a certificate of need application to the department unless the health systems agency or hospital commission has requested and received an extension of this review period from the department.

~~((a))~~ The department may extend the review period of a health systems agency and, in the case of a hospital project, the hospital commission for a period up to thirty calendar days upon receipt of a written request from one of these agencies:

(b) The department may grant further extensions of a review period to a health systems agency or, in the case of a hospital project, the hospital commission: PROVIDED, The person who submitted the certificate of need application gives written consent to such further extension:

~~((b))~~ (b) The department shall complete its final review and the secretary shall make his decision on a certificate of need application

within thirty ((calendar)) days of the end of the review period or extended review period of the health systems agency and, in the case of a hospital project, the hospital commission(~~, unless the department extends its final review period in accordance with the provisions of WAC 248-19-330(4) or (5)).~~

(3) The review period for a regular review may be extended according to the following provisions:

(a) The review period for the health systems agency or, in the case of a hospital project, the hospital commission, may be extended for up to an additional thirty days upon the written request of either of these advisory review agencies when such additional time is needed to complete the review and submit written findings and recommendations to the department. The department may grant further extensions to this review period: PROVIDED, The person who submitted the certificate of need application gives written consent to such further extensions.

~~((4))~~ (b) If an issue, which is pivotal to the secretary's decision remains unresolved, the department may notify the person who submitted the application that additional relevant information is needed and extend its final review period up to but not exceeding thirty ((calendar)) days after receipt of the information. Such pivotal issues include but are not limited to pending action for medicare or medicaid decertification, license revocation or patient trust fund violation or termination of a provider agreement.

~~((5))~~ (c) The department may extend either the review period for the health systems agency and the hospital commission or the department's final review period upon receipt of a written request of the person who submitted the application: PROVIDED, HOWEVER, That such an extension shall not exceed sixty ((calendar)) days.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-340 EXPEDITED REVIEW PROCESS. (1) The expedited review process shall not exceed ((fifty calendar)) seventy days from the beginning of the review period and shall be conducted in accordance with the following subdivisions of this subsection unless the review period is extended in accordance with the provisions of subsection (2) of this section(~~, WAC 248-19-340(3), (4), (6), or (7):~~ PROVIDED, HOWEVER, That in the case of a review of a new institutional health service proposed by a health maintenance organization, no review shall take longer than ninety days from the beginning of the review period)).

~~((2) When the term of an expedited review is fifty calendar days)~~ (a) Within fifty days of the beginning of the review process, the health systems agency, and in the case of a hospital project, the hospital commission, shall submit written findings and recommendations to the department ((within thirty calendar days of the beginning of the review process)).

((3) The expedited review process shall be extended to a period of eighty calendar days by the department at the request of the health systems agency, or, in the case of a hospital project, at the request of the hospital commission when one of these advisory review agencies requires sixty calendar days to complete and submit written findings and recommendations to the department:

(4) The department may grant further extensions of the expedited review period to the health systems agency, and in the case of a hospital project, to the hospital commission: PROVIDED, The person who submitted the certificate of need application gives written consent to such further extensions:

~~((5))~~ (b) The department shall complete its final review and the secretary shall make his decision on a certificate of need application under an expedited review within twenty ((calendar)) days of the end of the review period or extended review period of the health systems agency and, in the case of a hospital project, the hospital commission(~~, unless the department extends its final review period in accordance with the provisions of WAC 248-19-340(6) or (7)).~~

(2) The review period for an expedited review may be extended according to the following provisions:

(a) The review period for the health systems agency or, in the case of a hospital project, the hospital commission, may be extended for up to an additional thirty days when the health systems agency conducts a public hearing in accordance with the provisions of WAC 248-19-320 or when additional time is needed by the health systems agency or, in the case of a hospital project, the hospital commission, to complete the review and submit written findings to the department. The department may grant further extensions to this review period: PROVIDED, The person who submitted the certificate of need application gives written consent to further extension.

(b) The department may extend its final review if a public hearing is requested in accordance with the provisions of WAC 248-19-320 and the hearing is conducted by the department. Such extension may be for an additional period of up to thirty days.

~~((6))~~ (c) If an issue, which is pivotal to the secretary's decision remains unresolved, the department may notify the person who submitted the application that additional relevant information is needed and extend its final expedited review period up to but not exceeding thirty (~~calendar~~) days after receipt of the information. Such pivotal issues include but are not limited to pending action for medicare or medicaid decertification, license revocation or patient trust fund violation or termination of a provider agreement.

~~((7))~~ (d) The department may extend either the expedited review period for the health systems agency and the hospital commission or the department's final review period upon receipt of a written request of the person who submitted the application: PROVIDED, HOWEVER, That such an extension shall not exceed sixty (~~calendar~~) days.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-350 EMERGENCY REVIEW PROCESS. (1) The emergency review process shall not exceed fifteen working days from the beginning of the review period.

(2) Written findings and written recommendations of the health systems agency, and in the case of hospital projects, the hospital commission, shall be submitted to the department within ten working days after the beginning of the emergency review period (~~for a project under emergency review~~).

(3) The department shall complete its final review and the secretary shall make his decision on an emergency certificate of need application within fifteen working days after the beginning of the review period unless the department extends its final review period in accordance with the provisions of ~~((WAC 248-19-350))~~ subsection (4) of this section.

(4) If an issue, which is pivotal to the secretary's decision remains unresolved, the department may notify the person who submitted the application that additional relevant information is needed and extend its final emergency review period up to but not exceeding thirty (~~calendar~~) days after receipt of the information. Such pivotal issues include but are not limited to pending action for medicare or medicaid decertification, license revocation or patient trust fund violation or termination of a provider agreement.

NEW SECTION

WAC 248-19-355 CONCURRENT REVIEW PROCESS. (1) The concurrent review process shall not exceed ninety days from the beginning of the review period and shall be conducted in accordance with the following subdivisions of this subsection unless the review period is extended in accordance with the provisions of subsection (2) of this section.

(a) Within sixty days from the first day of the review period, the health systems agency and, in the case of a hospital project, the hospital commission, shall submit to the department written findings and recommendations on each certificate of need application under review unless the health systems agency or hospital commission has requested and received an extension of this review period from the department.

(b) The department shall complete its final review and the secretary shall make his decision on each certificate of need application within thirty days of the end of the review period or extended review period of the health systems agency and, in the case of a hospital project, the hospital commission, unless the department extends its final review period in accordance with the provisions of subsection (2) of this section.

(2) The review period for a concurrent review may be extended according to the following provisions.

(a) If, after a review has begun, the department, the health systems agency or, for a hospital project, the hospital commission requires the applicant to submit additional information, the applicant shall be allowed at least fifteen days to submit the information, and upon request of the applicant, the department shall extend its review period at least fifteen days.

(b) The department may extend the review period for the health systems agency and, in the case of a hospital project, the hospital commission for an additional period of up to forty-five days upon receipt of a written request from one of these agencies.

(c) The department may extend its final review if a public hearing is requested in accordance with the provisions of WAC 248-19-320 and

the hearing is conducted by the department. Such extension may be for an additional period of up to ten working days.

(d) If issues which are pivotal to the secretary's decision remain unresolved, the department may notify any person who submitted an application that additional relevant information is needed and extend its final review period up to but not exceeding thirty days after receipt of the information. Such pivotal issues include but are not limited to pending action for medicare or medicaid decertification, license revocation, patient trust fund violation or termination of a provider agreement.

(e) An extension to the review of one or more applications shall be applied to all applications for similar undertakings which are under review during the same concurrent review period.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-360 BASES FOR FINDINGS AND ACTION ON APPLICATIONS. (1) The findings of the department's review of certificate of need applications and the secretary's action on such applications shall, with the exceptions provided for in WAC 248-19-410 (~~for health maintenance organizations~~) and 248-19-415 be based on determinations as to:

(a) Whether the proposed project is needed (~~to meet health care needs of the defined population to be served~~);

(b) Whether the proposed project is financially feasible (~~with respect to both the capital costs and projected operational costs~~);

(c) Whether the proposed project will meet the criteria for structure and process of care identified in WAC 248-19-390; and

(d) Whether the proposed project will foster containment of the costs of health care.

(2) The secretary's decision on a certificate of need application shall be consistent with the state health plan in effect, except in emergency circumstances which pose a threat to the public health.

(3) Criteria contained in WAC 248-19-370, 248-19-380, 248-19-390, and 248-19-400 shall be used by the department in making the required determinations.

(a) In the use of criteria for making the required determinations, the department shall consider:

(i) The relationship of the proposed project to the applicable health systems plan (HSP) and annual implementation plan (AIP), and the state health plan (SHP);

(ii) The standards in the state health plan which are applicable to the type of project under review;

(iii) The findings and recommendations of the health systems agency and the hospital commission (in relation to the immediate and long-range financial feasibility of a hospital project as well as the probable impact of such project on the cost of and charges for providing health services by the hospital); and

~~((iii))~~ (iv) The relationship of the proposed project to the long-range plan (if any) of the person proposing the project.

(b) The department may consider any of the following in its use of criteria for making the required determinations:

(i) Nationally recognized standards from professional organizations;

(ii) Standards developed by professional organizations in Washington state;

(iii) Federal Medicare and Medicaid certification requirements;

(iv) State licensing regulations;

(v) The hospital commission's policies, guidelines and regulations;

(vi) Applicable standards which have been developed by other individuals, groups or organizations with recognized expertise related to ~~((the))~~ a proposed ((new institutional health services)) undertaking; and

(vii) The written findings and recommendations of individuals, groups or organizations with recognized expertise related to ~~((the proposed new institutional health services))~~ a proposed undertaking, with whom the department consults during the review of an application.

(c) The department shall identify the criteria and standards it will use prior to or during the screening of a certificate of need application in accordance with WAC 248-19-280(~~((+))~~): PROVIDED, HOWEVER, That when a person requests identification of criteria and standards prior to the submission of an application, the person shall submit such descriptive information on a project as is determined by the department to be reasonably necessary in order to identify the applicable criteria and standards. The department shall inform the applicant about any consultation services it will use in the review of a certificate of need application prior to the use of such consultation services.

(d) Representatives of the department or consultants whose services are engaged by the department may make an on-site visit to a health

care facility ((or health maintenance organization)), or other place for which a certificate of need application is under review or for which a proposal to withdraw a certificate of need is under review when the department deems such an on-site visit is necessary and appropriate to the department's review of a proposed project.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-370 DETERMINATION OF NEED. ((+) Health maintenance organization project.)

The determination of need for any ((health maintenance organization)) project(, with the exception provided for in WAC 248-19-410(+)(a)(i);) shall be based on the following criteria.

((+) The project is needed to meet the special needs and circumstances of enrolled members or reasonably anticipated new members of the health maintenance organization or proposed health maintenance organization:

(b) The services proposed are not available from nonhealth maintenance organization providers or other health maintenance organizations in a reasonable and cost-effective manner which is consistent with the basic method of operation of the health maintenance organization or proposed health maintenance organization:

In assessing the availability of these health services from these providers, the department shall consider only whether the services from these providers:

(i) Would be available under a contract of at least five years duration;

(ii) Would be available and conveniently accessible through physicians and other health professionals associated with the health maintenance organization or proposed health maintenance organization (for example - whether physicians associated with the health maintenance organization have or will have full staff privileges at a nonhealth maintenance organization hospital);

(iii) Would cost no more than if the services were provided by the health maintenance organization or proposed health maintenance organization; and

(iv) Would be available in a manner which is administratively feasible to the health maintenance organization or proposed health maintenance organization:

(2) Project which is not a health maintenance organization project.

The determination of need for any project, which is not a health maintenance organization project, shall be based on the following criteria:

(a) (1) The ((defined)) population served or to be served has need for ((services of the type proposed;)) the project and other services and facilities of the type proposed are not or will not be sufficiently available ((in sufficient supply)) or accessible to meet ((the needs of the defined population)) that need. The assessment of the conformance of a project with this criterion shall include, but need not be limited to, consideration of the following:

(a) In the case of a reduction, relocation, or elimination of a service, the need that the population presently served has for the service, the extent to which the need will be met adequately by the proposed relocation or by alternative arrangements, and the effect of the reduction, elimination or relocation of the service on the ability of low income persons, racial and ethnic minorities, women, handicapped persons, and other underserved groups to obtain needed health care;

(b) In the case of health services or facilities proposed to be provided, the efficiency and appropriateness of the use of existing services and facilities similar to those proposed;

(c) In the case of an application by an osteopathic or allopathic facility for a certificate of need to construct, expand or modernize a health care facility, acquire major medical equipment, or add services, the need for that construction, expansion, modernization, acquisition of equipment, or addition of services on the basis of the need for and the availability in the community of services and facilities for osteopathic and allopathic physicians and their patients, and the impact on existing and proposed institutional training programs for doctors of osteopathy and medicine at the student, internship, and residency training levels; and

(d) In the case of a project which does not involve direct patient care services, the contribution of the project toward the effective delivery of such services.

((+)) (2) The proposed project will not unnecessarily duplicate any other available health ((service of the type proposed)) services or facilities.

((+)) Other services of the type proposed are not or will not be sufficiently accessible to meet the needs of the defined population. The assessment of the conformance of a project with this criterion shall include, but not be limited to, consideration as to whether:

(i) Access of low income persons, racial and ethnic minorities, women, physically and mentally handicapped persons, and other underserved groups to the services proposed is commensurate with such persons' need for the health services (particularly those needs identified in the applicable health systems plan, annual implementation plan and state health plan as deserving of priority); and

(ii) In the case of the relocation of a facility or service, or the reduction or elimination of a service the present needs of the defined population for that facility or service, including the needs of underserved groups, will continue to be met by the proposed relocation or by alternative arrangements;))

(3) All residents of the service area, including low income persons, racial and ethnic minorities, women, handicapped persons, and other medically underserved groups are likely to have adequate access to the proposed health service(s). The assessment of the conformance of a project with this criterion shall include, but need not be limited to, consideration as to whether the proposed service makes a contribution toward meeting the health related needs of members of medically underserved groups which have traditionally experienced difficulties in obtaining equal access to health services, particularly those needs identified in the applicable health systems plan, annual implementation plan, and state health plan as deserving of priority. Such consideration shall include an assessment of the following:

(a) The extent to which medically underserved populations currently use the applicant's services in comparison to the percentage of the population in the applicant's service area which is medically underserved, and the extent to which medically underserved populations will use the proposed services if approved;

(b) The past performance of the applicant in meeting obligations, if any, under any applicable federal regulations requiring provision of uncompensated care, community service, or access by minorities and handicapped persons to programs receiving federal financial assistance (including the existence of any unresolved civil rights access complaints against the applicant);

(c) The extent to which physicians with admitting privileges at the applicant's facility admit Medicare and Medicaid patients; and

(d) The extent to which the applicant offers alternative means, other than through admission by a physician, by which a person will have access to its services (e.g., admission through a clinic or emergency room).

((+)) (4) Alternative uses of the resources required by a project, including health manpower, management personnel, and funds for capital and operating needs(;) reasonably are not ((reasonably)) or will not be available for the provision of other health services which are of higher priority as indicated by applicable health plans.

((+)) (5) The applicant has substantiated any of the following special needs and circumstances which the proposed project is to serve.

((+)) (a) The special needs and circumstances of entities such as medical and other health professions schools, multidisciplinary clinics and specialty centers which provide a substantial portion of their services or resources, or both, to individuals not residing in the health service areas in which the entities are located or in adjacent health service areas.

((+)) (b) The special needs and circumstances of biomedical and behavioral research projects which are designed to meet a national need and for which local conditions offer special advantages.

((+)) (c) The special needs and circumstances of osteopathic hospitals and nonallopathic services.

(6) The project will not have an adverse effect on health professional schools and training programs. The assessment of the conformance of a project with this criterion shall include consideration of:

(a) The effect of the means proposed for the delivery of health services on the clinical needs of health professional training programs in the area in which the services are to be provided; and

(b) If proposed health services are to be available in a limited number of facilities, the extent to which the health professions schools in the area will have access to the services for training purposes.

(7) If appropriate, the project fosters competition. The assessment of conformance to this criterion shall include consideration of the following:

(a) Factors identified in the state health plan which influence the effect of competition on the supply of health services of the type being reviewed; or

(b) Improvements or innovations in the financing and delivery of health services which foster competition and serve to promote quality assurance and cost effectiveness.

(8) The project is needed to meet the special needs and circumstances of enrolled members or reasonably anticipated new members of a health maintenance organization or proposed health maintenance organization and the services proposed are not available from nonhealth maintenance organization providers or other health maintenance organizations in a reasonable and cost-effective manner which is consistent with the basic method of operation of the health maintenance organization or proposed health maintenance organization. In assessing the availability of these health services from these providers, the department shall consider only whether the services from these providers:

(a) Would be available under a contract of at least five years duration;

(b) Would be available and conveniently accessible through physicians and other health professionals associated with the health maintenance organization or proposed health maintenance organization (for example - whether physicians associated with the health maintenance organization have or will have full staff privileges at a nonhealth maintenance organization hospital);

(c) Would cost no more than if the services were provided by the health maintenance organization or proposed health maintenance organization; and

(d) Would be available in a manner which is administratively feasible to the health maintenance organization or proposed health maintenance organization.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-390 CRITERIA FOR STRUCTURE AND PROCESS OF CARE. A determination that a project fosters an acceptable or improved quality of health care shall be based on the following criteria.

(1) A sufficient supply of qualified staff for the project, including both health manpower and management personnel, are available or can be recruited.

(2) The ((project)) proposed service(s) will have an appropriate relationship, including ((organization)) organizational relationship, to ancillary and support services, and ancillary and support services will be sufficient to support any health services included in the proposed project.

(3) There is reasonable assurance that the project will be in conformance with ((federal and state laws, rules, regulations and standards)) applicable ((to health care facilities and services)) state licensing requirements and federal "conditions of participation" for certification in the Medicaid or Medicare program.

(4) The proposed project will promote continuity in the provision of health care ((to the defined population and will), not result in an unwarranted fragmentation of services, and have an appropriate relationship to the service area's existing health care system.

(5) There is reasonable assurance that the services to be provided through the proposed project will be provided in a manner that ensures safe and adequate care to the public to be served and in accord with applicable federal and state laws, rules, and regulations. The assessment of the conformance of a project to this criterion shall include but not be limited to consideration as to whether:

(a) The applicant has no history, in this state or elsewhere, of a criminal conviction which is reasonably related to the applicant's competency to exercise responsibility for the ownership or operation of a health care facility, a denial or revocation of a license to operate a health care facility, a revocation of a license to practice a health profession, or a decertification as a provider of services in the Medicare or Medicaid program because of failure to comply with applicable federal conditions of participation; or

(b) If the applicant has such a history, whether the applicant has affirmatively established to the department's satisfaction by clear, cogent and convincing evidence that the applicant can and will operate the proposed project for which the certificate of need is sought in a manner that ensures safe and adequate care to the public to be served and conforms to applicable federal and state requirements.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-400 DETERMINATION OF COST CONTAINMENT. A determination that a proposed project will foster cost containment shall be based on the following criteria.

(1) Less costly and equally or more effective alternatives, such as shared services, merger, contract services, and different methods of service provision, are not available or practicable.

(2) ((The costs and methods of)) In the case of a project involving construction ((are reasonable and efficient));

(a) The costs and methods of construction and energy provision are reasonable; and

(b) The project will probably not have an unreasonable impact on the costs and charges to the public of providing health services by other persons.

(3) The ((costs and methods of energy provision are reasonable and efficient, and)) project takes into consideration the special needs and circumstances of health care facilities with respect to the need for energy conservation.

(4) The ((proposed)) project will promote efficiency or productivity.

NEW SECTION

WAC 248-19-403 MAJOR MEDICAL EQUIPMENT NOT OWNED BY OR LOCATED IN A HEALTH CARE FACILITY.

(1) For purposes of this section, purchases, donations and leases of major medical equipment shall be considered acquisitions of such equipment. An acquisition of major medical equipment through a transfer of such equipment for less than fair market value shall be considered an acquisition of major medical equipment if its fair market value is at least one hundred fifty thousand dollars.

(2) Before any person enters into a contractual arrangement to acquire major medical equipment which is not to be owned by or located in a health care facility, such person shall submit a valid notice to the department and the appropriate health systems agency of the intent to acquire the equipment.

(a) The notices to the department and the appropriate health systems agency shall be submitted in writing at least thirty days before entering into contractual arrangements to acquire the equipment with respect to which the notice is given.

(b) To be valid, a notice shall include:

(i) A complete description of the major medical equipment to be acquired and the health services to be provided with such equipment;

(ii) The name, address, and general description of the facility in which the equipment is to be located;

(iii) The date on which any contractual arrangement for acquisition of the equipment was or is to be entered into;

(iv) A statement as to whether the equipment is to be used for any hospital's inpatients; and

(v) If the equipment is to be used for any hospital's inpatients, the information relevant to a determination as to whether such usage is irregular or occasional. Such information shall include the following:

(A) The total number of existing and proposed pieces of equipment of the type to be acquired which will be located within the same facility after the acquisition;

(B) The name and addresses of each hospital for whose inpatients the equipment will be used;

(C) A description of the circumstances under which the equipment will be used for each of these hospital's inpatients;

(D) A two-year estimation of the total number of all tests or diagnostic or therapeutic procedures to be performed within the facility with use of equipment of the type to be acquired; and

(E) For each of the hospitals whose inpatients will be served, a two-year estimation of the total number of tests or diagnostic or therapeutic procedures to be performed for the hospital's inpatients with use of the equipment of the type to be acquired, and the bases for such estimations.

(3) The acquisition of major medical equipment which is not to be owned by or located in a health care facility shall be subject to review if the department finds that:

(a) The written notice of intent to acquire the equipment was not submitted in accordance with the provisions of subsection (2) of this section; or

(b) The equipment will be used to provide services to a hospital's inpatients on more than an occasional and irregular basis.

(4) Within thirty days after receipt of a complete notice of intent to acquire the major medical equipment, the department shall respond to the person who submitted the notice of intent, informing such person as to whether the acquisition of the equipment is subject to certificate of need review. A copy of the response shall be sent to the appropriate health systems agency.

(5) If a person has acquired major medical equipment not located in a health care facility which the department determined was not subject

to review under the provisions of subsections (2), (3) and (4) of this section and subsequently prepares to use such equipment to serve inpatients of a hospital on more than an occasional or irregular basis, the proposed new use of the major medical equipment shall be subject to certificate of need review.

NEW SECTION

WAC 248-19-405 EXEMPTIONS FROM REQUIREMENTS FOR A CERTIFICATE OF NEED. (1) Provisions for exemptions. The secretary shall grant an exemption from the requirements for a certificate of need for the offering of an inpatient institutional health service, the acquisition of major medical equipment for the provision of an institutional health service or the obligation of a capital expenditure in excess of one hundred fifty thousand dollars for the provision of an inpatient institutional health service to any entity which meets the eligibility requirements set forth in subdivision (a) of this subsection for such an exemption and submits an application for an exemption which meets the requirements of subdivision (b) of this subsection.

(a) Eligibility requirements. To be eligible for an exemption from the requirements for a certificate of need for the offering of an inpatient institutional health service, the acquisition of major medical equipment for the provision of an inpatient institutional health service, or the obligation of a capital expenditure in excess of one hundred fifty thousand dollars for the provision of an institutional health service, an applicant entity shall be one of the following:

(i) A health maintenance organization or a combination of health maintenance organizations if:

(A) The organization or combination of organizations has, in the service area of the organization or the service areas of the organizations in the combination, an enrollment of at least fifty thousand individuals;

(B) The facility in which the service will be provided is or will be geographically located so that the service will be reasonably accessible to such enrolled individuals; and

(C) At least seventy-five percent of the patients who can reasonably be expected to receive the institutional health service will be individuals enrolled in such organization or organizations in the combination;

(ii) A health care facility if:

(A) The facility primarily provides or will provide inpatient health services;

(B) The facility is or will be controlled, directly or indirectly, by a health maintenance organization or a combination of health maintenance organizations which has, in the service area of the organization or service areas of the organizations in the combination, an enrollment of at least fifty thousand individuals;

(C) The facility is or will be geographically located so that the service will be reasonably accessible to such enrolled individuals; and

(D) At least seventy-five percent of the patients who can reasonably be expected to receive the institutional health service will be individuals enrolled with such organization or organizations in the combination; or

(iii) A health care facility (or portion thereof) if:

(A) The facility is or will be leased by a health maintenance organization or combination of health maintenance organizations which has, in the service area of the organization or the service areas of the organizations in the combination, an enrollment of at least fifty thousand individuals and, on the date the application for an exemption is submitted, at least fifteen years to remain in the term of the lease;

(B) The facility is or will be geographically located so that the service will be reasonably accessible to such enrolled individuals; and

(C) At least seventy-five percent of the patients who can reasonably be expected to receive the institutional health service will be individuals enrolled with such organization;

(b) Requirements for an application for exemption. An application for an exemption from a certificate of need shall meet the following requirements.

(i) The application for an exemption shall have been submitted at least thirty days prior to the offering of the institutional health service, acquisition of major medical equipment, or obligation of the capital expenditure to which the application pertains. A copy of the application for the exemption shall be sent simultaneously to the appropriate health systems agency and, in the case of a hospital, to the hospital commission.

(ii) A complete application shall be submitted in such form and manner as has been prescribed by the department. The information which the department prescribes shall include:

(A) All of the information required to make a determination that the applicant entity qualifies in accordance with subdivision (a) of this subsection; and

(B) A complete description of the offering, acquisition, or obligation to which the application pertains.

(2) Action on an application for exemption.

(a) Within thirty days after receipt of a complete application for exemption from certificate of need requirements, the department shall send the applicant a written notice that the exemption has been granted or denied. A copy of such written notice shall be sent simultaneously to the appropriate health systems agency and, in the case of a hospital, to the hospital commission.

(b) The secretary shall deny an exemption if he finds the applicant has not met the requirements of subsections (1) (a) and (b) of this section. Written notice of the denial shall include the specific reasons for the denial.

(c) In the case of an application for a proposed health care facility (or portion thereof) which has not begun to provide institutional health services on the date the application for an exemption is submitted, the secretary shall grant the exemption if he determines the facility (or portion thereof) will meet the applicable requirements of subsection (1)(a) of this section when the facility first provides health services.

(d) If the secretary fails to grant or deny an exemption in accordance with the provisions of this section within thirty days after receipt of a complete application for such exemption, such failure shall be considered a denial of the exemption and the final decision of the secretary.¹

(3) Subsequent sale, lease or acquisition of exempt facilities or equipment. Subsequent sale, lease, or acquisition of exempt health care facilities (or portions thereof) or medical equipment for which an exemption was granted under the provisions of subsection (2) of this section, any acquisition of a controlling interest in such facility or equipment, and any use of such facility or equipment by a person other than the one to whom the exemption was granted, shall meet one of the following conditions:

(a) A certificate of need for the purchase, lease, acquisition of controlling interest in, or use of such facility or equipment, shall have been applied for and issued by the department; or

(b) The department shall have determined, after receipt of an application for an exemption, submitted in accordance with subsection (1) of this section, that the requirements of either subsection (1)(a)(i) or subsection (1)(a)(ii)(A) and (B) are met.

NOTE:

¹The applicant for the exemption may, within thirty days after the secretary's failure to act within the stipulated period of time, bring action in Superior Court pursuant to RCW 34.04.130 to require the department to issue or deny a certificate of need.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-410 REVIEW AND ACTION ON HEALTH MAINTENANCE ORGANIZATION PROJECTS. (~~(+) Title XIII health maintenance organization projects.~~)

~~(a) In the case of a new institutional health service which is proposed to be provided by or through a health maintenance organization for which assistance may be provided under Title XIII of the Public Health Service Act and which consists of (or includes) the construction, development or establishment of a new inpatient health care facility, the department shall determine whether utilization of the facility by members of the applicant will account for at least seventy-five percent of the projected annual inpatient days, as determined in accordance with the recommended occupancy levels under the state health plan, and:~~

~~(i) Where the department determines that these members will account for less than seventy-five percent of these patient days, the application for the project shall be reviewed in accordance with WAC 248-19-360, with the use of WAC 248-19-370(2) for determination of need for the project; or~~

~~(ii) Where the department determines that these members will account for at least seventy-five percent of these patient days, the application for the project shall be reviewed in accordance with the provisions of the following WAC 248-19-410(1)(b):~~

~~(b) The findings of the department's review of any certificate of need application for a new institutional health service of a health maintenance organization for which assistance may be provided under Title XIII of the Public Health Service Act and the basis for the secretary's~~

action on such application, with the exceptions provided for in the preceding WAC 248-19-410(1)(a)(i), shall be limited to determination of need based on WAC 248-19-370(1).

(2) Health maintenance organization projects, general:

(a) The review of a certificate of need application for a new institutional health service which is proposed to be provided by or through a health maintenance organization, for which assistance may not be provided under Title XIII of the Public Health Service Act, shall be in accordance with WAC 248-19-360.

(b) A certificate of need shall not be denied for any new institutional health service proposed to be provided by or through any health maintenance organization under the following circumstances:

(i) When the department has granted a certificate of need which authorized the development of the service, or expenditures in preparation for such offering or development, and when the offering of this new institutional health service will be consistent with the basic objectives, time schedules, and plans of the previously approved application: **PROVIDED**, That the department may impose a limitation on the duration of the certificate of need; or

(ii) Solely because there is a health maintenance organization of the same type, as specified in Section 1310(b) of the Public Health Service Act, in the same area, or solely because the services being reviewed are not discussed in the applicable health systems plan, annual implementation plan or state health plan;))

(1) Undertakings requiring a certificate of need. A certificate of need shall be required for any undertaking which, in accordance with WAC 248-19-230, is subject to the provisions of chapter 248-19 WAC, unless an exemption has been granted for such undertaking under the provisions of WAC 248-19-405.

(2) Required approval. The secretary shall issue a certificate of need for a proposed project if the certificate of need applicant for the proposed project is a health maintenance organization or a health care facility controlled (directly or indirectly) by a health maintenance organization and the department finds the proposed project meets the criteria set forth in WAC 248-19-370(8).

(3) Limitation on denials. The secretary shall not deny a certificate of need to a health maintenance organization or a health care facility controlled (directly or indirectly) by a health maintenance organization solely because a proposed project is not discussed in the applicable health systems plan, annual implementation plan or state health plan.

(4) Sale, acquisition or lease of facilities or equipment for which a certificate of need has been issued. A health care facility (or portion thereof) or medical equipment for which a certificate of need has been issued under the provisions of this section shall not be sold or leased and a controlling interest in such facility or equipment or in a lease of the facility or equipment shall not be acquired unless an exemption or a certificate of need for such sale, lease or acquisition has been granted by the secretary.

NEW SECTION

WAC 248-19-415 PROJECTS PROPOSED FOR THE CORRECTION OF DEFICIENCIES. (1) For the purposes of this section, "correction of deficiencies" shall mean one or more of the following:

(a) Eliminating or preventing imminent safety hazards as defined by federal, state or local fire, building, or life safety codes or regulations; or

(b) Complying with state licensing standards; or

(c) Complying with accreditation or certification standards which must be met to receive reimbursement under Titles XVIII or XIX of the Social Security Act.

(2) In conducting reviews for a project which is proposed for the correction of deficiencies, the department shall determine whether the project meets the following conditions:

(a) The project constitutes the correction of deficiencies as this term is defined in subsection (1) of this section.

(b) The facility or service for which the capital expenditure is proposed is needed.

(c) The obligation of the capital expenditure is consistent with the state health plan.

(3) The determination which is made with respect to the need for a facility or service shall include consideration of the following:

(a) The availability and accessibility of similar or identical facilities or services.

(b) Whether the project will contribute to or perpetuate unnecessary duplication of a facility or service.

(c) Specific criteria in the state health plan which relate directly to the need for the type of facility or service for which the project is proposed.

(4) The determination as to whether a project is to be reviewed under the emergency, concurrent, or expedited review process shall be made by the department after consultation with the appropriate health systems agency.

(5) An application for a project to correct deficiencies shall be approved unless the department finds that the proposed project does not meet the conditions stated in subsection (2) of this section. An application reviewed under the provisions of this section shall be approved only to the extent that the capital expenditure is needed for the correction of deficiencies.

(6) If the department finds that any portion of the project or the project as a whole is not needed for the correction of deficiencies, such portion or entire project shall be reviewed in accordance with WAC 248-19-360, 248-19-370, 248-19-380, 248-19-390, and 248-19-400.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-420 WRITTEN FINDINGS AND ACTIONS ON CERTIFICATE OF NEED APPLICATION. (1) Written findings.

(a) The findings of the department's review of a certificate of need application shall be stated in writing and include the basis for the secretary's decision as to whether a certificate of need is to be issued or denied for the proposed project.

(b) In making its findings and taking action on a certificate of need application, the department shall use all criteria contained in chapter 248-19 WAC ((248-19-370, 248-19-380, 248-19-390 and 248-19-400)) which are applicable to the proposed project(;;).

(i) The written findings shall identify any criterion which the department has decided is not applicable to the particular project and give the reason for such decision.

(ii) The secretary may deny a certificate of need if the applicant has not provided the information which is necessary to a determination that the project meets all applicable criteria and which the department has prescribed and published as necessary to a certificate of need review of the type proposed: **PROVIDED, HOWEVER**, That the department has requested such information in a screening letter sent in accordance with WAC 248-19-280(((4)))(1)(c).

(c) ((A decision that a project for the provision of inpatient health services is needed shall not be made nor a certificate of need for such project be issued unless the department makes the following findings:

(i) Findings as to the efficiency and appropriateness of the use of existing inpatient facilities providing inpatient services similar to those proposed;

(ii) Findings as to the capital and operating costs for the project and their potential impact on patient charges;

(iii) Findings as to the efficiency and appropriateness of the proposed new institutional health service;

(iv) A finding that superior alternatives to the proposed inpatient services, in terms of cost, efficiency, and appropriateness do not exist and that the development of such alternatives is not practicable;

(v) In the case of new construction, a finding that alternatives to the new construction (e.g., modernization or sharing arrangements) have been considered and have been implemented to the extent practicable;

(vi) A finding that patients will experience serious problems in terms of cost, availability or accessibility or quality of care in obtaining inpatient care of the type proposed in the absence of the proposed new service; and

(vii) In the case of the addition of beds for the provision of skilled nursing care or intermediate care, a finding that relationship of the addition to the plans of other agencies of the state responsible for planning and financing long-term care (including home health services) has been considered.) The department shall make written findings on the extent to which the project meets the criteria set forth in WAC 248-19-370 (1) and (3) when the secretary issues a certificate of need directly related to the provision of health services, beds, or major medical equipment: **PROVIDED, HOWEVER**, That no such written finding shall be necessary for projects for the correction of deficiencies of the types described in WAC 248-19-415 and for projects proposed by or on behalf of a health maintenance organization or a health care facility which is controlled, directly or indirectly, by a health maintenance organization.

(2) Separability of application and action. When a certificate of need application is for multiple services or multiple components or the

proposed project is to be multiphased, the secretary may take individual and different action on separable portions of the proposed project.

(3) Conditional certificate of need.

(a) The secretary in making his decision on a certificate of need application may decide to issue a conditional certificate of need if the department finds that the project is justified only under specific circumstances: PROVIDED, HOWEVER, That conditions shall relate directly to the project being reviewed and to review criteria.

(b) When the department finds that a project for which a certificate of need has been issued does not entirely satisfy the review criteria set forth in WAC 248-19-370 (1) and (3), the secretary may impose a condition or conditions that the applicant take affirmative steps so as to entirely satisfy those review criteria.

(c) The conditions attached to a certificate of need may be released by the secretary upon the request of the health care facility or health maintenance organization for which the certificate of need was issued: PROVIDED, It can be substantiated that the conditions are no longer valid and the release of such conditions would be consistent with the purposes of ((the State Health Planning and Resources Development Act)) chapter 70.38 RCW.

(4) Distribution of written findings and statement of decision.

(a) A copy of the department's written findings and statement of the secretary's decision on a certificate of need application shall be sent to:

- (i) The person who submitted the certificate of need application;
- (ii) The health systems agency for the health service area in which the proposed project is to be located;
- (iii) The hospital commission, if the proposed project is for a hospital; ~~((and))~~

(iv) In the case of a project proposed by a health maintenance organization, the appropriate regional office of the United States department of health ~~((education and welfare))~~ and human services; and

(v) When the secretary issues a certificate of need for a project which does not entirely satisfy the review criteria set forth in WAC 248-19-370 (1) and (3), the appropriate regional office of the department of health and human services.

(b) The written findings and statement of the secretary's decision on a certificate of need application shall be available to others who request the certificate of need unit to provide access to a copy of such findings and statement.

(5) Explanation of inconsistency with health systems agency recommendation or plan. The department shall send to the appropriate health systems agency a detailed, written statement as to the reasons why a decision which the secretary has made on a certificate of need application is inconsistent with any of the following:

- (a) The health systems agency's recommendation as to the action to be taken on the certificate of need application;
- (b) The goals of the applicable health systems plan; ~~((and))~~ or
- (c) The priorities of the applicable annual implementation plan.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-430 PROVISION FOR RECONSIDERATION DECISION. (1) Any person may, for good cause shown, request a public hearing for the purpose of reconsideration of the secretary's decision on a certificate of need application or withdrawal of a certificate of need.¹

(2) The department shall conduct a reconsideration hearing if it finds the request is in accord with the following requirements.

(a) The request for a reconsideration hearing shall be written, be received by the department within thirty days of the department's decision on the certificate of need application or withdrawal of the certificate of need, state in detail the grounds which the person requesting the hearing believes to show good cause, and be signed by the person making the request.

(b) Grounds which the department may deem to show good cause for a reconsideration hearing shall be limited to the following:

- (i) Significant relevant information not previously considered by the department ~~((which is sufficiently important to modify or reverse the department's findings and decision));~~
- (ii) Information on significant changes in factors or circumstances relied upon by the department in making its findings and decision; or
- (iii) Evidence the department materially failed to follow adopted procedures in reaching a decision.

(3) A reconsideration hearing shall be conducted in accordance with procedures for predecision and post-decision meeting on certificate of need applications which are established and published by the department and shall commence within thirty days after receipt of the request for the hearing.

(4) Notification of a public reconsideration hearing on a certificate of need application or withdrawal of a certificate of need shall be sent prior to the date of such hearing by the department to the following:

- (a) The person who requested the reconsideration hearing;
- (b) The person who submitted the certificate of need application which is under reconsideration or the holder of the certificate of need;
- (c) The health systems agency for the health service area in which the proposed project is to be offered or developed;
- (d) The hospital commission, if the proposed project is a hospital project; and to
- (e) Other persons who request the department to send them such notification.

(5) The department shall, within forty-five days after the conclusion of a reconsideration hearing, make written findings which state the basis of the decision made after such hearing.

(6) The secretary may, upon the basis of the department's findings on a reconsideration hearing, issue or reissue, amend ~~((or))~~, revoke, or withdraw a certificate of need or impose or modify conditions on a certificate of need for the project about which the reconsideration hearing was conducted.

NOTE:

¹No fee will be charged for a reconsideration hearing.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-440 ISSUANCE, SUSPENSION, DENIAL, REVOCATION AND TRANSFER OF A CERTIFICATE OF NEED.

(1) Issuance of a certificate of need.

(a) The secretary shall issue a certificate of need to the person who submitted the certificate of need application for the proposed project or a separable portion of the proposed project only if the department's findings and decision are that the project or the separable portion of the proposed project is consistent with the applicable criteria contained in chapter 248-19 WAC ~~((248-19-370, 248-19-380, 248-19-390, 248-19-400 and 248-19-410)).~~ In issuing a certificate of need, the secretary shall specify the maximum capital expenditure which may be obligated under the certificate and prescribe the method used to determine capital expenditures which may be obligated under such certificate.

(b) The secretary may issue a conditional certificate of need for a proposed project if it is justified only under specific circumstances. The conditions specified in a conditional certificate of need must directly relate to the project being reviewed and to criteria contained in chapter 248-19 WAC.

(2) Suspension of a certificate of need.

(a) Grounds for which the ~~((department))~~ secretary may suspend a certificate of need shall include, but not be limited to, suspicion of fraud, misrepresentation, false statements, misleading statements, evasion or suppression of material fact in the application for a certificate of need or any of its supporting materials.

(b) The ~~((department))~~ secretary shall issue an order for any suspension of a certificate of need to the person to whom the certificate of need had been issued.

(i) Such order shall state the reason for the suspension.

(ii) A copy of such order of suspension shall be sent to the appropriate health systems agency and, if for a hospital project, the hospital commission.

(c) A suspension of a certificate of need shall not exceed one hundred twenty calendar days.

(i) The department shall review the facts and circumstances relevant to the suspension and the secretary shall reinstate, amend or revoke a certificate of need within the one hundred twenty calendar days.

(ii) The ~~((department))~~ secretary shall send written notice of its decision on a suspended certificate of need to the person to whom the certificate of need had been issued. A copy of such notice shall be sent to the appropriate health systems agency and, if a hospital project, to the hospital commission.

(3) Denial of a certificate of need.

The secretary shall send written notification of denial of a certificate of need for a proposed project or a separable portion of a proposed project to the person who submitted the certificate of need application for the proposed project for which the certificate of need is not issued.

(a) Such notification shall state the reasons for the denial of a certificate of need.

(b) Copies of such notification shall be sent to the appropriate health systems agency and, if for a hospital project, to the hospital commission.

(4) Continuing effect of a denial.

In any case in which a proposed project or separable portion of the proposed project has been denied a certificate of need, another certificate of need application for such proposed project or separable portion thereof shall not be accepted by the department or reviewed under the provisions of chapter 248-19 WAC following the denial unless the department determines:

- (a) There is a substantial change in existing or proposed health facilities or services in the area to be served by the project; or
- (b) There is a substantial change in the need for the facilities or services of the type proposed in the area to be served by the project; or
- (c) Three years have lapsed since the submission of the application for the certificate of need which was denied.

(5) Revocation of a certificate of need.

(a) The ~~((department))~~ secretary may revoke a certificate of need for fraud, misrepresentation, false statements, misleading statements, evasion or suppression of material facts in the application of a certificate of need, or in any of its supporting materials.

~~(b) ((A certificate of need shall be revoked two years or, if the department granted an extension of the certificate of need, two years and six months, from the date on which it was issued, unless it can be substantiated that substantial and continuing progress toward the commencement of the project has been made.~~

~~(c) The department may revoke a certificate of need if, after commencement of the project, the person to whom the certificate of need was issued fails, to make reasonable and continuing progress toward completion of the project.~~

~~(d))~~ The secretary shall send written notification of a revocation of a certificate of need to the person to whom the certificate of need had been issued.

(i) The notice of revocation shall include a statement of the reasons for such revocation.

(ii) A copy of a notice of revocation shall be sent to the appropriate health systems agency and, if a hospital project, to the hospital commission.

(6) Transfer or assignment of a certificate of need. A certificate of need which has been issued to one person shall not be transferred or assigned to another person without the written approval of the secretary.

(a) The person to whom the certificate of need was originally issued shall submit to the department a written request that the certificate of need be transferred to another person and give the full name and complete address of the other person.

(b) The person to whom the current holder of the certificate of need wishes to transfer the certificate shall send a written request for such transfer on a form and in such a manner as prescribed and published by the department.

(c) The ~~((department))~~ secretary, after ~~((consulting))~~ the department's consultation with the appropriate health systems agency and, for a hospital project, the hospital commission shall:

- (i) Transfer the certificate of need;
- (ii) Deny the transfer of the certificate of need and send written notice of the denial and the reasons for such denial to the persons who requested the transfer; or
- (iii) If the person, who wishes to receive the certificate of need, plans to modify the project for which the certificate was issued, notify such person that an application for a new or amended certificate of need is necessary.

(7) Secretary's failure to act. If the secretary fails to issue or deny a certificate of need in accordance with the provisions of chapter 248-19 WAC, such failure shall be considered a denial of a certificate of need for the proposed project and the final decision of the secretary.¹

NOTE:

¹The applicant for the certificate of need may, within thirty days after the secretary's failure to act within the applicable period of time stipulated in chapter 248-19 WAC, bring action in superior court pursuant to RCW 34.04.130 to require the department to issue or deny a certificate of need.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-450 CIRCUMSTANCES FOR WHICH AN AMENDED CERTIFICATE OF NEED IS REQUIRED. (1) An amended certificate of need shall be required for any of the following modifications of a project for which a certificate of need was issued:

- (a) An addition of a new service;

(b) An expansion of a service beyond that which was included in the certificate of need application on which the issuance of the certificate of need was based;

(c) An increase in the inpatient bed capacity; or

(d) A significant reduction in the scope of a project for which a certificate of need has been issued without a commensurate reduction in the cost of the project, or project cost increases (as represented in bids on a construction project or final cost estimate(s) acceptable to the person to whom the certificate of need was issued) when the total of such increases exceeds five percent or twenty-five thousand dollars, whichever is greater, over ~~((the cost estimate which was included in the application for the certificate of need))~~ the maximum capital expenditure specified by the secretary in issuing the certificate of need; PROVIDED, HOWEVER, That the review of such reductions or cost increases shall be restricted to the continued ((financial feasibility)) conformance of the project with the criteria contained in WAC 248-19-380 and 248-19-400.

(2) An application for an amended certificate of need shall be submitted in accordance with the provisions of WAC 248-19-280.

(3) An application for an amended certificate of need may be reviewed under the expedited review process set forth in WAC 248-19-340.

(4) The department shall provide a written determination as to the requirement for an amended certificate of need within twenty-one days after receipt of a request for such determination.

NEW SECTION

WAC 248-19-475 WITHDRAWAL OF A CERTIFICATE OF NEED. (1) The secretary may withdraw a certificate of need if the department determines, after consultation with the appropriate health systems agency and, in the case of a hospital project, the hospital commission, that the holder of a certificate is not meeting the timetable specified in the certificate of need application for making services or equipment available or obligating a capital expenditure and is not making a good faith effort to meet such timetable.

(2) In reviewing a proposed withdrawal of a certificate of need, the department shall adhere to the provisions of WAC 248-19-310, 248-19-320, 248-19-325 and 248-19-430.

(3) The review period for a proposed withdrawal of a certificate of need shall not exceed ninety days unless extended by the department to allow sufficient time for the conduct of a public hearing pursuant to the provisions of WAC 248-19-320. The review period of the appropriate health systems agency and, in the case of a hospital project, the hospital commission shall not exceed sixty days unless extended by the department at the written request of the health systems agency to allow sufficient time for the conduct of a public hearing pursuant to the provisions of WAC 248-19-320. Such extension shall not exceed thirty days.

(4) The findings of the department's review of a proposed withdrawal of a certificate of need shall be stated in writing and include the basis for the secretary's decision as to whether the certificate of need is to be withdrawn for a proposed project. A copy of the department's written findings and statement of the secretary's decision on the proposed withdrawal of a certificate of need shall be sent to:

- (a) The holder of the certificate of need;
- (b) The health systems agency for the health service area in which the proposed project is to be located;
- (c) The hospital commission, if the proposed project is for a hospital; and

(d) In the case of a project proposed by a health maintenance organization, the appropriate regional office of the United States department of health and human services.

(5) The written findings and statement of the secretary's decision on the proposed withdrawal of a certificate of need shall be available to others who request the certificate of need unit to provide access to a copy of such findings and statement.

(6) The department shall send to the appropriate health systems agency a detailed, written statement as to the reasons why a decision which the secretary has made is inconsistent with any of the following:

- (a) The health systems agency's recommendation as to the action to be taken;
- (b) The goals of the applicable health systems plan; or
- (c) The priorities of the applicable annual implementation plan.

(7) When a certificate of need is for multiple services or multiple components or the proposed project is to be multiphased, the secretary may take individual and different action regarding withdrawal of the certificate of need on separable portions of the certificate of need.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-480 RIGHT AND NOTICE OF APPEAL. (1) Any affected person (~~denied a certificate of need for a project or a separable portion of a project or whose certificate of need was amended, suspended or revoked by the secretary~~) may request and shall be afforded the opportunity for an administrative hearing on the secretary's decision to issue or deny a certificate of need for a project or a separable portion of a project, to grant or deny an exemption requested under WAC 248-19-405, to suspend or revoke a certificate of need, or to withdraw or not withdraw a certificate of need.

(2) (~~A health systems agency shall be afforded the opportunity for an administrative hearing regarding a secretary's decision on a certificate of need application which is inconsistent with the health systems agency's recommendation as to the action to be taken on such application.~~

(~~3~~) To be effective, a request for an administrative hearing shall be in writing and received by the department within thirty (~~calendar~~) days after the person (~~or health systems agency~~) requesting the hearing(~~;~~) received the particular decision of the department which is being appealed.

(~~4~~) (3) An administrative hearing shall be conducted in accordance with the provisions of chapter 34.04 RCW (~~by an agency, other than the department, designated by the governor~~).

(~~5~~) (4) The decision of the (~~agency that~~) official who conducts an administrative hearing shall be made in writing within forty-five days after the conclusion of the hearing and the written decision shall be sent to the applicant, the appropriate health systems agency, and the department. The department shall make the written findings available to others upon request.

(~~6~~) (5) The decision of the (~~agency that~~) official who conducts an administrative hearing shall be considered the final decision¹ of the (~~department~~) secretary; however, the agency that conducts an administrative hearing may remand the matter to the department for further action or consideration.

NOTE:

¹Chapter 34.04 RCW provides entitlement to judicial review to any person aggrieved by a final decision in a contested case, whether such decision is affirmative or negative in form.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-490 CERTIFICATE OF NEED PROGRAM REPORTS. (1) The department shall prepare annual reports containing information on certificate of need reviews in progress, reviews completed in the preceding twelve month period, and a general statement of the findings and decisions made in the course of those reviews.

(2) Upon request, the department shall provide notification (~~upon request~~) to (~~providers of~~) health (~~services~~) care facilities and to other persons (~~subject to certificate of need review~~) of the status of the department's review of (~~new institutional health services~~) projects subject to review and the findings made in the course of such review.

AMENDATORY SECTION (Amending Order 188, filed 11/30/79)

WAC 248-19-500 PUBLIC ACCESS TO RECORDS. The general public shall have access in accordance with the provisions of chapter 42.17 RCW to (~~certificate of need~~) all applications reviewed by the department and to all other written materials (~~pertinent~~) essential to (~~such reviews, according to the provisions of chapter 42.17 RCW~~) any review by the department pursuant to the provisions of chapter 248-19 WAC.

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 248-19-290 CONCURRENT REVIEW OF SELECTED APPLICATIONS.

WSR 80-15-095
PROPOSED RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Public Assistance)
 [Filed October 22, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Social and Health Services, intends to adopt, amend, or repeal rules concerning AFDC—Eligibility, amending chapter 388-24 WAC;

and that the adoption, amendment, or repeal of such rules will take place at 9:00 a.m., Friday, October 24, 1980, in William B. Pope's office, 4th floor, Office Building #2, 12th and Franklin, Olympia, Washington.

The authority under which these rules are proposed is RCW 74.08.090.

This notice is connected to and continues the matter noticed in Notice Nos. WSR 80-11-065, 80-15-004 and 80-15-035 filed with the code reviser's office on 8/20/80, 10/2/80 and 10/9/80.

Dated: October 17, 1980

By: N. S. Hammond

Executive Assistant

WSR 80-15-096
PROPOSED RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Public Assistance)
 [Filed October 22, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Social and Health Services intends to adopt, amend, or repeal rules concerning Standards for additional requirements under specified circumstances—Child care expenses for AFDC recipients in approved training plans, new section WAC 388-29-158.

It is the intention of the secretary to adopt these rules on an emergency basis on November 5, 1980.

Correspondence concerning this notice and proposed rules attached should be addressed to:

N. Spencer Hammond
 Executive Assistant
 Department of Social and Health Services
 Mailstop OB-44 C
 Olympia, WA 98504

Interpreters for people with hearing impairments and brailled or taped information for people with visual impairments can be provided. Please contact William B. Pope, Chief, Office of Administrative Regulations, at State Office Building #2, 12th and Jefferson, Olympia, Washington, Phone (206) 753-7015, by November 12, 1980. The meeting site is in a location which is barrier free;

that such agency will at 2:00 p.m., Wednesday, November 26, 1980, in the Auditorium, Office Building #2, 12th and Franklin, Olympia, Washington, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 9:00 a.m., Wednesday, December 3, 1980, in William B. Pope's office, 4th floor, Office Building #2, 12th and Franklin, Olympia, WA.

The authority under which these rules are proposed is RCW 74.08.090.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to November 26, 1980, and/or orally at 2:00 p.m., Wednesday, November 26, 1980, Auditorium, Office Building #2, 12th and Franklin, Olympia, Washington.

Dated: October 21, 1980
 By: N. S. Hammond
 Executive Assistant

STATEMENT OF PURPOSE

This statement is filed pursuant to RCW 34.04.045. New WAC 388-29-158.

Purpose of the rule or rule change is to establish day care as an additional requirement in the AFDC program.

The reason(s) these rules are necessary is to prevent loss of day care services to AFDC recipients caused by amendments to chapter 388-15 WAC.

Statutory authority for this action is found in RCW 74.08.090.

Summary of the rule or rule change: Day care is established as an additional requirement for AFDC recipients currently participating in a training program.

Person or persons responsible for the drafting, implementation and enforcement of the rule:

Name of initiator: Dave Andersen
 Title: Program Manager
 Office: Bureau of Income Maintenance
 Phone: 3-7137
 Mailstop: OB-31 C

The person or organization (if other than DSHS) who proposed these rules is: None.
 These rules are not necessary as a result of federal laws, federal court decisions or state court decisions.

NEW SECTION

WAC 388-29-158 STANDARDS FOR ADDITIONAL REQUIREMENTS UNDER SPECIFIED CIRCUMSTANCES—CHILD CARE EXPENSES FOR AFDC RECIPIENTS IN APPROVED TRAINING PLANS. (1) Effective November 5, 1980 the expense of child care for AFDC recipients shall be authorized as an additional requirement when there is no one reasonably available to perform such services without cost. To be eligible for such child care payments an AFDC recipient must on November 5, 1980:

- (a) Be currently enrolled in, and,
 - (b) Be currently participating in a training program, and,
 - (c) Have his/her training program approved by the CSO prior to November 5, 1980, and,
 - (d) Have his/her approved training program scheduled for completion within two years from the date of his/her initial participation in the approved program.
- (2) Approval of training plans shall be made in accordance with the provisions of WAC 388-57-028.
 (3) Training-related child care shall be limited to the standards and requirements in WAC 388-29-155(2) and (3) only.

(4) Child care as an additional requirement shall not be authorized for AFDC recipients enrolled in a WIN or IRAP approved training program or any other training program for which the client is eligible to receive Title XX day care.

**WSR 80-15-097
 PROPOSED RULES
 DEPARTMENT OF
 SOCIAL AND HEALTH SERVICES
 (Radiation Control Agency)
 [Filed October 22, 1980]**

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Social and Health Services, intends to adopt, amend, or repeal rules concerning radiation control, amending Title 402 WAC.

Public hearings relating to these proposed rules were held in Olympia on October 8 and Spokane on October 15. The purpose of this notice is to extend the time for written comments from October 15 to October 31 and postpone adoption from October 29 to November 24.

Correspondence concerning this notice and proposed rules attached should be addressed to:

N. Spencer Hammond
 Executive Assistant
 Department of Social and Health Services
 Mailstop OB-44 C
 Olympia, Washington 98504;

and that the adoption, amendment, or repeal of such rules will take place at 9:00 a.m., Monday, November 24, 1980, in William B. Pope's office, 4th floor, Office Building #2, 12th and Franklin, Olympia, Washington.

The authority under which these rules are proposed is RCW 70.98.050.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to October 31, 1980.

This notice is connected to and continues the matter noticed in Notice No. WSR 80-12-055 filed with the code reviser's office on September 3, 1980.

Dated: October 21, 1980
 By: N. S. Hammond
 Executive Assistant

**WSR 80-15-098
 PROPOSED RULES
 DEPARTMENT OF PERSONNEL
 (Personnel Board)
 [Filed October 22, 1980]**

Notice is hereby given in accordance with the provisions of RCW 34.04.025 and 41.06.040, that the State Personnel Board, intends to adopt, amend, or repeal rules concerning:

- Amd WAC 356-34-010 (~~Disciplinary actions—Causes for demotion—Suspension—Reduction in salary—Dismissal~~) Suspension, reduction, demotion—Cause—Notice.
- Amd WAC 356-34-020 (~~Reduction in salary—Demotion—~~

			Procedure)) <u>Reduction, demotion—</u> <u>Service of notice—Limitation on</u> <u>demotion.</u>
Amd	WAC	356-34-030	Suspension—Duration— ((Procedure)) <u>Service of</u> <u>notice.</u>
Amd	WAC	356-34-040	Dismissal— ((Procedure)) <u>Service of</u> <u>notice.</u>
Amd	WAC	356-34-050	((Suspension—Followed by dismissal— Procedure)) <u>Immediate dismissal—</u> <u>Service of notice.</u>
Amd	WAC	356-34-070	((Demotion—Suspension—Reduction— Dismissal—Withdrawal of charges by appointing authority—Time limita- tion)) <u>Amendment of notices, appeals,</u> <u>exceptions.</u>
Amd	WAC	356-34-080	((Appeals from disciplinary actions, presumed abandonment, violations of law or rules—Filing period)) <u>Notice of</u> <u>appeal—Filing.</u>
Amd	WAC	356-34-085	((Appeals—Notice of hearing—Hear- ings officers recommended decisions— Board hearings and decisions)) <u>Ap-</u> <u>peals procedure.</u>
Amd	WAC	356-34-090	((Protests—Requirements for applicants and eligibles)) <u>Petition for review—Ex-</u> <u>aminees eligible.</u>
Amd	WAC	356-34-100	((Agency hearings—General provi- sions)) <u>Agency investigative hearings.</u>
Amd	WAC	356-34-10501	Hearings officers.
Amd	WAC	356-34-110	((Appeals—Board hearings—Proce- dure—Record)) <u>Conduct of appeal</u> <u>hearings.</u>
Amd	WAC	356-34-113	((Copies of)) Exhibits at ((all board)) hearings.
Amd	WAC	356-34-120	Appearance and practice before the board.
Amd	WAC	356-34-130	Appearance by former ((officer or)) em- ployees ((of the board)) .
Amd	WAC	356-34-140	Ethical conduct ((before board)) .
Amd	WAC	356-34-150	Computation of time on service of papers.
Amd	WAC	356-34-160	Service ((of progress)) .
Amd	WAC	356-34-170	Filing ((of)) papers with the State Per- sonnel Board.
Amd	WAC	356-34-180	Subpoenas ((=Content—Service)) .
Amd	WAC	356-34-190	Witness fees.
Amd	WAC	356-34-200	Proof of subpoena service.
Amd	WAC	356-34-210	Quashing.
Amd	WAC	356-34-220	((Orders for)) Discovery.
Amd	WAC	356-34-230	Burden of proof ((of charges)) .
Amd	WAC	356-34-250	((Appeals=)) Restoration of rights and benefits.
Amd	WAC	356-34-260	((Appeals=)) Correction of rating.
Amd	WAC	356-34-270	Appeals ((=)) to Superior Court ((= Filing period and reasons)) .
Amd	WAC	356-34-280	Filing of court appeals.
Amd	WAC	356-34-290	((Appeals—Transcript preparation and cost for court hearings)) <u>Filing record</u> <u>in court.</u>
Amd	WAC	356-34-300	Appeals—Court hearing—Consideration of record.
New	WAC	356-34-310	Declaratory rulings;

that such agency will at 10:00 a.m., Thursday, December 11, 1980, in the Board Hearing Room, 600 South Franklin, Olympia, WA 98504, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 10:00 a.m., Thursday, December 11, 1980, in the Board Hearing Room, 600 South Franklin, Olympia, WA 98504.

The authority under which these rules are proposed is RCW 41.06.040 and 41.06.050.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to December 9, 1980, and/or orally at 10:00 a.m., Thursday, December 11, 1980, Board Hearing Room, 600 South Franklin, Olympia, WA 98504.

Dated: October 17, 1980

By: Leonard Nord
Secretary

STATEMENT OF PURPOSE

The following rule amendments are proposed by the Department of Personnel. The Department of Personnel staff person responsible for drafting is Ken Elfbrandt; 600 South Franklin, Olympia, 98504; phone: 754-1481.

Amend WAC 356-34-010

Title: Suspension, reduction, demotion—Cause—Notice.

Purpose: Sets forth basis for disciplinary action.

Statutory Authority: RCW 41.06.150.

Summary: Changes will remove listing of specific causes and permit actions for just cause; also, specifies method of notice to employees.

Reasons: Avoids technical distinctions.

Responsibility for Implementation: All State Agencies. Enforcement: State Personnel Board.

Amend WAC 356-34-020, 356-34-030 and 356-34-040

Titles: Reduction, demotion—Service of notice—Limitation on demotion; Suspension—Duration—Service of notice; and Dismissal—Service of notice.

Purpose: Specifies time limits and method of service of notice for disciplinary actions and dismissal actions.

Statutory Authority: RCW 41.06.150 and 41.06.170.

Summary: New language will require personal service of notice of demotion, suspension, and, in most cases, dismissal.

Reasons: Clarifies process of service.

Responsibility for Implementation: All State Agencies. Enforcement: State Personnel Board.

Amend WAC 356-34-050

Title: Immediate dismissal—Service of notice.

Purpose: Provides for immediate suspension of an employee followed by dismissal; specifies method of notification of such actions.

Statutory Authority: RCW 41.06.150.

Summary: New language would provide for immediate dismissal without suspension and would require the notice to set forth the necessity for the immediate action.

Reasons: Eliminate need for two separate grounds.

Responsibility for Implementation: All State Agencies. Enforcement: State Personnel Board.

Amend WAC 356-34-070

Title: Amendment of notices, appeals, exceptions.

Purpose: Present rule permits only the appointing authority to amend notices.

Statutory Authority: RCW 41.06.150.

Summary: Proposed change would permit appellant, as well as appointing authority, to amend appeal notices.

Reasons: Permits amendment to overcome technical deficiencies in notices.

Responsibility for Implementation and Enforcement: State Personnel Board.

Amend WAC 356-34-080

Title: Notice of appeal—Filing.

Purpose: Sets forth bases for specified appeals and specifies timeliness of appeal action.

Statutory Authority: RCW 41.06.150 and 41.06.170.

Summary: Adds new language that sets forth specified contents of appeal notices.

Reasons: Information is needed in processing appeals.

Responsibility for Implementation: Department of Personnel. Enforcement: State Personnel Board.

Amend WAC 356-34-085

Title: Appeals procedure.

Purpose: Contains limited procedures for appeals hearings.

Statutory Authority: RCW 41.06.180 and 41.06.190.

Summary: New language contains expanded procedures for appeal hearings.

Reasons: Will expedite proceedings and clarify present practices.

Responsibility for Implementation and Enforcement: State Personnel Board.

Comments: Revision of Rule required by a Supreme Court decision.

Copy of Dunaway vs. DSHS 90W2d112 (1978) decision.

Amend WAC 356-34-090

Title: Petition for review—Examinees eligible.

Purpose: At the request of an applicant, provides for departmental review of specific actions.

Statutory Authority: RCW 41.06.150.

Summary: Adds language setting forth time lines and procedures for review at Departmental and Board level.

Reasons: Updates Rules to conform to current practices.

Responsibility for Implementation: Department of Personnel. Enforcement: State Personnel Board.

Amend WAC 356-34-100

Title: Agency investigative hearings.

Purpose: Authorizes agencies to take testimony concerning any actions for cause provided the appeal has not been heard by the Personnel Board; requires notification to Director of hearing dates.

Statutory Authority: RCW 41.06.150.

Summary: Proposed language would require appointing authority to conduct hearing, limit testimony to the particular circumstances involved and delete notification requirement.

Reasons: Places responsibility with appropriate agency person and confines testimony to issue.

Responsibility for Implementation: State Agency Appointing Authority.

Enforcement: State Personnel Board.

Amend WAC 356-34-10501

Title: Hearings officers.

Purpose: Authorizes the Personnel Board to utilize hearings officers.

Statutory Authority: RCW 41.06.110 and 41.06.125.

Summary: Minor language modifications with no substantive changes.

Reasons: Housekeeping to clarify language.

Responsibility for Implementation and Enforcement: State Personnel Board.

Amend WAC 356-34-110

Title: Conduct of appeal hearings.

Purpose: Provides procedural guidelines for Personnel Board hearings and authority for issuance of subpoenas.

Statutory Authority: RCW 41.06.120, 41.06.150, 41.06.180 and 41.06.190.

Summary: Provides for the resolution of split in Personnel Board decision and removes authority for issuance of subpoenas (moved to WAC 356-34-180).

Reasons: Provides better arrangement of related sections.

Responsibility for Implementation and Enforcement: State Personnel Board.

Amend WAC 356-34-113

Title: Exhibits at hearings.

Purpose: Stipulates distribution of exhibits for review during interrogation of witnesses at Personnel Board Hearings.

Statutory Authority: RCW 41.06.150.

Summary: New language requires distribution of exhibits at Hearings Officer hearings as well as Board hearings and provides for official file to have a copy instead of court reporter.

Reasons: Reflects actual practice.

Responsibility for Implementation and Enforcement: State Personnel Board.

Amend WAC 356-34-120

Title: Appearance and practice before the board.

Purpose: Limits representatives before the Personnel Board to licensed attorneys.

Statutory Authority: RCW 41.06.150.

Summary: New language permits appearance of authorized legal interns when accompanied by their qualified supervising attorney.

Reasons: Several legal interns have been employed by state agencies or by legal aide agencies and this amendment is necessary to authorize their appearance.

Responsibility for Implementation and Enforcement: State Personnel Board.

Amend WAC 356-34-130

Title: Appearance by former employees.

Purpose: Prevents former officer or employee of the Personnel Board from appearing before the Board for a period of two years.

Statutory Authority: Conflict of Interest Statute chapter 42.18 RCW.

Summary: Changes the prohibition to apply to former state employees who were employed by the Department of Personnel.

Reasons: Proposed change is more nearly consistent with language of the RCW.

Responsibility for Implementation and Enforcement: State Personnel Board.

Amend WAC 356-34-140

Title: Ethical conduct.

Purpose: Stipulates standards of ethical conduct for persons appearing before the Personnel Board or Hearings Officer.

Statutory Authority: RCW 41.06.150.

Summary: New language simply identifies Board as being the Personnel Board.

Reasons: Housekeeping.

Amend WAC 356-34-150

Title: Computation of time on service of papers.

Purpose: Sets forth the method for determining periods of time for serving papers.

Statutory Authority: RCW 41.06.150.

Summary: New language adds Saturday as a period of time not to be counted.

Reasons: Will make Rule consistent with Superior Court Rules.

Responsibility for Implementation and Enforcement: State Personnel Board.

Amend WAC 356-34-160

Title: Service.

Purpose: Provides for the Personnel Board to serve papers which it is required by law to serve.

Statutory Authority: RCW 41.06.150.

Summary: New language sets forth details for personal service, service by mail and for computing date of service.

Reasons: Makes service provisions consistent with those of Supreme Court.

Responsibility for Implementation and Enforcement: State Personnel Board.

Amend WAC 356-34-170

Title: Filing papers with the State Personnel Board.

Purpose: Provides that papers which must be filed with the Personnel Board be filed in the office of the Director within the time specified.

Statutory Authority: RCW 41.06.150.

Summary: No substantive changes, only minor language modification.

Reasons: Provides clarification and reflects current practice.

Responsibility for Implementation: Department of Personnel. **Enforcement:** State Personnel Board.

Amend WAC 356-34-180

Title: Subpoenas.

Purpose: Sets forth contents for subpoenas and responsibility for service.

Statutory Authority: RCW 41.06.110 and 41.06.180.

Summary: Added authority for issuance of subpoenas (moved from WAC 356-34-110) and requirement that party desiring subpoena submit prepared documents for issuance.

Reasons: Consolidates Rule sections on subpoenas.

Responsibility for Implementation: Department of Personnel. **Enforcement:** State Personnel Board.

Amend WAC 356-34-190

Title: Witness fees.

Purpose: Provides for payment of witnesses summoned before the Personnel Board.

Statutory Authority: RCW 41.06.150.

Summary: New language simply clarifies which Board.

Reasons: Housekeeping.

Amend WAC 356-34-200

Title: Proof of subpoena service.

Purpose: Specifies the procedure for filing proof of service of subpoenas with the Personnel Board.

Statutory Authority: RCW 41.06.150.

Summary: New language specifies location for filing a proof of service and adds Hearings Officers.

Reasons: Reflects current practice.

Responsibility for Implementation: Party issuing subpoena. **Enforcement:** State Personnel Board.

Amend WAC 356-34-210

Title: Quashing.

Purpose: Permits a party or a person served a subpoena to object.

Statutory Authority: RCW 41.06.150.

Summary: Permits objections to discovery.

Reasons: Procedures are necessary to protect the rights of parties or witnesses.

Responsibility for Implementation: Party or individual served.

Enforcement: State Personnel Board.

Amend WAC 356-34-220

Title: Discovery.

Purpose: Permits orders for discovery to be issued.

Statutory Authority: RCW 41.06.150.

Summary: New language would allow orders of discovery to be issued by attorneys while the party appearing pro se could obtain orders for discovery from the Personnel Board.

Reasons: Clarifies authority to issue orders for discovery.

Responsibility for Implementation and Enforcement: State Personnel Board.

Amend WAC 356-34-230

Title: Burden of proof.

Purpose: Sets forth burden of proof in appeal cases dealing with disciplinary actions.

Statutory Authority: RCW 41.06.150.

Summary: New language defines specific actions and adds reduction-in-force to actions.

Reasons: Expedites proceedings at hearings.

Responsibility for Implementation and Enforcement: State Personnel Board.

Amend WAC 356-34-250

Title: Restoration of rights and benefits.

Purpose: Provides for restoration of all employee benefits when fully reinstated after appeal; also, allows terminated employee to request reemployment rights of the Personnel Board.

Statutory Authority: Chapter 41.06 RCW.

Summary: New language clarifies action of the Personnel Board.

Reasons: Housekeeping.

Amend WAC 356-34-260

Title: Correction of rating.

Purpose: Provides that appointments already made will not be revoked because of changes in other individuals test scores.

Statutory Authority: RCW 41.06.150.

Summary: Intent of the Rule clarified by adding words, "for another employee."

Reasons: Provides clearer expression of intent.

Responsibility for Implementation and Enforcement: Department of Personnel.

Amend WAC 356-34-270

Title: Appeals to Superior Court.

Purpose: Specifies grounds on which an employee may appeal a Personnel Board order to Superior Court and sets time limitation.

Statutory Authority: RCW 41.06.200.

Summary: New language clarifies that the appeal provisions apply to appeal cases provided for in RCW 41.06.170.

Reasons: Provides more definite statement of intent.

Responsibility for Implementation and Enforcement: State Personnel Board.

Amend WAC 356-34-280

Title: Filing of court appeals.

Purpose: Specifies that in appeals to Superior Court the grounds will be stated in a written notice to be filed with the Court and the Director of Personnel or the Personnel Board.

Statutory Authority: RCW 41.06.200.

Summary: Incorporates in the Rule part of the appeal provisions from the RCW and places responsibility on appealing party to designate portion of record to be filed with court.

Reasons: Expedites transmission of record to court.

Responsibility for Implementation and Enforcement: State Personnel Board.

Amend WAC 356-34-290

Title: Filing record in court.

Purpose: Incorporates in the Rules a portion of the statutory provisions pertaining to the transmitting of a certified transcript of the Personnel Board Hearing to Superior Court. **Statutory Authority:** RCW 41.06.180 and 41.06.200.

Summary: New language adds provisions for payment of cost of transcript on appeal (moved from WAC 356-34-110).

Reasons: Consolidates Rule sections dealing with transmitting records to Superior Court.

Responsibility for Implementation and Enforcement: State Personnel Board.

Amend WAC 356-34-300

Title: Appeals—Court hearing—Consideration of record.

Purpose: Delineates statutory provisions regarding manner of review by Superior Court and provides for appeal to Supreme Court.

Statutory Authority: RCW 41.06.210.

Summary: Expands employee's appeal right to Court of Appeals.

Reasons: Reflect current practice.

Responsibility for Implementation and Enforcement: State Personnel Board.

New WAC 356-34-310

Title: Declaratory rulings.

Statutory Authority: RCW 34.04.080.

Purpose and Summary: Enables any interested party to petition the Personnel Board for a declaratory ruling; specifies procedures to be followed; and, sets forth specific determinations which the Personnel Board can issue.

Reasons: Provision required by Administrative Procedure Act (chapter 34.04 RCW).

Responsibility for Implementation and Enforcement: State Personnel Board.

Reviser's Note: The material contained in this filing will appear in a subsequent issue of the Register as it was received after the applicable closing date for this issue for agency typed material exceeding the volume limitations of WAC 1-12-035 or 1-13-035, as appropriate.

WSR 80-15-099
PROPOSED RULES
CRIMINAL JUSTICE
TRAINING COMMISSION
 [Filed October 22, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025 and 43.101, that the Washington State Criminal Justice Training Commission intends to adopt, amend, or repeal rules concerning certification of instructors, repealing WAC 139-24-010; and that the adoption, amendment, or repeal of such rules will take place at 10:00 a.m., Thursday, December 18, 1980, in the Criminal Justice Training Center, 2450 South 142nd, Seattle, WA 98168.

The authority under which these rules are proposed is RCW 43.101.080 (2).

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to December 11, 1980, and/or orally at 10:00 a.m., Thursday, December 18, 1980, Criminal Justice Training Center, 2450 South 142nd, Seattle, WA.

Dated: October 14, 1980
 By: Garry E. Wegner
 Assistant Director

STATEMENT OF PURPOSE

Title: WAC 139-24-010 Certification of Instructors.

Description of Purpose: To repeal WAC 139-24-010 in its entirety.

Statutory Authority: RCW 43.101.080 (2).

Summary of Rule: Provides qualifications for hiring instructors for Commission-sponsored courses.

Reasons supporting proposed action: Repeal of this WAC is deemed appropriate because the primary purpose, i.e. certification as quality assurance in instructional personnel, has been more effectively attained through (1) standardization of Basic Law Enforcement Academy program and elimination of numerous regional Academy sessions, and (2) more detailed and complete provisions of replacement policy dealing with instructor selection and compensation.

Agency personnel responsible:

James C. Scott, Executive Director, WA. State Criminal Justice, Training Commission, Mailstop PW-11, Olympia, WA 98504, Phone: SCAN 234-7450.

Garry E. Wegner, Assistant Director, WA. State Criminal Justice, Training Commission, Mailstop PW-11, Olympia, WA 98504, Phone: SCAN 234-7450.

Organization proposing repeal: Washington State Criminal Justice Training Commission (agency of state government).

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 139-24-010 CERTIFICATION OF INSTRUCTORS.

WSR 80-15-100
PROPOSED RULES
DEPARTMENT OF AGRICULTURE
 [Filed October 22, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025 and chapter 16.36 RCW, that the Department of Agriculture intends to adopt, amend, or repeal rules concerning amending WAC 16-54-016 Official calfhood vaccinate defined. Adjusts Washington State import regulations to concur with USDA, APHIS-VS recommendation for lower dosage vaccine;

that such agency will at 1:00 p.m., Tuesday, December 2, 1980, in the Small Conference Room, that such agency will at 1:00 p.m., Tuesday, December 2, 1980, in the Small Conference Room, General Administration Building, Olympia, Washington, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 3:00 p.m., Wednesday, December 17, 1980, in the Director's Office, Department of Agriculture.

The authority under which these rules are proposed is chapter 16.36 RCW.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to December 2, 1980, and/or orally at 1:00 p.m., Tuesday, December 2, 1980, Small Conference Room, General Administration Building, Olympia, Washington 98504.

Dated: October 21, 1980
 By: John J. Doherty
 Assistant Director

STATEMENT OF PURPOSE

For the purpose of legislative review of agency rules, the following statement is submitted under statutory authority chapter 16.36 RCW:

These rules relate to the Department of Agriculture concerning the importation of cattle and official calfhood vaccination for brucellosis.

This order is amended to allow for the reduced dosage brucella vaccine as recommended by the USDA, APHIS-VS in such imported cattle.

Agency personnel to contact:

John J. Doherty, DVM, Assistant Director/State Veterinarian, 406 General Administration Building AX 41, Olympia, Washington 98504, 206-753-5040.

Agency comment: None.

Whether rule is necessary as a result of federal law or federal or state court action: No.

Proponents: Washington State Department of Agriculture.

Opponents: Unknown.

AMENDATORY SECTION (Amending Order 1540, filed October 17, 1977)

WAC 16-54-016 OFFICIAL CALFHOOD VACCINATE DEFINED. For the purpose of this order "official calfhood vaccination" means a female bovine animal (~~(of dairy breed two to six months (60 to 179 days) of age or female bovine animal of beef breed two to ten months (60 to 299 days))~~) four through twelve months (120 to 365 days) of age vaccinated with an approved brucella vaccine. All vaccinations must be done by a licensed accredited veterinarian or federal or state employed veterinarian. Vaccinated animals must be permanently identified as vaccinates by a tattoo in the right ear. The tattoo shall be the U.S. registered shield and V preceded by a number indicating the quarter of the year and followed by a number corresponding to the last digit of the year in which vaccination was done. An official vaccination tag shall be used for individual animal identification unless excepted by the director.

WSR 80-15-101
PROPOSED RULES
DEPARTMENT OF ECOLOGY
[Filed October 22, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Ecology intends to adopt, amend, or repeal rules concerning Dupont, City Of, amending WAC 173-19-3503 (The foregoing section is part of chapter 173-19 WAC, Shoreline Management Act Of 1971—State Master Program). The date of adoption has been set more than 14 days after the last public hearing because the department has determined that it is in the public interest to insure that there is full, deliberate and careful review of this proposal;

that such agency will also at 7:00 p.m., Monday, December 15, 1980, in the Dupont Community Church, 502 Barksdale Avenue, Dupont, Washington, and 7:00 p.m., Tuesday, December 16, 1980, in the Auditorium, Office Building #2, 12th and Jefferson Street, Olympia, Washington, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 2:00 p.m., Tuesday, January 20, 1981, in the Hearings Room, Department of Ecology, Air and Land Offices, 4224 6th Avenue, Lacey, Washington.

The authority under which these rules are proposed is RCW 90.58.120 and 90.58.200.

Interested persons may submit data, views, or arguments to this agency orally at the above hearings.

Dated: October 21, 1980

By: John F. Spencer
Acting Director

STATEMENT OF PURPOSE

Title: Amending WAC 173-19-3503 Dupont, City Of.

Description of purpose: Adoption of revisions to local shoreline master program in State Master Program, chapter 173-19 WAC.

Statutory authority: RCW 90.58.120 and 90.58.200

Summary of rule: The program revision changes shoreline environment classifications for shorelands located on Nisqually Reach, Puget Sound. The proposed changes reclassify portions of the shorelands in the vicinity of the Dupont dock from urban to conservancy, while reclassifying recently annexed shorelands to the north from conservancy to urban.

Reasons supporting proposed action: Proponents argue that the change would allow the environmentally preferred alternative dock location for the proposed Weyerhaeuser Company export facility.

Agency personnel responsible for drafting, implementation and enforcement: D. Rodney Mack, Mail Stop PV-11, Department of Ecology, Olympia, WA 98504; telephone: 753-6874

Person or organization proposing rule, and whether public, private, or governmental: Department of Ecology (state government) at the request of the City of Dupont.

Agency comments or recommendations regarding statutory language, implementation, enforcement, fiscal matters: This proposal is controversial. Whatever the Department of Ecology decides with respect to the City of Dupont's submittal will probably be appealed to the courts.

Whether rule is necessary as a result of federal law or federal or state court action: (If so, attach copy of law or court decision.) No.

AMENDATORY SECTION (Amending Order DE 79-34, filed 1/30/80)

WAC 173-19-3503 DUPONT, CITY OF. City of Dupont master program approved June 11, 1975. Revision approved January 20, 1981.

WSR 80-15-102
EMERGENCY RULES
DEPARTMENT OF ECOLOGY
[Order DE 80-46—Filed October 22, 1980]

I, John F. Spencer, acting director of the Department of Ecology, do promulgate and adopt at the Department of Ecology, the annexed rules relating to NPDES Delegation, repealing WAC 173-06-060.

I, John F. Spencer, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is the Washington State Department of Ecology administers the National Pollutant Discharge Elimination System (NPDES) of the Federal Water Pollution Control Act, as amended, in

accordance with approval of the Administrator of the U.S. Environmental Protection Agency. Because Wilbur G. Hallauer, former director of the department, did not qualify under section 304(i) of the federal act to administer the program, it was necessary for him to delegate by rule the administration of the program to a person in the department who did qualify. John F. Spencer is now acting director of the department. He qualifies to administer the program and there is no need for WAC 173-06-060.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 43.21A-.090 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 21, 1980.

By John F. Spencer
Acting Director

REPEALER

The following section of the Washington Administrative Code is repealed:

- (1) WAC 173-06-060 NPDES DELEGATION.

WSR 80-15-103
PROPOSED RULES
COUNCIL FOR
POSTSECONDARY EDUCATION
[Filed October 22, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Council for Postsecondary Education intends to adopt, amend, or repeal rules concerning the Educational Services Registration Act, chapter 28B.05 RCW;

that such agency will at 9:30 a.m., Thursday, December 11, 1980, in the Shoreline Community College, Room 2270 A/B/C, Faculty Office/Student Service Building, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 9:30 a.m., Thursday, December 11, 1980, in the Shoreline Community College, Room 2270 A/B/C, Faculty Office/Student Service Building.

The authority under which these rules are proposed is RCW 28B.05.050(3).

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to November 17, 1980.

Dated: October 21, 1980
By: Chalmers Gail Norris
Executive Coordinator

STATEMENT OF PURPOSE

RE: Educational Services Registration Act, chapter 28B.05 RCW.

Statement of Purpose: This statement of purpose is written in compliance with section 23, chapter 186, Laws of 1980, and to accompany the Notice of Intention to Adopt, Amendment, or Repeal Rules by the Council for Postsecondary Education.

Title: Amendments modifying rules regarding the Educational Services Registration Act.

Summary: These amendments are intended to make the following change in the Council's regulations for the administration of the Educational Services Registration Act:

Correct punctuation in WAC 250-55-030, as amended by

Council for Postsecondary Education
Administrative

Order No. 1/80 (April 3, 1980).

Institutional Personnel Responsible for Drafting, Implementation, and Enforcement of Rule: Mark D. Johnson, Council For Postsecondary Education, 908 East Fifth Avenue, Olympia, Washington 98504.

Governmental Organization Proposing the Rule: Council For Postsecondary Education. Institutional Comments Regarding Statutory Matters: Not applicable.

Reason for Proposed Rule Change: Certain punctuation marks were not underlined in WAC 250-55-030(7) (Administrative Order No. 1/80, April 3, 1980), when it was submitted to the Code Reviser's Office on April 11, 1980 (WSR 80-05-017). The Code Reviser's Office has indicated that the punctuation problems cannot be resolved without a public hearing and formal rule amendment.

AMENDATORY SECTION (Amending Order 1-80, filed April 11, 1980)

WAC 250-55-030 EXEMPTIONS. The following types of education and institutions are exempted from the provisions of the act and this chapter:

(1) Education offered or sponsored by a bona fide trade, business, professional, or fraternal organization primarily for that organization's membership or offered by that organization on a no-fee basis;

(2) Education solely avocational or recreational in nature, as defined in WAC 250-55-020(7), and institutions offering such education exclusively: PROVIDED, That the institution does not advertise, promote, or offer educational credentials;

(3) Education offered by charitable institutions, organizations or agencies, as defined in WAC 250-55-020(6): PROVIDED, That the institution, organization or agency does not advertise, promote, or offer educational credentials;

(4) Institutions that are established, operated, and governed by this state or its political subdivisions under the provisions of Titles 28A (Common Schools), 28B (Higher Education), and 28C (Vocational Education) RCW;

(5) Institutions that have received institutional accreditation from any accrediting association recognized by the council under the provisions of WAC 250-55-220: PROVIDED,

(a) That this exemption shall pertain only to the types of educational credentials for which the institution is accredited;

(b) That an institution, branch, extension or facility operating within the state of Washington, which is affiliated with an institution operating in another state, must have separate institutional accreditation from a recognized accrediting association to qualify for this exemption;

(c) That an institution offering instruction on a federal installation solely to federal employees, and their dependents, shall not be required to have separate institutional accreditation in order to qualify for this exemption; and

(d) That a dual-purpose institution, as defined in RCW 28B.05.030(12), shall not be exempted under the provisions of both chapters 250-55 and 490-600 WAC unless it is specifically exempted under the provisions of both chapters.

(6) Any other institution to the extent that it has been exempted from some or all of the provisions of the act and this chapter in accordance with the hardship exemption procedure outlined in RCW 28B.05.130 and the hearing procedure outlined in WAC 250-55-210. An application for a hardship exemption shall be submitted on a form developed by the executive coordinator and shall include descriptive information about the institution, as required in WAC 250-55-040(1)(c); a list of the specific provisions for which an exemption is requested; an explanation of the hardship(s) created by those provisions; and an explanation of why, in the opinion of the chief administrator, the requested exemption(s) would not frustrate the purposes of the act.

(7) "Institutions not otherwise exempt that are of a religious character, but only as to those educational programs exclusively devoted to religious or theological objectives, and that are represented in an accurate manner in institutional catalogs and other official publications. The following procedures shall be employed in the implementation of this subsection:

(a) The executive coordinator shall ask the chief administrative officer of any institution that may qualify for an exemption on religious grounds to forward to the council office a copy of the institution's catalog and/or any other official publications that describe the nature of the institution and its programs. This information shall be used by the executive coordinator to verify the exemption status of the institution.

(b) For purposes of this subsection, "educational program exclusively devoted to religious or theological objectives" shall mean a program that has as its sole stated objective training in the religious beliefs of the controlling religious organization and/or preparation of students for occupations that are primarily church-related.

(c) In the case of a religious institution that offers both religious and secular programs of instruction, the requirements of RCW 28B.05 and WAC 250-55 shall pertain only to the secular programs of the institution.

(d) If the executive coordinator has reasonable cause to believe that certain religious or theological programs offered by a religious institution are not represented in a materially accurate manner in the institution's catalog and other official publications, the executive coordinator shall proceed according to the provisions of WAC 250-55-200."

WSR 80-15-104
PROPOSED RULES
DEPARTMENT OF ECOLOGY
[Filed October 22, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Ecology, intends to adopt, amend, or repeal rules concerning adopting chapter 173-511 WAC, Instream Resources Protection Program—Nisqually River Basin, Water Resource Inventory Area (WRIA) 11;

that such agency will at 7:30 p.m., Wednesday, December 3, 1980, in the Hearings Room, Department of Ecology, Air and Land Offices, Rowsix, Building 4, 4224 6th Avenue, Lacey, WA, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 10:00 a.m., Tuesday, January 27, 1981, in the Hearings Room, Department of Ecology,

Air and Land Offices, Rowsix, Building 4, 4224 6th Avenue, Lacey, WA.

The authority under which these rules are proposed is chapters 90.22 and 90.54 RCW.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to December 30, 1980, and/or orally at same location as shown above.

Dated: October 22, 1980

By: Elmer C. Vogel
Deputy Director

STATEMENT OF PURPOSE

Title: Adopting chapter 173-511 WAC Instream Resources Protection Program—Nisqually River Basin, Water Resource Inventory Area (WRIA) 11

Description of purpose: The chapter establishes minimum flows and closures in selected portions of the Nisqually River and its tributaries.

Statutory Authority: Chapters 90.22 and 90.54 RCW.

Summary of rule: This chapter establishes minimum flows and/or closures in the lower, bypass, mid, and upper reaches of the Nisqually River Basin.

Reasons supporting proposed action: To protect the instream resources of fish, wildlife, water quality, recreation, and scenic and aesthetic values within the Nisqually River Basin.

Agency personnel responsible for:

Drafting: Robert Kavanaugh, Mail Stop PV-11, Dept. of Ecology, Olympia 98504, 753-2770

Implementation and Enforcement: Gene Asselstine, Department of Ecology, 7272 Cleanwater Ln, Olympia, 753-0132

Person or organization proposing rule, and whether public, private, or governmental: Department of Ecology (state government)
Agency comments or recommendations regarding statutory language, implementation, enforcement, fiscal matters: This chapter constitutes a part of the comprehensive efforts of the Department of Ecology to establish minimum flows for all of the major streams of the Puget Sound basin. The comprehensive program has been fully described to the pertinent standing committees of the legislature on at least two occasions during the last three years.

Whether rule is necessary as a result of federal law or federal or state court action: (If so, attach copy of law or court decision.)
No.

Chapter 173-511 WAC
INSTREAM RESOURCES PROTECTION PROGRAM—
NISQUALLY RIVER BASIN, WATER RESOURCE INVENTORY AREA (WRIA) 11

NEW SECTION

WAC 173-511-010 GENERAL PROVISION. These rules apply to waters within the Nisqually River Basin, WRIA 11, as defined in WAC 173-500-040. This chapter is promulgated pursuant to chapter 90.54 RCW (Water Resources Act of 1971), chapter 90.22 RCW (Minimum Water Flows and Levels), and in accordance with chapter 173-500 WAC (Water Resources Management Program).

NEW SECTION

WAC 173-511-030 ESTABLISHMENT OF INSTREAM FLOWS. (1) Stream management units and associated control stations are established as follows:

Stream Management Unit Information

Control Station No. Stream Management Unit Name	Control Station Location, River Mile and Section, Township and Range	Affected Stream Reach
New gage Nisqually River	4.3 9, 18N, 1E	From influence of mean annual high tide at low base flow levels to the outlet of the Centralia City Light Power Plant
12-0895-00 Nisqually River	21.8 28, 17N, 2E	From gage 12-0895-00 at river mile 21.8. upstream to gage 12-0884-00 at RM 32.6
12-0884-00 Nisqually River	32.6 21, 16N, 3E	From gage 12-0884-00 to the La Grande Plant, excluding Mashel River
12-0825-00 Nisqually River	57.8 29, 15N, 6E	From gage 12-0825-00 upstream to the headwaters including all tributaries
12-0870.00 Mashel River	3.25 11, 16N, 4E	From mouth upstream to the headwaters including all tributaries

(2) Instream flows established for the stream management unit described in WAC 173-511-030(1) are as follows:

INSTREAM FLOWS IN THE NISQUALLY RIVER BASIN
(in Cubic Feet per Second)

Month	Day	Lower Reach of the Nisqually River USGS Gage 12-* Rm 4.3	Bypass Reach of the Nisqually River USGS Gage 12-0895-00 RM 21.8	Mid Reach of the Nisqually River USGS Gage 12-0884-00 RM 32.6
January	1	900	600	900
	15	900	600	900
February	1	900	600	900
	15	900	600	900
March	1	900	600	900
	15	900	600	900
April	1	900	600	900
	15	900	600	900
May	1	900	600	900
	15	900	600	900
June	1	900	500 (closed)	800 (closed)
	15	850	450 (closed)	800 (closed)
July	1	800	400 (closed)	800 (closed)
	15	800	400 (closed)	800 (closed)
August	1	800	370 (closed)	800 (closed)
	15	800	370 (closed)	650 (closed)
September	1	600	370 (closed)	600 (closed)
	15	600	370 (closed)	600 (closed)
October	1	650	550 (closed)	700 (closed)
	15	700	550 (closed)	700 (closed)
November	1	700	600	700
	15	700	600	700
December	1	800	600	800
	15	900	600	900

*New gage to be established.

Month	Day	Upper Reach of the Nisqually River USGS Gage		Mashel River USGS Gage	
		12-0825-00	RM 57.8	12-870-00	RM 3.25
January	1		450		100
	15		450		100
February	1		450		100
	15		450		100
March	1		450		100
	15		450		100
April	1		450		100
	15		450		100
May	1		450		100
	15		450		80
June	1		600		80(closed)
	15		650		70(closed)
July	1		550		50(closed)
	15		500		40(closed)
August	1		450		30(closed)
	15		400		30(closed)
September	1		350		20(closed)
	15		300		20(closed)
October	1		300		20(closed)
	15		300		20(closed)
November	1		350		40
	15		400		70
December	1		450		100
	15		450		100

(3) Instream flow hydrographs, as represented in the document entitled "Nisqually River Basin Instream Resource Protection Program," shall be used for identification of instream flows on those days not specifically identified in WAC 173-511-030(2).

Reviser's Note: Errors of punctuation or spelling in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

NEW SECTION

WAC 173-511-040 SURFACE WATER SOURCE LIMITATIONS TO FURTHER CONSUMPTIVE APPROPRIATIONS. (1) The department has determined that (a) certain streams exhibit low summer flows and have a potential for drying up or inhibiting anadromous fish passage during critical life stages, and (b) historic flow regimes and current uses of certain other streams indicate that no water is available for additional appropriation. Based upon these determinations the following streams and lakes area closed to further appropriation for the periods indicated:

New Surface Water Closures

Stream or Lake Section, Township, and Range of Mouth or Outlet	Tributary to	Period of Closure
Mashel River NE1/4SW1/4 Sec. 29, T16N, R4E and all tributaries	Nisqually River	June 1 - Oct. 31
Mounds Creek NE1/4NW1/4 Sec. 33, T19N, R1E and all tributaries	Nisqually River	April 1 - Oct. 31
Clear Creek NE1/4SE1/4 Sec. 21, T18N, R1E and all tributaries	Nisqually River	April 1 - Oct. 31
Tanwax Creek NW1/4NE1/4 Sec. 20, T16N, R3E and all tributaries	Nisqually River	April 1 - Oct. 31
McAllister Creek NW1/4N1/4 Sec. 6, T18N, R1E and all tributaries	Puget Sound	all year
Lake Saint Clair SE1/4NW1/4 Sec. 6, T17N, R1E		all year

(2) The following stream and lake low flows and closures are adopted confirming surface water source limitations previously established administratively under the authority of chapter 90.03 RCW and RCW 75.20.050.

**Existing Surface Water Source Limitations
Current Administrative Status of Streams and Lakes
Nisqually Basin, WRIA 11**

Stream	Tributary to	Action	Dates
Eaton Creek SE1/4NW1/4 Sec. 6, T17N, R1E	Lake St. Clair	Closure	12/1/53
Harts Lake and outlet streams	Nisqually River	Low Flow (0.5 cfs bypass)	10/7/44

Stream	Tributary to	Action	Dates
SW1/4SE1/4 Sec. 1, T16N, R2E			
Horn Creek SW1/4NE1/4 Sec. 1, T16N, R2E	Nisqually River	Closure	7/22/74
Lackamas Creek and all tributaries T.16N, R2E	Nisqually River	Low Flow (0.5 cfs bypass)	2/5/73
Muck Creek and all tributaries SW1/4SW1/4 Sec. 36, T18N, R1E	Nisqually River	Closure	5/26/48
Ohop Creek and all tributaries SW1/4NE1/4 Sec. 25, T16N, R3E	Nisqually River	Closure	2/15/52
Ohop Lake NE1/4SE1/4 Sec. 10, T16N, R1E	Ohop Creek	Lake Level (523 ft)	3/25/66
Thompson Creek and all tributaries SE1/4NE1/4 Sec. 11, T17N, R1E	Nisqually River cfs bypass)	Low Flow (1.0	11/19/51
Toboton Creek and all tributaries SW1/4SW1/4 Sec. 19, T16N, R3E	Nisqually River	Low flow (1/2 normal flow bypass)	1/19/48
Unnamed Ditch NE1/4NW1/4 Sec. 12,	Murray Creek	Low Flow flow bypass)	4/5/51
Unnamed Stream and all tributaries SW1/4NW1/4 Sec. 11, T15N, R4E	Alder Lake (Nisqually River)	Closure	4/28/64
Unnamed Stream and all tributaries SW1/4SE1/4 Sec. 17, T17N, R2E	Centralia Canal (Nisqually River)	Low Flow (0.75 cfs bypass)	11/19/51
Unnamed Stream and all tributaries SW1/4SW1/4 Sec. 27, T17N, R2E	Nisqually River	Low Flow (0.50 cfs bypass)	12/6/50
Yelm Creek and all tributaries SW1/4SW1/4 Sec. 12, T.17N, R1E	Nisqually River	Closure	8/7/51

Reviser's Note: The typographical errors in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

NEW SECTION

WAC 173-511-050 GROUND WATER. Future Groundwater withdrawal proposals will not be affected by this chapter unless it is verified that such withdrawal would clearly have an adverse impact upon the surface water system contrary to the intent and objectives of this chapter.

NEW SECTION

WAC 173-511-060 LAKES. In future permitting actions relating to withdrawal of lake waters, lakes and ponds shall be retained substantially in their natural condition. Withdrawals of water which would conflict therewith shall be authorized only in those situations where it is clear that overriding considerations of the public interest will be served.

Reviser's Note: Errors of punctuation or spelling in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

NEW SECTION

WAC 173-511-070 EXEMPTIONS. (1) Nothing in this chapter shall affect existing water rights, riparian, appropriative, or otherwise existing on the effective date of this chapter, nor shall it affect existing rights relating to the operation of any navigation, hydroelectric or water storage reservoir or related facilities.

(2) If, upon detailed analysis, appropriate and environmentally sound proposed storage facilities are found to be compatible with this chapter, such facilities may be approved.

(3) Domestic use for a single residence shall be exempt from the provisions of this chapter. If the cumulative effects of numerous single domestic diversions would seriously affect the quantity of water available for instream uses, then only domestic in-house use shall be exempt if no alternative source is available.

(4) Stockwatering use, except that related to feedlots, shall be exempt from the provisions established in this chapter.

(5) Future rights for nonconsumptive uses may be granted.

NEW SECTION

WAC 173-511-080 FUTURE RIGHTS. No rights to divert or store public surface waters of the Nisqually River Basin, WRIA 11, shall hereafter be granted which shall conflict with the purpose of this chapter as stated in WAC 173-513-020.

NEW SECTION

WAC 173-511-090 ENFORCEMENT. In enforcement of this chapter, the department of ecology may impose such sanctions as appropriate under authorities vested in it, including but not limited to the issuance of regulatory orders under RCW 43.27A.190 and civil penalties under RCW 43.83B.335.

NEW SECTION

WAC 173-511-100 REGULATION REVIEW. The rules in this chapter shall be reviewed by the department of ecology at least once in every five years.

**WSR 80-15-105
PROPOSED RULES
DEPARTMENT OF ECOLOGY**

[Filed October 22, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Ecology, intends to adopt, amend, or repeal rules concerning adopting chapter 173-515 WAC, Instream Resources Protection Program—Kitsap Water Resource Inventory Area (WRIA) 15;

that such agency will at 2:00 p.m., Thursday, December 18, 1980, in the Mason County Fire District #2 building, Old Belfair Highway, Belfair, Washington, 7:00 p.m., Thursday, December 18, 1980 at the Kitsap County Regional Library, 1301 Sylvan Way, Bremerton, Washington, 2:00 p.m., Friday, December 19, 1980 in the Evergreen Room, Ober Park Community Center, Vashon, Washington, and 7:00 p.m., Friday, December 19, 1980 at the Prudy Elementary School, 13815 62nd Avenue N.W., Gig Harbor, Washington, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 2:00 p.m., Wednesday, March 11, 1981, in the Hearings Room, Department of Ecology, Air and Land Offices, Rowsix, 4224 Sixth Avenue S.E., Lacey, WA.

The authority under which these rules are proposed is chapters 90.22 and 90.54 RCW.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to January 9, 1981, and/or orally at the above hearings.

Dated: October 22, 1980

By: Elmer C. Vogel
Deputy Director

STATEMENT OF PURPOSE

Title: Adopting chapter 173-515 WAC—Instream Resources Protection Program—Kitsap Water Resource Inventory Area (WRIA) 15.

Description of purpose: The chapter establishes instream flows and closures for the protection of wildlife, fish, scenic, aesthetic and other environmental values, and to preserve water quality.

Statutory authority: Chapters 90.22 and 90.54 RCW.

Summary of rule: This chapter closes certain streams to further consumptive appropriation and establishes minimum flows in certain other streams.

Reasons supporting proposed action: All streams proposed for some type of action have high values for instream uses, but exhibit low summer flows or historic flow regimes that indicate a lack of available water for additional appropriation.

Agency personnel responsible for:

Drafting: Jeanne Holloman, Department of Ecology, Olympia 98504, 753-6189, Mailstop PV-11.

Implementation: Gene Asselstine, 7272 Cleanwater Ln., Olympia, 753-0132.

Enforcement: Bob McCormick, 4350 150th Avenue N.E., Redmond, 885-1900.

Person or organization proposing rule, and whether public, private, or governmental: Department of Ecology (state government).

Agency comments or recommendations regarding statutory language, implementation, enforcement, fiscal matters: This chapter constitutes a part of the comprehensive efforts of the Department of Ecology to establish minimum flows for all of the major streams of the Puget Sound basin. The comprehensive program has been fully described to the pertinent standing committees of the legislature on at least two occasions during the last three years.

Whether rule is necessary as a result of federal law or federal or state court action: No.

Reviser's Note: The material contained in this filing will appear in a subsequent issue of the Register as it was received after the applicable closing date for this issue for agency typed material exceeding the volume limitations of WAC 1-12-035 or 1-13-035, as appropriate.

WSR 80-15-106

**NOTICE OF PUBLIC MEETINGS
CONSERVATION COMMISSION**

[Memorandum, Exec. Secretary—October 22, 1980]

Notice is hereby given that the regular Conservation Commission Meeting scheduled for "the third Thursday" (WAC 135-04-020) of November 1980 will be re-scheduled to:

Meeting Date: December 4, 1980

Meeting Place: Holiday Inn, Lakeway Drive and I-5, Bellingham, WA

Meeting Time: Beginning at 8:30 a.m.

Please contact Shirley Casebier, Conservation Commission, Olympia, Washington 98504, Phone: 753-3894 for further information.

Dates and places for other forthcoming meetings are yet to be determined.

WSR 80-15-107
PROPOSED RULES
DEPARTMENT OF ECOLOGY
 [Filed October 22, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Ecology intends to adopt, amend, or repeal rules concerning NPDES Delegation, repealing WAC 173-06-060;

and that the adoption, amendment, or repeal of such rules will take place at 10:00 a.m., Thursday, November 13, 1980, in the Department of Ecology, Room 273, St. Martins College Campus, Lacey, Washington 98504.

The authority under which these rules are proposed is RCW 43.21A.090.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to November 11, 1980.

Dated: October 21, 1980

By: John F. Spencer
 Acting Director

REPEALER

The following section of the Washington Administrative Code is repealed:

- (1) WAC 173-06-060 NPDES DELEGATION.

WSR 80-15-108
PROPOSED RULES
DEPARTMENT OF ECOLOGY
 [Filed October 22, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Ecology intends to adopt, amend, or repeal rules concerning the amending of WAC 173-19-2511, Kent, City of; WAC 173-19-2515, Mercer Island, City of; WAC 173-19-3506, Gig Harbor, Town of and WAC 173-19-370, Skagit County;

that such agency will at 10:00 a.m., Tuesday, November 25, 1980, in the Hearings Room, Department of Ecology, Air and Land Offices, Rowsix, 4224 Sixth Avenue S.E., Lacey, WA, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal or such rules will take place at 10:00 a.m., Wednesday, December 10, 1980, in the Hearings Room, Department of Ecology, Air and Land Offices, Rowsix, 4224 Sixth Avenue S.E., Lacey, WA.

The authority under which these rules are proposed is RCW 90.58.120 and 90.58.200.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to December 3, 1980, and/or orally in the Hearings Room, Department of Ecology, Air and Land Offices, Rowsix, 4224 Sixth Avenue S.E., Lacey, WA.

Dated: October 22, 1980

By: Elmer C. Vogel
 Deputy Director

STATEMENT OF PURPOSE

Title: Amending WAC 173-19-2511, Kent, City of; WAC 173-19-2515, Mercer Island, City of; WAC 173-19-3506, Gig Harbor, Town of and WAC 173-19-370, Skagit County.

Description of purpose: Adoption of revised shoreline master programs into the state master program, chapter 173-19 WAC.

Statutory authority: RCW 90.58.120 and 90.58.200.

Summary of rule: The amendments adopt revisions to shoreline master programs for the City of Kent, City of Mercer Island, Town of Gig Harbor, and Skagit County.

Reasons supporting proposed action: Shoreline master programs and revisions thereto are developed by local government and submitted to the Department of Ecology for approval. The programs do not become effective until adopted by the department in accordance with the Administrative Procedure Act.

Agency personnel responsible for drafting, implementation and enforcement:

Michael Rundlett, Department of Ecology, Mailstop PV-11, Olympia, WA 98504, 753-4388.

Person or organization proposing rule, and whether public, private, or governmental: Department of Ecology—state government.

Agency comments or recommendations regarding statutory language, implementation, enforcement, fiscal matters: None.

Whether rule is necessary as a result of federal law or federal or state court action: No.

AMENDATORY SECTION (Amending Order 79-34, filed 1/30/80)

WAC 173-19-2511 KENT, CITY OF. City of Kent master program approved April 4, 1974. Revision approved December 8, 1978. Revision approved April 10, 1979. Revision approved December 10, 1980.

Reviser's Note: The typographical errors in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

AMENDATORY SECTION (Amending Order DE 79-34, filed 1/30/80)

WAC 173-19-2515 MERCER ISLAND, CITY OF. City of Mercer Island master program approved September 24, 1974. Revision approved December 10, 1980.

AMENDATORY SECTION (Amending Order DE 79-34, filed 1/30/80)

WAC 173-19-3506 GIG HARBOR, TOWN OF. Town of Gig Harbor master program approved September 10, 1975. Revision approved December 10, 1980.

AMENDATORY SECTION (Amending Order DE 80-35, filed 9/10/80)

WAC 173-19-370 SKAGIT COUNTY. Skagit County master program approved October 5, 1976. Revision approved January 5, 1979. Revision approved May 11, 1979. Revision approved March 3, 1980. Revision approved September 10, 1980. Revision approved December 10, 1980.

WSR 80-15-109
PROPOSED RULES
DEPARTMENT OF FISHERIES
 [Filed October 22, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Washington State Department of Fisheries, intends to adopt, amend, or repeal rules concerning fisheries moratorium advisory review boards;

and that the adoption, amendment, or repeal of such rules will take place at 10:00 a.m., Monday, December 1, 1980, in the Department of Fisheries Conference Room, General Administration Building, Olympia, Washington.

The authority under which these rules are proposed is RCW 75.08.080.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to November 25, 1980.

Dated: October 22, 1980

By: Gordon Sandison
 Director

STATEMENT OF PURPOSE

Title: Chapter 220-85 WAC

Summary: Consolidates rules pertaining to commercial salmon license and charter boat license review boards; adds crab moratorium review board provisions

Agency personnel responsible for:

Drafting rules - Suzanne Shaw

Room 115, General Administration Building, Olympia, Washington 98504 753-6532

Implementation:

Room 115, General Administration Building, Olympia, Washington 98504 753-6517

Proposed by Washington State Department of Fisheries

These proposed rules are not the result of federal law or federal or state court action.

Chapter 220-85 WAC
COMMERCIAL ((SALMON)) LICENSE MORATORIUM ADVISORY REVIEW BOARD REGULATIONS

NEW SECTION

WAC 220-85-015 LICENSE MORATORIUM REVIEW BOARDS. The director shall appoint advisory boards of review as necessary to hear appeals pursuant to the commercial salmon license moratorium (RCW 75.28.455 through 75.28.480), the salmon charter boat license moratorium (RCW 75.30.010 through 75.30.060) and the Puget Sound commercial crab license moratorium (RCW 75.28.274 through 75.28.277).

AMENDATORY SECTION (Amending Order 1193, filed 3/4/75)

WAC 220-85-030 ((SALMON)) MORATORIUM ADVISORY REVIEW BOARDS—SECRETARIAL AND INVESTIGATIVE ASSISTANCE, PLACE OF HEARINGS. The department shall provide ((the)) advisory review boards with such secretarial or investigative help as may be necessary to conduct the hearings and to report its decision to the director. The department shall furnish and/or arrange accommodations for the boards to conduct their hearings.

AMENDATORY SECTION (Amending Order 1193, filed 3/4/75)

WAC 220-85-040 ((SALMON)) MORATORIUM ADVISORY REVIEW BOARDS—DIRECTOR'S ACTION ON ((SALMON)) LICENSE APPLICATIONS—REASONS STATED IN WRITING. Whenever the director shall reject or deny an application for a commercial salmon fishing license ((or)), vessel delivery permit, salmon charter boat license or Puget Sound crab license endorsement, his decision shall be in writing and give the reason(s) therefor.

AMENDATORY SECTION (Amending Order 1193, filed 3/4/75)

WAC 220-85-050 ((SALMON)) MORATORIUM ADVISORY REVIEW BOARDS—WHO MAY APPEAL. Any person aggrieved by a decision of the department pursuant to RCW 75.28.274, 75.28.275, 75.28.455 through 75.28.475 or 75.30.020 may voluntarily request that a board of review be impaneled to hear his case.

AMENDATORY SECTION (Amending Order 1193, filed 3/4/75)

WAC 220-85-060 ((SALMON)) MORATORIUM ADVISORY REVIEW BOARDS—PROCEEDINGS TO BE INFORMAL—RULES OF EVIDENCE INAPPLICABLE—RECORD TO BE KEPT. The hearing before the advisory review board shall be informal and the rules of evidence shall not be applicable to the proceedings. A record of the proceedings shall be kept as provided by chapter 34.04 RCW.

AMENDATORY SECTION (Amending Order 1193, filed 3/4/75)

WAC 220-85-070 ((SALMON)) MORATORIUM ADVISORY REVIEW BOARDS—APPEALS—REQUIREMENTS—FORM FOR APPEAL. (1) Appeals by an aggrieved person pursuant to RCW 75.28.274, 75.28.275, 75.28.475 ((and)), 75.28.480 or 75.30.020 from determinations of the department shall be in writing and should include:

- (a) a concise statement of why the appeal is made,
 - (b) the basis upon which the aggrieved person believes a different decision should be made,
 - (c) a statement of any other relevant facts.
- (2) Appeals must be postmarked within fifteen days of the date of denial, or received in person at the department of fisheries not more than fifteen days from the date of denial. The director may waive the fifteen day requirement for good cause.

(3) The appeal may be in any written form; however, the department will furnish or make available upon request a form that can be used for making appeals pursuant to the provisions of these regulations.

AMENDATORY SECTION (Amending Order 1193, filed 3/4/75)

WAC 220-85-080 ((SALMON)) MORATORIUM ADVISORY REVIEW BOARDS—APPEALS—TIME FOR SCHEDULING HEARINGS—CONDUCT OF HEARINGS. Upon receipt of a written request for a hearing before an advisory review board, the department shall set the time, place, and date of hearing ((not later than twenty (20))) to take place within thirty days from the time of receipt of said written request or as soon thereafter as a board may be convened.

(1) The department shall inform all parties as to the date, time and place of hearing at least seven ((7)) days prior to the hearing, except that the board can by agreement or for good cause shown shorten the notice requirement.

(2) The hearing before the advisory review board shall be informal and ((it) the board shall:

- (a) have authority to continue or adjourn the proceedings as circumstances may require,
- (b) permit oral or written argument.

AMENDATORY SECTION (Amending Order 1193, filed 3/4/75)

WAC 220-85-090 ((SALMON)) MORATORIUM ADVISORY REVIEW BOARDS—DECISIONS BY ADVISORY REVIEW BOARD—FORM AND CONTENT. (1) The advisory review board shall inform in writing both the director and the initiating party of whether or not the board agrees or disagrees with the department's decision, and shall state the reasons for such agreement or disagreement.

(2) The decision of the advisory review board shall, except where there may be extenuating circumstances, be made within five ((5)) days from the conclusion of the hearing.

AMENDATORY SECTION (Amending Order 1193, filed 3/4/75)

WAC 220-85-100 ((SALMON)) MORATORIUM ADVISORY REVIEW BOARDS—DECISION ON APPEAL BY DIRECTOR.

(1) Upon receipt of the advisory review board's findings, the director, at his discretion, may either uphold or reverse the department's action.

(2) The decision of the director shall, except when there may be extenuating circumstances, be in writing and mailed to the appealing party within five ((5)) days from the date he receives the findings and decision of the board.

AMENDATORY SECTION (Amending Order 1193, filed 3/4/75)

WAC 220-85-110 ((SALMON)) MORATORIUM ADVISORY REVIEW BOARDS—APPEALS—INFORMATION PROCEDURES OPTIONAL. Pursuant to the provisions of RCW 75.28.277, 75.28.480 or 75.30.060, an aggrieved person ((rather than proceeding under the informal procedure provided for in WAC 220-85-010 through 220-85-100 can)) may proceed under chapter 34.04 RCW (Administrative Procedure((s)) Act) and the procedural rules for appeal and hearing thereunder applicable to all state agencies as provided for in WAC 1-08-010 through 1-08-590 will govern proceedings initiated thereunder.

NEW SECTION

WAC 220-85-115 RULES OF PRACTICE AND PROCEDURE. The department of fisheries hereby adopts chapter 220-85 WAC as its rules of practice and procedure governing the appeals of commercial salmon and commercial Puget Sound crab license holders and salmon charter boat license holders pursuant to Title 75 RCW. Chapter 1-08 WAC, Uniform Procedural Rules, shall not apply to license appeal procedures before department of fisheries advisory review boards.

REPEALER

The following sections of the Washington Administrative Code are hereby repealed:

(1) WAC 220-85-010 SALMON MORATORIUM ADVISORY REVIEW BOARD—APPOINTMENT, COMPOSITION, TENURE, AND COMPENSATION.

(2) WAC 220-85-020 SALMON MORATORIUM ADVISORY REVIEW BOARD—DESIGNATION OF BOARD, LIST FURNISHED BY INDUSTRY.

(3) WAC 220-85-210 SALMON CHARTER BOAT MORATORIUM ADVISORY REVIEW BOARD—APPOINTMENT, COMPOSITION, TENURE, AND COMPENSATION.

(4) WAC 220-85-220 SALMON CHARTER BOAT MORATORIUM ADVISORY REVIEW BOARD—DESIGNATION OF BOARD, LIST FURNISHED BY INDUSTRY.

(5) WAC 220-85-230 SALMON CHARTER BOAT MORATORIUM ADVISORY REVIEW BOARD—SECRETARIAL AND INVESTIGATIVE ASSISTANCE, PLACE OF HEARINGS.

(6) WAC 220-85-240 SALMON CHARTER BOAT MORATORIUM ADVISORY REVIEW BOARD—DIRECTOR'S ACTION ON SALMON LICENSE APPLICATIONS—REASONS STATED IN WRITING.

(7) WAC 220-85-250 SALMON CHARTER BOAT MORATORIUM ADVISORY REVIEW BOARD—WHO MAY APPEAL.

(8) WAC 220-85-260 SALMON CHARTER BOAT MORATORIUM ADVISORY REVIEW BOARD—PROCEEDINGS TO BE INFORMAL—RULES OF EVIDENCE INAPPLICABLE—RECORD TO BE KEPT.

(9) WAC 220-85-270 SALMON CHARTER BOAT MORATORIUM ADVISORY REVIEW BOARD—APPEALS—REQUIREMENTS—FORM FOR APPEAL.

(10) WAC 220-85-280 SALMON CHARTER BOAT MORATORIUM ADVISORY REVIEW BOARD—APPEALS—TIME FOR SCHEDULING HEARINGS—CONDUCT OF HEARINGS.

(11) WAC 220-85-290 SALMON CHARTER BOAT MORATORIUM ADVISORY REVIEW BOARD—DECISIONS BY ADVISORY REVIEW BOARD—FORM AND CONTENT.

(12) WAC 220-85-300 SALMON CHARTER BOAT MORATORIUM ADVISORY REVIEW BOARD—DECISION ON APPEAL BY DIRECTOR.

(13) WAC 220-85-310 SALMON CHARTER BOAT MORATORIUM ADVISORY REVIEW BOARD—APPEALS—INFORMATION PROCEDURES OPTIONAL.

WSR 80-15-110

EMERGENCY RULES

DEPARTMENT OF FISHERIES

[Order 80-167—Filed October 22, 1980]

I, Gordon Sandison, director of the State Department of Fisheries, do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is this order corrects an oversight in the current rules and prohibits the sale or purchase of sport caught food fish or shellfish. A proposed permanent rules will be discussed at a public hearing December 15, 1980.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 22, 1980.

By Gordon Sandison
Director

NEW SECTION

WAC 220-20-01200B UNLAWFUL SALE OF FOOD FISH AND SHELLFISH. Notwithstanding the provisions of WAC 220-20-012, it shall be unlawful to sell, or offer for sale, or purchase, or offer to purchase, any food fish or shellfish unless taken with lawful commercial gear, in an area open to commercial fishing for that species, and the fisherman has in his possession at the time of sale a valid commercial fishing license.

WSR 80-15-111

ADOPTED RULES

LIQUOR CONTROL BOARD

[Order 75, Resolution 84—Filed October 22, 1980]

Be it resolved by the Washington State Liquor Control Board, acting at Capitol Plaza Building, 1025 East

Union Avenue, 5th Floor, Olympia, WA, that it does promulgate and adopt the annexed rules relating to curb service prohibited, WAC 314-16-060.

This action is taken pursuant to Notice No. WSR 80-13-032 filed with the code reviser on September 10, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated under the general rule-making authority of the Washington State Liquor Control Board as authorized in RCW 66.08.030, 66.98.070 and Title 34 RCW.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 22, 1980.

By L. H. Pedersen
Chairman

AMENDATORY SECTION (Amending Order 53, filed 2/15/77)

WAC 314-16-060 CURB SERVICE PROHIBITED. ~~((RULE 21))~~ No retail liquor licensee, or employee thereof, shall provide, furnish, sell, or supply ~~((food, merchandise or))~~ beverages by means of "drive-in" and/or "curb service."

WSR 80-15-112
EMERGENCY RULES
DEPARTMENT OF FISHERIES
[Order 80-168—Filed October 22, 1980]

I, Gordon Sandison, director of State Department of Fisheries do promulgate and adopt at Olympia, WA the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is this order is necessary to protect Grays Harbor chum salmon.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 22, 1980.

By Gordon Sandison
Director

NEW SECTION

WAC 220-36-02100T CLOSED AREA. Notwithstanding the provisions of WAC 220-36-021, WAC 220-36-022 and WAC 220-36-024 effective October 24, 1980 until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in Grays Harbor Salmon Management and Catch Reporting Areas 2A, 2B, 2C and 2D.

NEW SECTION

The following section of the Washington Administrative Code is repealed:

WAC 220-36-02100S GRAYS HARBOR GILL NET—SEASONS. (80-156)

WSR 80-15-113
EMERGENCY RULES
DEPARTMENT OF FISHERIES
[Order 80-169—Filed October 22, 1980]

I, Gordon Sandison, director of the State Department of Fisheries do promulgate and adopt at Olympia, Washington, the annexed rules relating to commercial fishing regulations.

I, Gordon Sandison, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is Area 7B is closed following scheduled fisheries to protect Nooksack-Samish chum salmon. Analysis of test fishing catches indicate chum management needs prevail in Area 12 and in the lower Skagit River. Normal timing chum management needs prevail in McAllister Creek and the adjacent portion of Area 13. Continued protection of Hood Canal coho stocks is necessary in Areas 12B 12C and 12D.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

This rule is promulgated pursuant to RCW 75.08.080 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) or the Higher Education Administrative Procedure Act (chapter 28B.19 RCW), as appropriate, and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 22, 1980.

By Gordon Sandison
Director

NEW SECTION

WAC 220-28-007B0Q **CLOSED AREA.** *Effective immediately through 4:59 p.m. October 27 and effective 8:01 a.m. October 28, 1980 until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in Puget Sound Salmon Management and Catch Reporting Area 7B.*

NEW SECTION

WAC 220-28-008F0I **CLOSED AREA.** *Effective immediately until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes from that portion of the Skagit River upstream from the bridge at Mount Vernon, including all tributaries.*

NEW SECTION

WAC 220-28-012B0K **CLOSED AREA.** *Effective immediately until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in Puget Sound Salmon Management and Catch Reporting Area 12B.*

NEW SECTION

WAC 220-28-012C0W **CLOSED AREA.** *Effective immediately until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in Puget Sound Salmon Management and Catch Reporting Area 12C.*

NEW SECTION

WAC 220-28-012D0Q **CLOSED AREA.** *Effective immediately until further notice, it shall be unlawful for any fisherman, including treaty Indian fishermen, to take, fish for or possess salmon for commercial purposes with any type of gear in Puget Sound Salmon Management and Catch Reporting Area 12D.*

REPEALER

The following sections of the Washington Administrative Code are repealed:

- WAC 220-28-007B0P **CLOSED AREA.** (80-161)
- WAC 220-28-008F0H **CLOSED AREA.** (80-142)
- WAC 220-28-01200Q **CLOSED AREA.** (80-161)
- WAC 220-28-012B0J **CLOSED AREA.** (80-161)
- WAC 220-28-012C0V **CLOSED AREA.** (80-161)
- WAC 220-28-012D0P **CLOSED AREA.** (80-161)
- WAC 220-28-01300R **CLOSED AREA.** (80-140)
- WAC 220-28-013I0A **CLOSED AREA.** (80-140)

WSR 80-15-114
ADOPTED RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Public Assistance)

[Order 1561—Filed October 22, 1980]

I, N. Spencer Hammond, Ex. Asst. of the Department of Social and Health Services do promulgate and adopt at Olympia, Washington, the annexed rules relating to nursing home accounting and reimbursement system, amending chapter 388-96 WAC.

This action is taken pursuant to Notice No. WSR 80-12-050 filed with the code reviser on September 3, 1980. Such rules shall take effect pursuant to RCW 34.04.040(2).

This rule is promulgated pursuant to RCW 74.09.120 and is intended to administratively implement that statute.

The undersigned hereby declares that he has complied with the provisions of the Open Public Meetings Act (chapter 42.30 RCW), the Administrative Procedure Act (chapter 34.04 RCW) and the State Register Act (chapter 34.08 RCW).

APPROVED AND ADOPTED October 22, 1980.

N.S. Hammond
 Executive Assistant

AMENDATORY SECTION (Amending Order 1262, filed 12/30/77)

WAC 388-96-223 **SHIFTING.** In determining a contractor's settlement, if allowable costs were less than the rate in the patient care cost area, savings will be shifted (or "transferred") to cover any deficit in the food cost area. If allowable costs were less than the rate in the food cost area, savings will be shifted to cover any deficit in the patient care cost area (~~except where the deficit results from providing more than the maximum issued hours of nursing service~~). For settlement periods beginning January 1, 1980, if savings occur in the administration and operations cost areas, up to ten percent of the administration and operations wage rate may be shifted to cover a deficit in the administration and operations-nonwage area, or up to ten percent of the administration and operations-nonwage rate may be shifted to cover a deficit in the administration and operations-wage area. No other shifting will be done.

AMENDATORY SECTION (Amending Order 1510, filed 5/30/80, effective 7/1/80)

WAC 388-96-750 **RETURN ON INVESTMENT.** (1) Beginning January 1, 1979, the department will pay a return on ~~((investment based on a contractor's equity capital as defined in WAC 388-96-010.~~

(2) For the period January 1, 1978, through June 30, 1979, the rate of return used to calculate this return on investment will be eleven percent or one and one-half times the most recent twelve-month average of rates of interest on special issues of public debt obligations issued to the federal hospital insurance trust fund (the Medicare rate of return on equity capital) whichever is lower.

~~Beginning July 1, 1979, the rate of return will be the Medicare rate of return on equity capital.~~

~~(3) The calculation of a contractor's return on investment will consist of multiplying equity capital as defined in WAC 388-96-010 by the current rate of return.~~

~~(4) This return on investment will be paid as an add-on to the property and related cost area and will not be subject to the upper limit of the cost area. This return on investment based on equity capital is applicable to proprietary contractors only) equity to proprietary contractors utilizing applicable Medicare rules and regulations as of July 1, 1979, with the following modifications:~~

~~(a) Monthly equity calculations will not be used. A desk review of reported equity will be conducted pursuant to WAC 388-96-201. The average ratio among proprietary contractors of current assets to expenses will be computed from the most recent desk reviewed cost reports. The standard deviation of the ratio and the average ratio plus one standard deviation will also be computed. Current assets in excess of the average ratio plus one standard deviation will not be allowed unless the contractor can document that the excess is ordinary, necessary, and related to patient care. No adjustments will be made to reported equity insofar as changes reflect additions to fixed assets which are ordinary, necessary and related to patient care.~~

~~(b) Goodwill is not includable in the determination of net equity.~~

~~(c) Net equity and the payment for net equity shall be calculated as described in subsections (2) and (3) of this section.~~

~~(2) A contractor's net equity will be calculated using the appropriate items from the contractor's most recent desk reviewed cost report utilizing the definition of equity in WAC 388-96-010 and applying relevant Medicare rules and regulations as of July 1, 1979, with the modifications described in subsection (1) of this section.~~

~~(3) The contractor's net equity will be multiplied by the Medicare rate of return on equity capital for the twelve-month period ending on the date of the closing date of the contractor's cost report. This amount will be divided by the contractor's annual patient days for the cost report period to determine a rate per patient day. Where a contractor's cost report covers less than a twelve-month period, annual patient days will be estimated using the contractor's reported patient days.~~

~~(4) The information on which the return on equity is calculated is subject to field audit. If a field audit determines that the desk reviewed reported equity exceeds the equity which can be documented and calculated in conformance with Medicare rules and regulations as modified above, the contractor's return on equity rate shall be recalculated using the determinations of the field audit. Any payments in excess of this rate shall be refunded to the department as part of the settlement procedure established by WAC 388-96-222. In particular, subsections (3) and (4) of WAC 388-96-222 shall apply.~~

~~(5) For the period January 1, 1978, through June 30, 1979, the rate of return used to calculate this return on investment will be eleven percent.~~

(6) For the period January 1, 1978, through December 31, 1978, a contractor may choose to retain savings in the administrative and operations and property and related cost centers in lieu of receiving a return based on equity capital.

WSR 80-15-115
PROPOSED RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Health)

[Filed October 22, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Social and Health Services, intends to adopt, amend, or repeal rules concerning nursing homes, amending chapter 248-14 WAC.

Correspondence concerning this notice and proposed rules attached should be addressed to:

N. Spencer Hammond
Executive Assistant
Department of Social and Health Services
Mailstop OB-44 C
Olympia, WA 98504

Interpreters for people with hearing impairments and brailled or taped information for people with visual impairments can be provided. Please contact William B. Pope, Chief, Office of Administrative Regulations, at State Office Building #2, 12th and Jefferson, Olympia, Washington, Phone (206) 753-7015, by November 12, 1980. The meeting site is in a location which is barrier free;

that such agency will at 2:00 p.m., Wednesday, November 26, 1980, in the Auditorium, Office Building #2, 12th and Franklin, Olympia, Washington, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 9:00 a.m., Tuesday, December 2, 1980, in William B. Pope's office, 4th floor, 12th and Franklin, Office Building #2, Olympia, Washington.

The authority under which these rules are proposed is RCW 18.51.070.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to November 26, 1980, and/or orally at 2:00 p.m., Wednesday, November 26, 1980, Auditorium, Office Building #2, 12th and Franklin, Olympia, Washington.

Dated: October 22, 1980
By: N. S. Hammond
Executive Assistant

STATEMENT OF PURPOSE

This statement is filed pursuant to RCW 34.04.045.

Regarding:

Amendments to the following sections: 248-14-001, 248-14-100, 248-14-110, 248-14-120, 248-14-130, 248-14-140, 248-14-150, 248-14-160, 248-14-170, 248-14-180, 248-14-200, 248-14-235, 248-14-285.

WAC New Sections: 248-14-114, 248-14-125, 248-14-155.

Repealing WAC 248-14-115.

Purpose of the rule or rule changes is to:

Fully implement RCW 18.51 and 74.42 as passed by the 1979 and 1980 legislative sessions.

Update definitions.

Develop new construction regulations.

Complete administrator requirements and to retain electrical call system requirement from repealed WAC.

Update pharmaceutical services requirements.

Summary of the rule or rule change:

Implement old and new laws relating to:

Posting of citations RCW 18.51.260.

Reporting of suspected abuse RCW 70.124.

Physical plant requirements RCW 74.42.

Amends and updates final portion of program requirements on pharmaceutical services.

Amends definitions, WAC 248-14-001.

Persons responsible for the drafting, implementation, and enforcement of the rule:

Name of initiator: Conrad Thompson

Title: Director

Office: Bureau of Nursing Home Affairs

Mailstop: OB-31

Phone: 753-5840

The persons or organization (if other than DSHS) who prepared these rules is: None.

These rules are not necessary as a result of federal laws, federal court decisions or state court decisions.

Agency comments/recommendations:

DSHS, CSD, and HSD agree that updating of these nursing home licensure rules and regulations is long overdue.

Fiscal:

The fiscal impact of the revisions to the regulations governing pharmaceutical services are judged to minimal.

All SNF and IMR certified facilities currently provide the proposed WAC requirements. There are 34 ICFs which have not been required to provide consultant pharmacist services, and 19 private facilities. About half of those already provide the proposed services, even though it has not been required. For the certified ICFs remaining (17 facilities) the total cost of these services is approximately \$15 to \$20/hour x 5-8 hours per month/50 beds x 12 months, or \$15,300 to \$32,640/year. One-half of that is federally funded.

In new construction or major alterations of physical facilities, the new requirements for physical plant have been combined from the various codes to spell out the present code conditions. While there may appear to be a

cost impact, present builders are required to meet most of these construction codes now.

Proposed regulations have been reviewed by and consultation received from the Nursing Home Advisory Council and the State Board of Health as mandated by statute RCW 18.51.070.

AMENDATORY SECTION (Amending Order 1509, filed 5/28/80)

WAC 248-14-001 DEFINITIONS. (1) All adjectives and adverbs such as adequate, approved, immediately, qualified, reasonable, reputable, satisfactory, ~~((sufficiently))~~ sufficient, or suitable, used in these ~~((rules and))~~ nursing home regulations to qualify a ~~((person, equipment or building,))~~ requirement shall be as determined by the Washington state department of social and health services with the advice and guidance of the council.

(2) "Activity director" means ~~((someone on the staff of a nursing home))~~ an employee who is responsible for the development, implementation, and maintenance of a program for ((patients)) residents which is intended to provide activities to meet their activity needs and interests ~~((and not be in conflict with the plan of treatment)).~~

(3) "Alterations" - means changes made to existing facilities that will have an effect on the structure, function, or environment of an area.

(4) "Ambulatory person" - means a person, who, unaided, is physically and mentally capable of walking a normal path to safety, including the ascent and descent of stairs.

~~((4))~~ (5) "Attending physician" - means the ~~((physician))~~ doctor who is responsible for a particular person's total medical care ~~((during the period of time the person is an inpatient or outpatient of the nursing home)).~~

~~((5))~~ (6) "Bathing facility" - means a bathtub or shower. ~~((Does not include sitz baths or other fixtures designed primarily for therapy.~~

~~((6))~~ "Client" - see "Patient".)

(7) "Department" - means the state department of social and health services.

(8) "Dialysis" - means the process of separating crystalloids and colloids in solution by means of their unequal diffusion through a natural or artificial, semi-permeable membrane.

(a) "Acute dialysis" - means hemodialysis or peritoneal dialysis in the treatment of a person with renal failure for a period of time during which it is medically determined whether renal function may be restored or the failure is irreversible.

(b) "Maintenance dialysis" - means recurrent hemodialysis or peritoneal dialysis in the long term treatment of a person with chronic, irreversible renal failure of such severity that other medical management will not support life.

(c) "Hemodialysis" - means dialysis of the blood by means of an "artificial kidney" through which blood is circulated on one side of a semi-permeable membrane while the other side is bathed by a salt solution. The accumulated toxic products diffuse out of the blood into the salt solution.

(d) "Peritoneal dialysis" - means dialysis of the blood by inserting a tube into a person's abdomen and instilling a sterile salt solution into the peritoneal cavity. Accumulated toxic products diffuse out of the blood through the semi-permeable membrane of the peritoneum into the salt solution. After a period of time for diffusion, the solution is allowed to drain from the peritoneal cavity.

(e) "Self-dialysis" - means carrying out dialysis on oneself, assuming primary responsibility for the dialysis procedure whether or not one has assistance.

(9) "Dialysis room" - means a room in which a patient undergoes dialysis.

(10) ~~((Dose" - means the amount of drug to be administered at one time.~~

~~((11))~~ "Drug facility" - means a room or area designed and equipped for drug storage and the preparation of drugs for administration.

~~((12))~~ "Facilities" - means a room or area and/or equipment to serve one or more specific functions.

~~((13))~~ (11) "Faucet controls: ~~((13))~~ "Wrist control" - means water supply controls at least 4 inch overall horizontal length designed and installed to be operated by the wrists.

((b)) "Elbow control" — means water supply controls at least 6 inch overall horizontal length designed and installed to be operated by the elbow.

(c) "Knee control" — means water supply controls, each operated by a mixing valve designed and installed to be operated by the knee.

(d) "Foot control" — means water supply controls, each operated by a mixing valve designed and installed to be operated by the foot.

((14)) "Free hanging space for clothes" — means separated space in an enclosed wardrobe or closet with a rod which provides for daytime clothing to hang full length without touching the floor of the closet.

((15)) "Functional abilities" — means the physical, mental, emotional, and social abilities to cope with the activities and affairs of daily living.

((16)) (12) "Grade" — means the level of ground adjacent to the building measured at required windows. The ground must be level or slope downward for a distance of at least 10 feet from the wall of the building. From there the ground may slope upward not greater than an average of one foot vertical to two feet horizontal within a distance of 18 feet from the building.

((17)) "Handwashing facility" — means a lavatory or a sink designed and equipped to serve for handwashing purposes.

((18)) "He, him, his and himself" — are the pronouns used in reference to a person of either sex, male or female. This choice of pronouns has been adopted for the purpose of consistency and to facilitate reading of these rules and regulations and does not mean preference for nor exclude reference to either sex.

((19)) (13) "Immediate supervision" means on site supervision ((of the performance)) of one or more persons ((when both supervisor and the person(s) over whose performance he exercises supervision are on duty within the nursing home)).

((20)) (14) "Kidney center" — means a health care facility which is designed, equipped, staffed, organized and administered to provide the following services:

(a) Medical, social and psychological evaluation and selection of persons eligible for maintenance dialysis or kidney transplantation by a formal review body.

(b) Dialysis.

(c) Kidney transplantation for patients with chronic renal failure, either directly or by appropriate referral where this form of therapy is medically indicated.

(d) Training program for physicians, nurses, technicians and members of other disciplines involved in the care and treatment of persons with chronic renal failure who receive dialysis.

(e) Self-dialysis training program for patients.

(f) Evaluation of situations or facilities and assistance in planning necessary alterations and installations to ensure safe and adequate facilities for maintenance dialysis.

(g) An organized system by which patients undergoing dialysis at home or in a nursing home or other satellite facility procure the supplies and equipment necessary to safe and efficient administration of dialysis.

(h) Continued medical management and surveillance of care of patients receiving maintenance dialysis at home or in a nursing home or other satellite facility by means of outpatient clinic services and a continuing program of review, consultation and training.

(i) An in-hospital dialysis program which can provide the full gamut of services for diagnosis and treatment of persons with chronic renal disease. The in-hospital services may be provided by means of an association or affiliation with an in-hospital dialysis program.

((21)) (15) "Lavatory" — means a plumbing fixture designed and equipped to serve for handwashing purposes.

((22)) (16) "Legend drug" — means a drug bearing the legend, "Caution, federal law prohibits dispensing without a prescription."

((23)) (17) "Licensed nurse" — means either a registered nurse or a licensed practical nurse.

((24)) (18) "Licensed practical nurse" — means a person duly licensed under the provisions of the Licensed Practical Nurse Act of the state of Washington, chapter 18.78 RCW.

((25)) (19) "New construction" shall include any of the following, started after adoption of these ((rules and)) regulations ((by the department)):

(a) New buildings to be used as a nursing home.

(b) Additions to existing buildings to be used as a nursing home.

(c) Conversions including buildings which have been licensed previously as nursing homes and have not been used as such for a period in excess of one year.

(d) Alterations other than repairs((, except where an exemption has been granted by the director under WAC 248-18-060)).

((26)) "Night light" — means a light fixture which is flush-mounted on the wall near the entrance doorway centered about fourteen inches above the floor providing from 0.5 to 1.5 footcandles of light measured on the floor at a distance of three feet from the light fixture.

((27)) (20) "Nursing care" — means services designed to maintain or promote achievement of optimal independent function and health status; and planned, supervised and evaluated by a registered nurse in the context of an overall individual plan of care.

((28)) (21) "Nursing home" — means any home, place or institution which operates or maintains facilities providing convalescent or chronic care, or both, for a period in excess of twenty-four consecutive hours for three or more patients not related by blood or marriage to the operator, who, by reason of illness or infirmity, are unable properly to care for themselves. Convalescent and chronic care may include, but not be limited to, any or all procedures commonly employed in waiting on the sick, such as administration of medicines, preparation of special diets, giving of bedside nursing care, application of dressings and bandages, and carrying out of treatment prescribed by a duly licensed practitioner of the healing arts. Nothing in this definition shall be construed to include general hospitals or other places which provide care and treatment for the acutely ill and maintain and operate facilities for major surgery or obstetrics or both. Nothing in this definition shall be construed to include any boarding home, guest home, hotel or related institution which is held forth to the public as providing, and which is operated to give only board, room and laundry, to persons not in need of medical or nursing treatment or supervision except in the case of temporary acute illness. Nothing in this definition shall be construed to include any facility licensed under chapter 71.12 RCW as a private establishment. The mere designation by the operator of any place or institution as a hospital, sanitarium, or any other similar name, which does not provide care for the acutely ill and maintain and operate facilities for major surgery or obstetrics, or both, shall not exclude such place or institution from the provisions of this chapter.

((29)) (22) "Nursing services" — an organized department under the direction of a registered nurse, the members of which provide nursing care.

((30)) (23) "Outpatient service" is any service provided to ((an outpatient)) a nonresident.

((31)) (24) "Patient" — means a resident who is receiving preventive, diagnostic, therapeutic, habilitative, rehabilitative, maintenance or palliative health related services under professional direction.

(a) "In-patient" — means a ((patient)) resident who is receiving services with board and room in a nursing home on a continuous 24-hour a day basis.

(b) "Out-patient" — means a ((patient)) person who is receiving services at a nursing home which is not providing him these services with room and board on a continuous 24-hour a day basis.

(c) ("Self-dialysis patient" — means a patient who performs self-dialysis.

((32)) "Patients requiring skilled nursing care" — means those residents whose conditions, needs, and/or services are of such complexity and sophistication so as to require the continuous or frequent observation and intervention of a licensed physician and/or a registered nurse. These patients require ongoing assessments of physiological and/or psychological needs, and the development and implementation of a comprehensive total plan of care involving ((multidisciplinary)) interdisciplinary input and coordination. Patient needs include ongoing evaluations, care plan revisions and the teaching necessary to provide for those whose condition is unstable and/or complex.

((33)) (d) "Patients requiring intermediate nursing care" — means those residents whose physiological and psychological conditions and needs are relatively stable, but who require individually planned health programs under the direction of a registered nurse for supervision, assistance, protection and restoration. The primary needs of these residents are for interdisciplinary programs/attention, designed to foster optimum independent function and prevent deterioration and disability and which may be provided by nonprofessional persons.

((34)) (e) "Patients requiring care for mental retardation or related conditions" — means residents who are found eligible by the division of developmental disabilities and who require health care services in accord with subparagraph ((35)) (c) or ((36)) (d) of this subsection, and who are in need of a comprehensive habilitative/developmental program which is incorporated into a 24-hour overall program plan.

(25) "Peninsular (or island) bathtub" — means a bathtub which is installed so it is accessible from two sides and the end of the tub with sufficient clearances between the sides and the end of the tub and a

wall or any fixed equipment to accommodate patients, equipment, and attendants.

~~((32))~~ (26) "Pharmacist" - means a person duly licensed by the Washington state board of pharmacy to engage in the practice of pharmacy under the provisions of chapter 18.64 RCW.

~~((33))~~ (27) "Pharmacy" - means a place where the practice of pharmacy is conducted, properly licensed under the provisions of chapter 18.64 RCW by the Washington state board of pharmacy.

~~((34))~~ "p.r.n. drug" - means a drug which a physician has ordered to be administered only when needed under certain circumstances.)

(28) "Practitioner" - means a physician under chapter 18.71 RCW; an osteopathic physician or an osteopathic physician and surgeon under chapter 18.57 RCW; a dentist under chapter 18.32 RCW; a podiatrist under chapter 18.22 RCW; a registered nurse under chapter 18.88 RCW when authorized by the board of nursing; an osteopathic physician's assistant under chapter 18.57A RCW when authorized by the committee of osteopathic examiners, a physician's assistant under chapter 18.71A RCW when authorized by the board of medical examiners.

~~((35))~~ (29) "Registered nurse" - means a person duly licensed under the provisions of the law regulating the practice of registered nursing in the state of Washington, chapter 18.88 RCW.

(30) "Resident" - means a patient.

(31) "Residential care unit" - means a separate, physical and functional unit which includes a group of resident rooms and the supportive administrative and service facilities necessary to provide adequate care to the occupants of these rooms.

~~((36))~~ (32) "Respiratory isolation" - means the prevention of transmission of pathogenic organisms by means of droplets and droplet nuclei that are coughed, sneezed, or breathed into the environment.

~~((37))~~ (33) "Responsible party" is that legally responsible person to whom the rights of a client have legally devolved.

~~((38))~~ (34) "Self-dialysis training" - means a program of patient education in which a patient is taught how to perform self-dialysis safely and effectively and to care for dialysis equipment and supplies.

~~((39))~~ (35) "Shall" - means compliance is mandatory.

~~((40))~~ "Should" - means a suggestion or recommendation.

(41) "Single unit" - means one, discrete pharmaceutical dosage form (e.g., one tablet or one capsule) of a drug. A single unit becomes a unit-dose, if the physician orders that particular amount of the drug for a person.

(42) "Stop order" - means a written policy that definitely prescribes the number of doses or the period of time after which administration of a drug to a patient must be stopped automatically, unless the physician's order for the drug specified the number of doses or the period of time the order was to be in effect.

~~((43))~~ (36) "Supervision" - means the process of overseeing the performance of one or more persons while having the responsibility and authority to guide or direct and critically evaluate performance of the person(s) and to take corrective action when indicated.

~~((44))~~ (37) "Toilet" - means a room containing at least one water closet.

~~((45))~~ (38) "Unit-dose" - means the ordered amount of a drug in a dosage form ready for administration to a particular person by the prescribed route at the prescribed time.

~~((46))~~ (39) "Unit-dose drug distribution system" - means a system whereby a pharmacist dispenses the majority of drugs in unit doses ~~((so the selection and issuance of individual doses of drugs for administration are pharmacy based and controlled))~~ and for most drugs, not more than a forty-eight hour supply of doses is available at the residential care unit at any time.

~~((47))~~ (40) "Usable floor space" ~~((, as used in reference to new construction,))~~ excludes areas taken up by vestibules, closets, wardrobes, portable lockers and toilet rooms.

~~((48))~~ (41) "Water closet" - means a plumbing fixture ~~((for defecation))~~ fitted with a seat and a device for flushing defecation from the bowl of the fixture with water.

NEW CONSTRUCTION PHYSICAL PLANT

AMENDATORY SECTION (Amending Order 1509, filed 5/28/80)

WAC 248-14-100 ~~((NEW CONSTRUCTION PHYSICAL PLANT))~~ APPROVAL OF PLANS. (1) ~~((When new construction is contemplated, preliminary plans shall be submitted, in duplicate to the department for review. These plans shall be drawn to scale and~~

shall include the plot plan, showing streets, entrance ways, sewage disposal system, and the arrangement of buildings on the site; and drawings giving the general arrangement within the building (existing and proposed), including the intended purpose and fixed equipment of each room. The preliminary plans shall be accompanied by a statement of source of water supply, and method of sewage and garbage disposal and a general description of construction and materials, including interior finishes.) Narrative program. The sponsor for each new construction or alteration project shall provide a narrative program of functions for the facility which describes the functional space requirements, staffing patterns, departmental relationships, and other basic information relating to the fulfillment of the institution's objectives. This may be general or detailed but shall include a description of each function to be performed, approximate space needed for these functions, number of staff or other occupants of the various spaces, types of equipment required, interrelationship of various functions and spaces, and description of those services necessary for the complete functioning of the facility but which are available elsewhere in the community and therefore need not be duplicated in this facility.

(2) ~~((In addition to specific requirements, the department may make recommendations designed to promote ease and efficiency of operation.))~~ Preliminary plans.

(a) When new construction is contemplated, preliminary plans shall be submitted, in duplicate to the department for review. Plans and specifications for new construction shall be prepared by or under the direction of an architect or engineer, duly registered by the state of Washington. The documents shall bear the architect or engineers stamp. If the work involved is believed to be not extensive enough to require professional design services a written description of the proposed construction shall be submitted to the department for a determination of the applicability of this regulation. These plans shall be drawn to scale and shall include the plot plan, showing streets, entrance ways, sewage disposal system, and the arrangement of buildings on the site; and drawings giving the general arrangement within the building (existing and proposed), including the intended purpose and fixed equipment of each room. Each room, space, and corridor shall be named and numbered in consecutive order on all drawings.

(b) The preliminary plans shall be accompanied by a statement of source of water supply, and method of sewage and garbage disposal and a general description of construction and materials, including interior finishes.

(3) Final construction documents.

(a) Construction or alterations shall not be commenced until final plans drawn to scale and specifications, ~~((approved by applicable local authorities,))~~ fully describing workmanship and materials have been submitted, in ~~((triplicate))~~ duplicate, to the department and approved.

(b) These plans and specifications shall show complete details to be furnished contractors for construction of buildings. These ~~((should))~~ include:

~~((a))~~ (i) Plot plan;

~~((b))~~ (ii) Plans of each floor of the building, including intended purpose and fixed equipment of each room, and probable arrangement of beds in patients' rooms;

~~((c))~~ (iii) Elevations, sections, and construction details;

~~((d))~~ (iv) Schedule of floor, wall, and ceiling finishes, door and window sizes and types;

~~((e))~~ (v) Plumbing, heating, and ventilating and electrical systems including fire protection system and devices ~~((;~~

f) Specifications fully describing workmanship and materials).

(c) If carpets are to be installed, the following information must be provided:

(i) A floor plan showing areas to be carpeted and adjoining areas. These areas shall be labeled, according to function, and the proposed carpeted areas coded on the plan and keyed to the appropriate carpet sample;

(ii) A three-inch by five-inch sample of each carpet type, labeled to identify the following:

(A) Manufacturer;

(B) Specific company designation (trade name and number);

(iii) Information showing that proposed carpeting meets the specifications as listed in WAC 248-14-130(10)(f).

(d) All construction shall take place in accordance with the approved final plans and specifications. The department shall be consulted prior to making any changes from the approved plans and specifications. When indicated by the nature or extent of proposed changes, the department may require the submission of modified plans

or addenda for review. Only those changes which have been approved by the department may be incorporated into the construction project.

(4) Adequate plans shall be submitted for patient safety during construction or alteration which shall include provisions (~~shall be made~~) for ~~(the)~~ necessary noise, smoke, dust and draft control, fire protection, safety, and comfort of patients if construction work takes place in or near occupied areas.

~~(5) A review of all plans submitted for approval in accordance with these regulations shall be mailed directly to the operator within 30 days of their receipt by the department and shall clearly show the items disapproved with a citation to the regulation violated. In the event that said review is not mailed or delivered to the operator within 30 days, the plans shall be deemed approved.~~

~~(6) Specifications fully describing workmanship and materials. If carpets are to be installed the following information must be provided:~~

~~(a) A floor plan showing areas to be carpeted and adjoining areas. These areas shall be labeled, according to function, and the proposed carpeted areas coded on the plan and keyed to the appropriate carpet sample.~~

~~(b) A 3" x 5" sample of each carpet type, labeled to identify the following:~~

~~(i) Manufacturer;~~

~~(ii) Specific company designation (trade name and number);~~

~~(c) Information showing that proposed carpeting meets the specifications as listed in WAC 248-14-130(d).)~~

AMENDATORY SECTION (Amending Order 1509, filed 5/28/80)

~~WAC 248-14-110 ((NEW CONSTRUCTION PHYSICAL PLANTSITE)) SITE DEVELOPMENT. (1) ((Site and grounds)) Access to site. Nursing homes shall be located on ((good)) well maintained roads kept open to automobile traffic at all times~~(, properly drained and not subject to flooding))~~. The site must meet local building and zoning ordinances and be free from flooding.~~

~~(2) ((The nursing home shall not be located where excessive noise, odors, dust, smoke, or traffic interferes with patient comfort.~~

~~(3) There should be adequate outdoor space for exercise and recreation of patients.~~

~~(4)) Description of grounds. The grounds ~~(should)~~ shall include ~~(lawns, gardens,))~~ suitable outdoor sitting and recreation areas~~(,))~~, and space for automobile parking. ~~((The building(s) should not cover more than one-half of the lot.))~~~~

~~(3) Facility accessibility to the handicapped. The facility shall be readily accessible to the handicapped to meet the requirements of the American National Standards Institute (ANSI) Standard No. A 117.1(1961), or if applicable, the requirements of chapter 70.92 RCW, whichever is the more stringent.~~

NEW SECTION

~~WAC 248-14-114 ADMINISTRATION AND PUBLIC AREAS. (1) Entrance. The entrances to the nursing home shall be near grade level, sheltered from the weather, and accessible to the handicapped.~~

~~(2) Lobby. The nursing home shall have a lobby which includes the following:~~

~~(a) Waiting space with seating accommodations;~~

~~(b) Reception and information area;~~

~~(c) Public toilet facilities for men and women designed to accommodate the handicapped;~~

~~(d) Public telephone;~~

~~(e) Drinking fountain;~~

~~(f) Space to accommodate persons in wheelchairs.~~

~~Except that this subsection may not apply in single story facilities of fifteen beds or less certified exclusively for the care of the mentally retarded (IMR) or those with related conditions.~~

~~(3) Interview space or area shall be designed for auditory privacy.~~

~~(4) Offices.~~

~~(a) Office space shall be provided for the administrator, the director of nursing service, and other personnel as appropriate in accordance with program.~~

~~(b) Facilities for the locked storage and maintenance, including fire and water protection, of medical records shall be provided.~~

~~(c) Space and facilities shall be provided for the financial and business records of the nursing home.~~

~~(5) Inservice education facilities. Space and facilities shall be designated for inservice education.~~

(6) Staff facilities. There shall be a lounge, lockers, and toilets provided for employees and volunteers.

AMENDATORY SECTION (Amending Order 1509, filed 5/28/80)

~~WAC 248-14-120 ((NEW CONSTRUCTION REQUIRED ROOMS AND AREAS)) RESIDENTIAL CARE UNIT. (1) ((Corridors and doors. Corridors shall be not less than seven feet in width except in service areas (minimum of five feet) or except where conditions of exit, as determined by the Washington state fire marshal, require eight feet in width, and doors to patient rooms shall be not less than three feet eight inches in width. Doors to patient bathrooms and toilets shall be not less than three feet in width, and the plumbing fixtures in these rooms shall be arranged to accommodate wheelchair patients.~~

~~These minimum corridor and door width specifications will not be required in alterations of existing nursing homes.~~

~~No door shall open into the patient corridor except closet doors, unless otherwise required by the Washington state fire marshal.~~

~~All patients' toilet room doors not opening onto a patient corridor shall open outward, and it is recommended that toilet doors opening onto corridors be recessed and open outward. Doors to patient toilets and bathrooms having locks shall have readily available a means of unlocking same from the outside.~~

~~Handrails shall be provided along both sides of all corridors. Except that this regulation shall not apply in facilities certified exclusively for the care of the mentally retarded or those with related conditions. It is recommended that handrails be mounted 34 inches above the floor.~~

~~Stairways shall be provided with handrails on both sides, and all open stair wells shall be protected by guard rails, and be equipped with nonslip material on the treads.)) Location. Each nursing unit shall be located to avoid through traffic to any general service, diagnostic, treatment, or administrative area. Services provided to other areas of the nursing home and which create traffic unnecessary to the functions of the nursing unit shall be excluded. All rooms and areas of a nursing unit shall be on the same floor.~~

~~(2) Required facilities.~~

~~(a) Basic service facilities. Each unit shall have at least the following basic service facilities: A nurses' station, a medicine storage and preparation area, clean and soiled utility rooms, housekeeping facilities and storage space for linen, other supplies and equipment.~~

~~(b) Residential care annex, when provided. Rooms in buildings for the accommodation of residents which are connected to the main nursing home building by means of enclosed and heated passageways will be construed as portions of the main home.~~

~~((2)) (3) ((Patient)) Resident rooms.~~

~~(a) ((Access to, traffic through. The building shall be so arranged as to avoid all traffic through patient rooms, and excessive or undesirable traffic through other rooms. Each patient bedroom shall have direct access from a corridor and shall be so located as to minimize entrance of odors, noise and other disturbances.)) Each resident room floor shall be above grade level.~~

~~(b) Each resident room shall be directly accessible from the corridor of the nursing unit and shall be located to prevent through traffic.~~

~~((b)) (c) Window requirements. Every ((patient)) resident room shall be an outside room ((permitting entrance of natural light. The)) having a clear glass window area ((allowing for visibility by patients shall be)) of not less than one-eighth of the usable floor area. ((Rooms, any portion of which are below grade at required windows, shall have the clear window area equal to not less than one-fifth the entire floor area of the room)) Required windows shall be in an outside wall and located to permit room occupants a view to the outside and to permit entry of natural light.~~

~~((Opaque or translucent glass shall not be used in exterior windows in patient rooms.~~

~~No required)) All resident room windows shall be located ((within)) at least 24 feet ((of)) (7.2 meters) from another building or the opposite wall of a court or ((within)) at least ten feet ((of)) (3 meters) away from a property line, except on street sides. If the depth of ((the)) a court is less than one-half ((the)) its width, the width requirement will not apply. ((Where the sill of a window is less than five feet above a public sidewalk, the wall in which the window occurs shall be at least eight feet from the walk.~~

~~(c) Below-grade rooms. No room, the floor of which is more than three feet, six inches below grade at any required window, shall be used for the accommodation of patients.~~

~~(d) Room size and shape, ceiling height. There shall be at least 85 square feet of usable floor space for each bed in a multi-bed room and~~

~~there shall be at least seven and one-half feet ceiling height over this required area. There shall be at least 100 square feet of usable floor space for each one-bed room. There shall also be not less than seven and one-half feet ceiling height over this required area.~~

All patient bedrooms shall provide at least a three foot space between the perimeter of the bed and walls, beds, and any fixed obstruction, provided that the above three foot requirement does not apply to the distance between the head of the bed and a wall.) Window sills shall be three feet (91 cm) or less above the floor and the outside window wall shall be at least eight feet (2.4 meters) from an outside public walkway.

(d) The maximum capacity of any ((patient)) resident bedroom shall be ((not more than four)) three beds. ((No patient bedroom shall be more than three beds deep from an exterior window wall.))

(e) At least sixty percent of the beds shall be in rooms designed for one or two beds.

((~~(f)~~)) ((~~There shall be at least one isolation room for the care of patients in a terminal condition or requiring isolation for communicable disease control.~~)) Resident rooms shall be arranged to provide for the placement of each bed so the length of the bed is parallel to the outside window wall. Multibed rooms shall be designed to permit no more than two beds side by side parallel to the outside window wall.

(g) ((~~Such isolation room~~)) On each residential care unit there shall be at least one single bedroom for every twenty beds or fraction thereof which shall contain a lavatory with ((either foot, knee,)) a goose-neck spout (or equivalent) with water supplied through a mixing valve and/or wrist ((or elbow)) faucet control((~~and~~)). The room shall have its own adjoining bathing facility, and its own adjoining toilet equipped with a bedpan flushing attachment. The floor surface shall be smooth and washable.

((~~One single bedroom with its own toilet and lavatory shall be provided for each additional 50 beds or fraction thereof. The lavatory may be within the patient bedroom or in the toilet room but shall be located adjacent to the exit from the single bedroom for which it is provided.~~))

(h) There shall be at least eighty-five square feet (7.65 square meters) of usable floor space per bed in each multibed room and at least one hundred square feet (9.29 square meters) of usable floor space for each one bed room.

(i) The dimensions and arrangements of resident rooms shall provide at least three feet (90 cm) of space between the perimeter of the bed and any wall, other fixed obstruction or other bed, however, this three-foot space requirement shall not apply to the distance between the head of the bed and the wall.

EXCEPTION: In intermediate care facilities certified exclusively for the care of the mentally retarded (IMR) or those with related conditions, the three-foot clearance between the bed and the wall may not be required.

(j) Ceiling heights in patient rooms shall be at least seven feet six inches (227 cm).

(4) Patient room equipment.

(a) There shall be a reading light and a nurse call signal device for each resident bed.

EXCEPTION: In intermediate care facilities certified exclusively for the care of the mentally retarded (IMR) or those with related conditions, the reading light at bed and nurse call signal device may not be required.

(b) There shall be a lavatory in each multibed resident room and in each single room which does not have an adjoining toilet which contains a lavatory.

EXCEPTION: In intermediate care facilities of fifteen beds or less certified exclusively for the care of the mentally retarded (IMR) or those with related conditions the lavatory may be omitted from the resident room.

(c) There shall be a separate, enclosed closet for each bed in each resident room. The inside dimensions of each wardrobe or closet shall be at least twenty-two inches (55.9 cm) deep (front to back) by thirty inches (76.2 cm) wide. The clothes rod shall be placed to provide at least five feet (152 cm) and not more than five feet six inches (168 cm) of free hanging space from the center of the clothes rod to the floor of the room.

(d) There shall be a lockable drawer or enclosed shelf space for storage of other personal belongings for each resident bed. This may be portable equipment but shall be in addition to the required bedside cabinet.

(e) There shall be separate storage for extra pillows and blankets for each resident bed within a room. This may be combined with the

wardrobe or closet for the bed provided additional space is allocated so it does not impinge upon the required space for clothing.

(f) Each multibed room shall have permanently installed cubicle curtain tracks or rods with flame-proof curtains approved by the state fire marshal which provide for enclosing the area around each bed for privacy.

EXCEPTION: In intermediate care facilities of fifteen beds or less certified exclusively for the care of the mentally retarded (IMR) or those with related conditions, the cubicle curtain tracks may not be required.

(g) In any resident room in which there is provision for visual monitoring of a patient by television, there shall be a mechanism within reach of the resident for ensuring visual privacy.

(h) For electrical outlet and lighting requirements refer to electrical section, WAC 248-14-160.

(5) Resident toilet(s).

(a) There shall be a toilet directly accessible from each resident room and from each bathing facility without going through a general corridor. One toilet may serve two rooms except for those resident rooms for which private toilets are required, however, one toilet shall serve a maximum of four beds. For alterations of existing resident rooms the ratio of one water closet for each eight residents or fraction thereof is applicable.

EXCEPTION: In intermediate care facilities of fifteen beds or less certified exclusively for the care of the mentally retarded (IMR) the toilet may be accessible from the corridor.

(b) Each water closet in toilets adjoining resident rooms shall be equipped with a bedpan flushing attachment unless a siphon jet clinic service sink is provided in each soiled utility room.

(c) There shall be provision for storage of a bedpan brush container off the floor in each toilet room equipped with a bedpan flushing attachment.

(d) At least one lavatory shall be provided in each toilet, except when the toilet room opens into a single bed room which has a lavatory.

(e) Each resident toilet shall be designed to accommodate a person in a wheelchair.

(f) A properly located and securely mounted grab bar or its equivalent shall be provided at each side of a water closet.

(6) Resident bathing facilities.

(a) On each unit there shall be at least one bathing facility (bathtub or shower) per every fifteen beds or fraction thereof which are not in rooms served by an adjoining bathroom.

(b) On each unit there shall be at least one peninsular or island bathtub accessible from the corridor. The rim of the bathtub shall not be higher than twenty inches from the floor.

(c) There shall be at least one roll-in shower accessible from the corridor on each unit. It shall be designed for wheelchair use and have interior dimensions of at least three feet in width and four feet in depth. The bulkhead shall be a maximum of thirty-four inches high. Toe space shall be provided. The threshold to the shower stall shall be flush with the room floor. The shower stall shall be properly drained to prevent the flow of water outside the shower stall, but provide for safe use of a wheelchair within the stall. The water inlet shall be approximately four and one-half feet from floor level and have a flexible hose approximately five feet long with a lightweight, shampoo-type, spray attachment. If a conventional showerhead is also installed, it shall be valved off from the water inlet to which the flexible hose is attached.

(d) In each bathroom containing more than one bathing facility each bathtub or shower shall be in a separate room or compartment and the area for each bathtub and shower shall be sufficient to accommodate a wheelchair and attendant and provide for visual privacy during bathing and dressing.

(e) Grab bars:

(i) One horizontal grab bar shall be provided at the side of a standard bathtub and an L shaped bar at the faucet end. A horizontal grab bar shall be provided on at least two sides of a shower stall and an L shaped bar mounted on the shower head side. Horizontal grab bars shall be mounted 31 inches to 36 inches above the floor except for peninsular bathtubs and roll-in showers.

(ii) At each peninsular bathtub there shall be at least one grab bar which is mounted parallel to and from 33 to 36 inches above the floor and extends the full width of the bathtub at a distance of at least ten inches from the wall at the faucet end of the tub.

(iii) At each roll-in shower there shall be horizontal grab bars on two sides of the shower stall mounted at 31 inches above the floor. The

faucet end of the shower stall shall have an additional grab bar mounted 33 inches to 36 inches above the floor.

(f) Shower and tub bottom surfaces shall be slip-resistant.

(7) Nurses' station. On each residential care unit there shall be a nurses' station which shall have the following facilities: (a) A charting surface; (b) seating area sufficient to accommodate at least twenty percent of unit staff; (c) a rack or other storage unit for current health records; (d) storage for record supplies; (e) a telephone; (f) a nurse call annunciator; (g) a clock.

EXCEPTION: In intermediate care facilities of fifteen beds or less certified exclusively for the care of the mentally retarded (IMR) or those with related conditions, only a desk with a file drawer for record storage and a telephone are required.

((3)) (8) Utility ((area)) service rooms. There shall be adequate space and facilities for the preparation, cleansing, sanitizing sterilization, and ((storing)) storage of ((nursing)) resident care supplies and equipment. On each unit there shall be a clean utility room and a soiled utility room designed and equipped to provide for the care and handling of resident care supplies and equipment in a manner that ensures separation of clean and sterile supplies and equipment from those that are contaminated.

(a) Clean utility.

(i) Each clean utility room shall have a work counter, a sink and closed storage units for clean and sterile supplies and small equipment.

(ii) All sinks shall be equipped with gooseneck spouts and four-inch wrist controls or equivalent.

EXCEPTION: In intermediate care facilities of fifteen beds or less certified exclusively for the care of the mentally retarded (IMR) or those with related conditions, a clean utility room is not required.

(b) Soiled utility room.

(i) Each soiled utility room shall have a sink mounted in or integral with a work counter of at least three feet in length on each side of the sink, storage for cleaning supplies and other items appropriately kept in a soiled area and adequate space for waste containers, linen hampers and other large equipment for the collection of contaminated materials or equipment.

(ii) A siphon jet type clinic service sink equipped with bedpan flushing attachment shall be provided unless a bedpan flushing device is provided in toilets adjoining resident rooms in the unit.

(iii) The number and size of compartments in the required counter mounted sink shall have a minimum of two compartments. The inside dimensions of each compartment shall be twenty-two by twenty-two by twenty inches deep.

(iv) All sinks shall be equipped with gooseneck spouts or equivalent and four-inch wrist controls or equivalent.

(v) Storage for cleaning agents, disinfectants and other caustic or toxic agents shall be in closed, locked units.

(vi) The arrangement of work counters, sinks and other fixed equipment in the soiled utility room shall provide for processing equipment with a work flow by which contaminated equipment is collected disassembled without intermingling of or use of the same work surfaces for equipment in different stages of processing.

(vii) EXCEPTION: In facilities of fifteen beds or less certified exclusively for the care of the mentally retarded (IMR) or those with related conditions the above shall not apply except that a soiled workroom for washing of soiled toys and equipment shall be provided. It shall include a work counter, storage cabinets and a twelve-inch minimum depth double compartment sink. This soiled work area may be combined with the laundry facilities, if they are provided.

((A separate, centrally located nurses' utility room shall be provided on each floor or nursing unit used for the accommodation of patients. The utility room shall be equipped with a plumbing fixture with a waste line of sufficient size (usually four inches) to dispose of wastes, a deep sink, a work counter, storage cabinets or shelving, and a lavatory or small sink mounted in or adjacent to the counter.

(4) Drug facilities. (a) There shall be adequate drug facilities to provide for locked storage of all drugs without crowding and for the observance of safe procedures and techniques in the preparation of medicines for administration.

(i) Any room or area which serves as a drug facility shall serve clean functions only and shall be well illuminated and ventilated. When any mobile drug storage cabinet is not being used in the administration of medicines to patients, it shall be stored in a room which meets this requirement.

(ii) Each drug facility shall include a sink with hot and cold running water, a work counter and drug storage cabinets.

(iii) All drug storage cabinets (stationary or mobile) shall be designed and arranged so drug containers are readily accessible and shall be closed, locked cabinets unless they are stationary cabinets in a locked room which serves exclusively for storage of drugs and supplies and equipment used in the administration of drugs.

(iv) Drug storage cabinets, except those for schedule II controlled substances, within the same drug facility may be keyed alike. Locks and keys for one drug facility shall be different from those for any other drug facility and from any other locks and keys within the nursing home so that only the keys to a particular drug facility can be used to gain access to drugs stored within that drug facility.

(b) All drug storage shall be designed and finished so it can be cleaned easily.

(5) Miscellaneous rooms and areas:))

(9) Drug facilities.

(a) There shall be facilities for drug preparation and storage near the nurses' station on each unit.

(b) The drug facilities shall be well illuminated, ventilated and equipped with a work counter, sink with hot and cold running water and drug storage units.

(c) The drug storage units shall provide:

(i) Locked storage for all drugs.

(ii) Separately, keyed storage for Schedule II and III controlled substances.

(iii) Segregated storage of different resident's drugs.

(d) There shall be a refrigerator for storage of thermolabile drugs in the drug facility.

(e) Locks and keys for drug facilities shall be different from any other locks and keys within the nursing home.

(10) Storage.

(a) ((Laundry)) Linen storage. ((If laundry is washed on the premises, adequate laundry and drying facilities shall be provided.))

(i) On each unit, a clean room or enclosed area shall be provided for storage of clean linen and other bedding.

(ii) On each unit, there shall be a soiled linen room for collection and temporary storage of soiled linen. This may be in an area of the soiled utility room but shall not be in a room or area which serves clean functions.

(b) ((Linen and clothing storage)) Equipment storage. ((Adequate provisions shall be made for the storage of soiled linens and patients' soiled clothing. This area shall be in a room separate and apart from the laundry facilities.

Adequate facilities shall be provided for the storage of clean linen:

There shall be a separate, enclosed closet for each patient bed in every patient bedroom. The inside dimensions of each wardrobe or closet shall not be less than 22 inches deep (front to back) by 20 inches wide. The clothes rod shall provide at least five feet and not more than five feet six inches of free hanging space from the center of the clothes rod to the floor of the room.

(c) Nurses' station. There shall be a nurses' station containing a facility for charting and storage of patients' records and a telephone.

(d) Day room. Well lighted, ventilated day room space (limited to lounge, solarium, dining room and/or recreation room) in accordance with the specifications below, which includes an outside room and which provides floor space in accordance with the following minimum specifications, shall be provided:

Up to 15 beds	150 square feet
16 to 25 beds, inclusive	10 square feet per bed additional for each bed over 15
26 beds and over	5 square feet per bed additional for each bed over 25

Example: A 37-bed nursing home:

First 15 beds require 150 square feet	150
Second 10 beds require 10 square feet per bed (10 x 10 = 100)	100
Additional 12 beds require 5 square feet per bed (12 x 5 = 60)	60
Total	310

(e) Equipment storage. Adequate storage space for wheelchairs, walkers, patient lifts, and other equipment shall be provided.

(f) Garbage can area. There shall be a separate room or outside area for the washing of garbage and refuse cans, hot and cold water and floor drain connected to sewerage system in this area. Garbage storage area shall be provided.

~~(g) Each multi-bed room shall have permanently installed cubicle curtain tracks or rods with flame-proof curtains which shall permit enclosure of the area around each bed. Except that this regulation may not apply in facilities certified exclusively for the care of the mentally retarded or those with related conditions.~~

~~(h) There shall be proper facilities for housekeeping, with service sink and storage space.~~

~~(6) Annex buildings. Rooms in buildings for the accommodation of patients which are connected to the main nursing home building by means of enclosed and heated passageways will be construed as portions of the main home. Other areas for patient occupancy on the same property will be construed as annex buildings and shall provide all the patient facilities required in the main nursing home building, with the exception of kitchen if adequate provisions are made for bringing food to the annex building. These required facilities include toilet, lavatory, and bathing areas, day room, utility room, linen storage, and nurses' station. The call signal shall register in the main building unless the annex building is separately staffed 24 hours per day.~~

~~(7) Every nursing home shall provide an approved area within the home for the purpose of preparing, serving and storing food and drink unless food service is provided from facilities which have been inspected and which have been found to be at least equal to the facilities required by these regulations. All equipment used in the preparation, serving or storing of food in nursing homes shall be of a type approved by the department.))~~

(i) Nursing and medical equipment. There shall be at least three square feet of storage space per bed, but in no case less than fifty square feet of storage space provided in a clean room for resident care equipment on or adjacent to each unit in addition to the clean utility room.

(ii) There shall be at least two square feet of storage space per bed for wheelchair and other ambulation equipment. Storage may be combined with an equipment storage room or be in a corridor alcove but shall not impinge upon the required corridor space.

(11) Janitors' closet. On each unit provide a janitors' closet with a service sink and adequate storage space for housekeeping equipment and supplies.

NEW SECTION

WAC 248-14-125 MISCELLANEOUS ROOMS AND AREAS. (1) Food service facilities.

(a) General.

(i) All food service facilities shall be constructed to be in compliance with chapter 248-84 WAC, rules and regulations of the state board of health governing food service sanitation.

(ii) Approved areas shall be provided for the purpose of preparing, serving and storing food and drink unless food service is provided from facilities which have been found to be at least equal to the facilities required by these regulations.

(iii) All facilities shall be suitably located to facilitate delivery of stores, disposal of kitchen waste and transportation of food to nursing units.

(b) Kitchen.

(i) There shall be a receiving area located for ready access to the storage and refrigeration areas.

(ii) The kitchen shall be located and arranged to avoid contamination of food, to prevent objectionable heat, noise and odors to resident care areas and to eliminate through traffic.

(iii) There shall be handwashing facilities to include a lavatory, paper towel dispenser and waste receptacle, in cooking and preparation and dishwashing areas.

(c) Dishwashing room or area. There shall be provision for adequately ventilated and equipped dishwashing room or space in a separate area of the kitchen. It shall be located to avoid traffic through other areas of the kitchen.

(d) Garbage facilities.

(i) Garbage storage area shall be located in a well-ventilated room or outside area.

(ii) There shall be a can-wash area provided with hot and cold water and a floor drain connected to the sanitary sewage system.

(e) Office space. A suitable office or space for a desk and files shall be provided for the food service supervisor. It shall be located central to deliveries and kitchen operations.

(f) Dining room. At least ten square feet per bed shall be provided for patient dining. If meal service is provided for outpatients, additional dining space shall be provided to accommodate the total inpatients and outpatients at no more than two settings.

(g) Housekeeping facilities (janitor's closet). There shall be adequate space to provide for a service sink and storage of housekeeping equipment and supplies for the exclusive use of food service.

(2) Dayroom, activity and recreation facilities.

(a) Activity and/or recreational facilities shall be provided. They may be combined with the dining facilities. Where such facilities are combined, there shall be sufficient space to accommodate all activities and prevent their interference with each other.

(b) There shall be at least one dayroom, separate from the dining room.

(c) At least twenty square feet per bed for the first one hundred beds and seventeen square feet per bed for all beds in excess of one hundred shall be provided.

(d) Additional space shall be provided for outpatients if such a program is contemplated.

(e) Storage space shall be provided for all activity and recreational equipment and supplies, adjoining or adjacent to the facilities provided.

(3) Rehabilitation facilities if provided:

(a) Location. All rehabilitation facilities shall be located for easy access in general service areas.

(b) Equipment. Exercise, treatment, and supportive facilities shall be equipped as needed or required by the narrative program.

(i) General exercise and treatment area. When provided adequate space for exercise equipment and treatment table with sufficient space on one side of the table for the therapist to work is required. Privacy cubicle curtain tracks or equivalent around the treatment table and a lavatory or sink near the treatment area shall be provided.

(ii) Hydrotherapy treatment area. If hydrotherapy treatments are provided, equipment shall be located in a separate room or area. Toilet, locker and shower facilities designed for patients in wheelchairs shall be.

(iii) Administrative facilities. Space and a desk or equivalent shall be provided for administrative, clerical, interviewing and consultative functions.

(iv) Storage facilities. Enclosed storage cabinets or shelving shall be provided for clean linen and supplies. Adequate storage space shall be provided for large equipment.

(v) Housekeeping facilities. A janitor's closet shall be suitably located.

(4) Pharmacy. If a pharmacy is provided, it shall meet the requirements of and be licensed by the Washington state board of pharmacy. Refer to WAC 360-16-210.

(5) Dialysis services and facilities. If provided, refer to WAC 248-14-300.

(6) Outpatient facilities. If provided, refer to WAC 248-14-295 and 248-14-296.

(7) Tuberculosis facilities. If provided, refer to WAC 248-14-290.

(8) Laundry facilities.

(a) If laundry is washed on the premises, adequate laundry and drying facilities shall be provided. The laundry shall be located to prevent noise, odors, objectionable heat, moisture, and contamination to patient care, supply and food service areas.

(b) When laundry facilities are maintained an adequate supply of hot water shall be assured by providing sufficient hot water tanks to allow each machine at least one hot water cycle of fifteen minutes duration at 140 degrees Fahrenheit or five minutes duration at 160 degrees Fahrenheit.

(c) Soiled linens and patients' soiled clothing shall be stored and sorted in a separate enclosed room apart from washing and drying facilities. There shall be a handwashing facility and a floor drain in the room.

(d) Clean linen shall be stored in a separate enclosed room apart from washing and drying facilities.

(e) EXCEPTION. In intermediate care facilities of fifteen beds or less certified inclusively for the care of the mentally retarded (IMR) or those with related conditions, the laundry services shall be provided in accordance with the narrative program.

AMENDATORY SECTION (Amending Order 1509, filed 5/28/80)

~~WAC 248-14-130 ((NEW CONSTRUCTION REQUIRED ROOMS AND AREAS—FLOORS, WALLS, AND CEILINGS)) GENERAL DESIGN REQUIREMENTS. (1) ((Surfaces)) Vector control. ((Floors, walls and ceilings of all rooms shall have easily cleanable surfaces.)) Construction of the buildings shall be such as to prevent the entrance of rodents and insects.~~

(2) Roofs. Roofs shall be sloped a minimum of one-fourth inch per foot to prevent ponding with provision made for removal of water by drains and gutters.

(3) Elevators.

(a) General. All buildings having residents' facilities such as bedrooms, dining rooms, recreation areas, or services areas located on other than the main entrance floor shall have electric or electrohydraulic elevators.

(b) Number of elevators.

(i) At least one elevator sized to accommodate a patient bed and attendant shall be installed where one to fifty-nine patient beds are located on any floor other than the main entrance floor.

(ii) At least two elevators, one of which shall be sized to accommodate a patient bed and attendant; shall be installed where sixty to two hundred patient beds are located on floors other than the main entrance floor, or where the major inpatient services are located on a floor other than those containing patient beds.

(c) Operation.

(i) Elevator controls, alarm buttons, and telephone shall be mounted at a height accessible to wheelchair occupants.

(ii) Elevator call buttons, controls, and door safety stops shall be of a type that will not be activated by heat or smoke.

(iii) Control buttons and signals shall be such as to be usable by the blind.

(iv) Handrails shall be provided around walls of the cab.

(4) Stairways. Stairways shall be provided with handrails on both sides. All open stairwells shall be protected by guard rails and equipped with nonslip material on the treads. Open risers are prohibited, nosings shall be flush, slip resistant and rounded to one-half inch maximum radius. Ends of handrails shall be constructed to prevent snagging of clothing.

(5) Ramps. Ramps shall not exceed slope of one-in-twelve and shall have nonslip surfaces. Handrails are required on both sides of ramps.

(6) Corridors.

(a) Corridors shall be a minimum of eight feet in width. Equipment such as drinking fountains, telephone booths, vending machines and portable equipment shall be located so as not to restrict corridor traffic or reduce the corridor width below the required minimum.

(b) Handrails shall be provided along both sides of all corridors. Ends of handrails shall be constructed to prevent snagging of clothing. Handrails shall be mounted thirty-two to thirty-four inches above the floor.

(c) EXCEPTION: In intermediate care facilities of fifteen beds or less certified exclusively for the care of the mentally retarded (IMR) or those with related conditions, a six-foot corridor width is acceptable and handrails along both sides of the corridor may be omitted.

(7) Doors.

(a) Doors to patient rooms shall be a minimum of three feet ten inches in width. Doors to patient bathrooms and toilets shall be a minimum of three feet in width. The minimum door width specifications may not be required in alterations of existing nursing homes. EXCEPTION: In intermediate care facilities of fifteen beds or less certified exclusively for the care of the mentally retarded (IMR) or those with related conditions, the three-foot wide resident room door is acceptable.

(b) All doors to patient room toilets not opening onto a corridor shall open outward. Doors to patient toilets and bathrooms having locks shall have a means of unlocking same from the outside.

(c) Doors, except doors to spaces such as small closets which are not subject to occupancy, shall not swing into corridors in a manner that might obstruct traffic flow or reduce the required corridor width (large walk-in type closets are considered as occupiable space), unless otherwise required by the Washington state fire marshal.

(8) Windows. Refer to WAC 248-14-120(5)(d), patient room windows.

(9) Screens. Mesh screens or equivalent with a minimum mesh of 1/16 inch shall be provided on all windows, doors and other openings which serve for ventilation.

(10) Floor finishes.

(a) All floor finishes shall be easily cleaned and suitable to the function of the area.

(b) Floors at entrances and other areas subject to traffic while wet shall have nonslip finishes.

((+)) (c) All uncarpeted floors shall be smooth, nonabsorbent and easily cleanable.

((+)) (d) If carpets are used, they must meet the following requirements: Meet the specifications pursuant to WAC 248-14-

130((+))((+))((10))((f)); be used only in selected areas pursuant to WAC 248-14-130((+))((+))((10))((e)); be installed pursuant to WAC 248-14-130((+))((+))((10))((e)); and be cleaned routinely pursuant to WAC 248-14-190(2)(a))((10))((g)).

((+)) (e) Carpets may be used in the following selected areas: Administrative((;)), lobbies((;)), lounges, chapels, dayrooms((;)), waiting areas((;)), nurses' stations((;)), elevators, corridors ((excluding stairways or stair enclosures));), dining rooms, patient bedrooms (excluding toilet and bathrooms)((;)), and equipment alcoves opening onto carpeted corridors or areas. Carpets may be used in other areas only upon written approval of such use by the department.

((+)) (f) Specifications for acceptable carpeting:

(i) Pile yarn fiber: Fibers which meet the standards of the state fire marshal (see RCW 18.51.140) shall be acceptable provided the fiber is easily cleanable.

(ii) Pile type: Round loop (cut pile acceptable in nonpatient occupied areas).

(iii) Pile tufts per square inch: Minimum 64 or equivalent.

(iv) Rows: Minimum eight per inch.

(v) Pile height: Level pile, from a minimum height of .125 inches to a maximum of .255 inches.

(vi) Backing: Shall be water impervious or a water impervious pad shall be permanently bonded to the backing, provided that a nonimpervious carpet with or without a separate pad may be installed in nonpatient occupied areas.

((+)) (g) Installation of carpet material.

(i) Bonded pad carpet must be cemented to the floor with waterproof cement.

(ii) Edges of carpet must be covered and cove or base shoe used at all wall junctures. Seams are to be bonded together with manufacturer-recommended cement.

(iii) Safety of patients or occupants shall be assured during installation. Rooms must be well ventilated and not be used by occupants or patients during installation. The room may not be returned to use until the room is free of volatile fumes and odors from adhesives.

(11) Wall surfaces and ceilings.

(a) Walls and ceilings shall have easily cleanable surfaces.

(b) There shall be a waterproof, painted, glazed or similar waterproof finish extending above the splash line in all rooms or areas that are subject to splash or spray, i.e., bathing facilities, janitors' closets, can-wash areas, etc.

(c) All ceiling heights shall be not less than seven feet six inches (227 cm).

(12) Miscellaneous.

(a) Provisions for the handicapped. Facilities shall be available and accessible to the physically handicapped (public, staff, and patients). Refer to WAC 248-14-040.

(b) All rooms shall be identified by adequate signage.

(c) Provide a minimum of one drinking fountain on each nursing unit.

EXCEPTION: In intermediate care facilities of fifteen beds or less certified inclusively for the mentally retarded (IMR) or those with related conditions, the drinking fountain may not be required.

(d) Equipment and casework.

(i) Shall be designed, manufactured and installed for ease of proper cleaning and maintenance.

(ii) Design, materials and finishes shall be suitable to the functions of each area.

AMENDATORY SECTION (Amending Order 1509, filed 5/28/80)

WAC 248-14-140 ((NEW CONSTRUCTION REQUIRED ROOMS AND AREAS)) VENTILATION. (1) General ventilation. Ventilation of all rooms shall be sufficient to prevent all objectionable odors and excessive condensation. All ((patient)) resident rooms shall be ventilated by windows or by a positive mechanical device, and in such manner as to avoid direct drafts on the ((patients)) residents.

(2) Natural ventilation. When window ventilation is used for ((patient)) resident rooms, the operable opening shall be not less than one-sixth of the required window area. There shall be a large screened window by each exterior exit door.

((All toilets and bathrooms shall be vented by a mechanical exhaust system.))

(3) Mechanical ventilation.

(a) All air-supply and air-exhaust systems shall be mechanically operated.

(b) Installation of handling duct systems shall meet the requirements of NFPA 90A¹.

(c) Corridors shall not be used to supply air to or exhaust air from any room, except that air from corridors may be used to ventilate bathrooms, toilet rooms, janitors' closets, and small electrical or telephone closets opening directly on corridors.

(d) Room supply air inlets, recirculation and exhaust air outlets shall be located not less than three inches above the floor.

(e) Outdoor air intakes shall be located as far as practical but not less than twenty-five feet from the exhausts from any ventilating system, combustion equipment, or plumbing vent or areas which may collect vehicular exhaust and other noxious fumes. The bottom of outdoor

air intakes shall be located as high as practical but not less than three feet above ground level, or if installed through the roof, three feet above the roof level.

(4) Minimum ventilation requirements.

(a) The ventilation rates shown in Table A shall be considered as minimum acceptable rates and shall not be construed as precluding the use of higher ventilation rates. Ventilation systems shall be designed and balanced to provide the pressure relationship as shown in Table A.

TABLE A PRESSURE RELATIONSHIPS AND VENTILATION OF CERTAIN AREAS

AREA DESIGNATION	PRESSURE	MINIMUM AIR CHANGES	MINIMUM TOTAL ²	ALL AIR ¹	
	RELATIONSHIP TO ADJACENT AREAS	OF OUTDOOR AIR PER HOUR SUPPLIED TO ROOM	AIR CHANGES PER HOUR SUPPLIED TO ROOM	EXHAUSTED DIRECTLY TO OUTDOORS	RECIRCULATED WITHIN AREA
Isolation Patient Room	N	2	2	Yes	No
Patient Room	E or P	2	2	Optional	Optional
Patient Area Corridor	N	2	2	Optional	Optional
Occupational Therapy	N	2	6	Optional	Optional
Physical Therapy and Hydrotherapy	N	2	6	Optional	Optional
Speech and Hearing Unit	E or P	2	2	Optional	Optional
Soiled Workroom and Soiled Holding	N	2	10	Yes	No
Clean Workroom and Clean Holding	P	2	4	Optional	Optional
Medicine Preparation Room	P	2	4	Optional	Optional
Activities of Daily Living	E or P	2	4	Optional	Optional
Treatment Room	E or P	2	6	Optional	Optional
Toilet Room and Locker Rooms	N	Optional	10	Yes	No
Bathroom	N	Optional	10	Yes	No
Janitors' Closet	N	Optional	10	Yes	No
Sterilizer Equipment Room	N	Optional	10	Yes	No
Linen and Trash Chute Room	N	Optional	10	Yes	No
Food Preparation Center	E	2	8 (10)	Yes	No
Warewashing Room	N	Optional	8 (10)	Yes	No
Personal Care Room	N	2	8	Optional	Yes
Dietary Day Storage	E or P	Optional	2	Optional	No
Laundry, General	V	2	10	Yes	No
Soiled Linen Sorting and Storage	N	Optional	10	Yes	No
Clean Linen Storage	P	Optional	2	Optional	Optional

P=Positive N=Negative E=Equal V=May Vary ()=Recommended

¹Heat recovery systems shall be utilized where appropriate especially for those areas where all air is required to be exhausted to the outside.

²Requirements for outdoor air changes may be deleted or reduced and total air changes per hour supplied may be reduced to 25% of the figures listed when the affected room is unoccupied and unused provided that indicated pressure relationship is maintained. In addition, positive provisions such as an interconnect with room lights must be included to insure that the listed ventilation rates including outdoor air are automatically resumed upon reoccupancy of the space. This exception does not apply to certain areas such as toilets and storage which would be considered as "in use" even though "unoccupied."

General Note: The outdoor air quantities for central systems employing recirculating and serving more than a single area designation may be determined by summing the individual area quantity requirements rather than by providing the maximum listed ratio of outdoor air to total air.

(b) Exhaust hoods in food preparation centers and dishwashing areas shall have an exhaust rate not less than 50 cfm per square feet of face area. Face area is defined for this purpose as the open area from the exposed perimeter of the hood to the average perimeter of the cooking surfaces. All hoods over cooking ranges shall be equipped with fire extinguishing systems and heat actuated fan controls. Cleanout openings shall be provided every twenty feet in horizontal exhaust duct

systems serving hoods. Kitchen ventilation shall be adequate to provide comfortable working temperatures.

(c) Boiler rooms, elevator equipment rooms, laundry rooms, and any heat producing spaces shall be provided with sufficient outdoor air to maintain combustion rates of equipment and to limit temperatures at the ceiling to ninety-seven degrees Fahrenheit. Effective Temperature (ET) as defined by ASHRAE².

(d) Individual patient room toilets and bathrooms may be ventilated either by individual mechanical exhaust systems or by a central mechanical exhaust system.

(4) Individual exhaust systems.

(a) Where individual mechanical exhaust systems are used to exhaust individual patient toilets or bathrooms, the individual ventilation fans shall be interconnected with room lighting to insure ventilation while room is occupied. The ventilation fan shall be provided with a time delay shut-off to ensure that the exhaust continues for a minimum of five minutes after the light switch is turned off.

(b) Air discharge openings through roofs or exterior walls shall be protected against the entrance of rain and snow, birds, large insects and foreign objects. Automatic louvers or backdraft dampers shall be provided to prevent a reverse flow of air when the fan is not in operation.

(c) The volume of air removed from the space by exhaust ventilation shall be replaced by an equal amount of outside air. Replacement air shall be conditioned.

(5) Central exhaust systems.

(a) All fans serving central exhaust systems shall be located at the discharge end of the system.

(b) Fire and smoke dampers shall be located and installed in accordance with the requirements of NFPA 90A except that all systems, regardless of size, which serve more than one smoke or fire zone, shall be equipped with smoke detectors to automatically shut down fans as delineated in Paragraph 1002 of NFPA 90A. Access for maintenance shall be provided at all dampers.

(c) Supply and exhaust ducts which pass through a required smoke barrier and through which smoke can be transferred to another room shall be provided with dampers at the barrier, controlled to automatically close when the fan stops, to prevent flow of air or smoke in either direction. Damper(s) shall be arranged to reopen by automatic means except that manual reopening will be permitted if dampers are conveniently located.

(d) Return air ducts which pass through a required smoke barrier shall be provided with a damper at the barrier, actuated by smoke or products of combustion detectors. These dampers shall be operated by the detectors used to actuate door closing devices in the smoke partition or by detectors located to sense smoke in the return air duct from the smoke zone.

(6) Air filters.

(a) All central ventilation or air conditioning systems shall be equipped with filters having efficiencies no less than eighty percent if the system supplies air to any of the following areas: Patient care, treatment, diagnostic, food preparation or laundry. This filter efficiency shall be warranted by the manufacturer and shall be based on atmospheric dust spot efficiency per ASHRAE standard 52-76². The filter bed shall be located upstream of the air conditioning equipment, unless a prefilter is employed. In this case, the prefilter shall be upstream of the equipment and the main filter bed may be located further downstream.

(b) The filter efficiency referred to in the preceding paragraph shall be based on atmospheric dust spot efficiency determined in accordance with ASHRAE standard 52-76².

(c) Filter frames shall be durable and carefully dimensioned and shall provide an airtight fit with the enclosing duct work. All joints between filter segments and enclosing duct work shall be gasketed or sealed to provide a positive seal against air leakage.

(d) All central air systems shall have a manometer installed across each filter bed.

(7) Humidifiers. If provided, shall be a steam type.

FOOTNOTES:

¹ National Fire Protection Association, (NFPA), Standard No. 90 A-1975 Edition.

² American Society of Heating, Refrigerating and Air-Conditioning Engineers, (ASHRAE), Standard No. 52-76, 1976 Edition.

AMENDATORY SECTION (Amending Order 1509, filed 5/28/80)

WAC 248-14-150 ((NEW CONSTRUCTION REQUIRED ROOMS AND AREAS—TEMPERATURE)) HEATING. (1) Temperature. The heating system shall be capable of maintaining the temperature in each room used by residents at a minimum of 76°F. measured ((*) four feet from the floor in the coldest weather.

(2) Thermal insulation.

(a) The following shall be insulated within the building:

(i) Hot water piping exposed to occupant contact operating above one hundred twenty degrees Fahrenheit.

(ii) Air ducts and casings with outside surface temperatures below ambient dew point.

(b) Insulation on cold surfaces shall include an exterior vapor barrier.

(3) Heating systems - General. Nursing homes which have more than fifteen patient beds shall have a second heat supply system which will heat selective areas when the main heating system is not operating.

NEW SECTION

WAC 248-14-155 COMMUNICATION SYSTEMS. (1) Telephones. There shall be a telephone at each nurses' station. At least one telephone away from the nurse's station shall be accessible for patient use at a ratio of two telephones per residential care unit, mounted in

accordance with the handicapped requirements. One phone on each unit shall have an amplifier. At least twenty-five percent of resident rooms shall be provided with telephone jacks. EXCEPTION: In single story facilities of fifteen beds or less certified exclusively for the care of the mentally retarded (IMR) or those with related conditions, a telephone shall be provided in accordance with the program.

(2) Call systems.

(a) There shall be an electrical signaling system with a call device provided at the bedside of each resident. A call shall register by light at the resident room corridor door and by light and audible tone at the nurses' station and other work stations. At least one call device shall be provided for each day room and other area used by residents.

(b) Patient toilet, bath and shower rooms shall be provided with a nonconductive pull cord call device the end of which is located a maximum of 36 inches (90 cm) above the floor and for easy grasp by a resident who has slumped forward or fallen. The call shall register by distinctive light at the resident room corridor door and by distinctive tone and light at nurses' station(s) and work locations.

(c) EXCEPTION: In single story facilities of fifteen beds or less certified exclusively for the care of the mentally retarded (IMR) or those with related conditions, a nurse call electrical signaling system may not apply.

AMENDATORY SECTION (Amending Order 1509, filed 5/28/80)

WAC 248-14-160 ((NEW CONSTRUCTION REQUIRED ROOMS AND AREAS—LIGHTING)) ELECTRICAL. (1) ((General illumination shall be provided in every usable room(-))) Electrical codes. In addition to specific requirements of these rules and regulations, chapter 248-46 WAC, "Rules and Regulations for Installing Electrical Wires and Equipment and Administrative Rules", and the National Electric Code of the National Fire Protection Association (NFPA-70) apply as adopted by the Washington State Department of Labor and Industries.

(2) General illumination.

(a) Natural or artificial light for general illumination shall be provided in every usable room area, including storerooms, attic and basement rooms, hallway, stairways, inclines, and ramps.

(b) Lighting intensities. The following intensities shall be provided.

Table B

Area	Footcandles*
Corridors and interior ramps	20
Exit stairways and landings	10 on floor
Doorways, exterior	10
Administrative and lobby areas, day	50
Administrative and lobby areas, night	20
Chapel or quiet area	30
Physical therapy	20
Occupational therapy	30
Worktable, course work	100
Worktable, fine work	200
Recreation area	50
Dining area	30
Patient care unit (or room), general	10
Patient care room, reading	30
Nurses' station, general, day	50
Nurses' station, general, night	20
Nurses' desk, for charts and records	70
Medicine preparation area	100
Utility room, general	20
Utility room, work counter	50
Janitor's closet	15
Toilet and bathing facilities, general	10
Toilet and bathing facilities at lavatories and mirrors	30
Barber and beautician area	50
Examination and treatment rooms, general	50
Examination and treatment rooms at examination table	100
Laundry	50

*Minimum on task at any time.

(c) All areas occupied by people, machinery and equipment within the building, as well as parking lots, and approaches to buildings shall have proper lighting.

Area Footcandles*

~~((2))~~(3) Reading lights. A reading light shall be provided for each ~~((patient except that such))~~ resident in his room. EXCEPTION: Reading lights may ~~((not))~~ be ~~((required))~~ omitted at each bed in a facility certified exclusively for the care of the mentally retarded or those with related conditions. ~~((Lighting fixtures for reading shall provide at least thirty foot-candles of light on the reading surface, and))~~ Light bulbs shall be ~~((shaded))~~ enclosed with an incombustible shade so as to prevent glare and contact with combustible materials.

~~((3))~~ An adequate number of approved electrical outlets shall be provided:

There shall be not less than one duplex electrical receptacle located at least two feet above the floor at the head of each bed and at least two additional duplex electrical receptacles at separate, convenient locations in each patient room:

~~(5))~~ (4) Night lights. A night light flush mounted on the wall, centered about fourteen inches above the floor and controlled by a switch at the entrance door shall be provided in each ~~((patient))~~ resident room to dimly light pathway to the resident's bed.

~~((6))~~ The following lighting intensities shall be provided:

Location	Light Level (Foot-Candles)
Corridors and interior ramps	20
Exit stairways and landings, on floor	5
Nurses station (general), administrative and lobby	50 day 20 night
Nurses desk for charts and records	70
Nurses medicine cabinet	100
Utility room	20 general 50 work counter
Physical therapy	20
Occupational therapy	30
Recreation area	30
Dining area	30
Patient room	10 general 30 reading light
Janitors' closet	15
Toilet and bathing facilities	30
Barber and beautician areas	50
Examination and treatment room	50 general 100 examining table
Laundry	50))

(5) Receptacle outlets.

(a) An adequate number of approved electrical outlets shall be provided throughout the facility.

(b) There shall be one duplex electrical receptacle located at least two feet above the floor at each side of the head of each bed or a 4-plex at the side of the head of each bed, and at least two additional duplex electrical receptacles at separate, convenient locations in each resident room. At least one duplex receptacle outlet shall be located adjacent to each lavatory intended for resident use. All 15 or 20 ampere, 120 volt receptacle outlets located within five feet of the lavatory or within toilet, bath or shower rooms shall be protected by a ground fault interrupter device.

(6) Switches. Quiet operating switches for night lights and general illumination shall be installed adjacent to doors to patient rooms. Timer switches shall not be installed on lighting fixtures when the operation of the switch would leave the area without light.

(7) Emergency power.

(a) Provide an alternate source of power and automatic transfer equipment to connect alternate source within ten seconds of the failure of the normal source. Alternate source shall be: A generator set driven by a prime mover with on-site fuel supply, unit equipment permanently fixed in place and approved for emergency service or a storage battery designed and approved for emergency service.

(b) Provide a minimum of four hours of effective power for:

(i) Lighting for night lights, exit signs, exit corridors, stairways, dining and recreation areas, nurses stations, medication preparation areas, boiler rooms, electrical service room and emergency generator locations.

(ii) Communication systems, the operation of all alarm systems, an elevator that reaches every residents floor including ground floor, heating equipment to provide heating for resident rooms or a room to

which all residents can be moved when the outside design temperature is +20 degrees Fahrenheit or lower based on the median of extremes as shown in the ASHRAE HANDBOOK OF FUNDAMENTALS.²

(iii) Selected receptacles in medication preparation areas, pharmacy dispensing areas, nurses stations and patient corridors.

FOOTNOTE:

² American Society of Heating, Refrigerating and Air-Conditioning Engineers, (ASHRAE), Standard No. 52-76, 1976 Edition.

AMENDATORY SECTION (Amending Order 1509, filed 5/28/80)

~~WAC 248-14-170 ((NEW CONSTRUCTION REQUIRED ROOMS AND AREAS--)) WATER ((SUPPLY)).~~ (1) Water supply. There shall be an adequate supply of water, meeting the quality standards of, and obtained from, a water supply system the location, construction, and operation of which complies with the standards of the department. Only ~~((such))~~ water approved for domestic purposes shall be used in nursing homes. Hot and cold water under pressure shall be available at all times. In the event that an unsafe water supply is used for irrigation, fire protection, or other purposes, a separate system shall be provided, and there shall be no connection between the safe and the unsafe system.

(2) Hot water temperatures.

(a) The hot water ~~((for general use))~~ system shall be ~~((+10° F. (plus or minus 10° F.)))~~ capable of providing 110 degrees Fahrenheit plus or minus ten degrees water at fixture used by residents. There shall be circulating systems as necessary to ensure a ready supply of hot water at all fixtures. Minimum recommended pressure is 15 pounds per square inch.

~~((3))~~(b) If laundry facilities are maintained, an adequate supply of hot water at a temperature of ~~((+60° F.))~~ 175 degrees Fahrenheit shall be available in the laundry area.

AMENDATORY SECTION (Amending Order 1509, filed 5/28/80)

~~WAC 248-14-180 ((NEW CONSTRUCTION REQUIRED ROOMS AND AREAS--)) PLUMBING, ((TOILET AND LAVATORY FACILITIES)) FIXTURES AND ACCESSORIES.~~ ~~((+))~~ There shall be one water-closet for each 8 patients or fraction thereof. Where urinals are provided for male patients, there shall be in addition at least one water-closet for each 15 male patients or fraction thereof. Where more than one water-closet is required for patient use, separate toilet rooms shall be provided for each sex.

(2) At least one lavatory shall be provided in each toilet room, except when the toilet room opens into the patient room, then the lavatory may be in the patient room. There shall be at least one lavatory for every 8 patients.

(3) Dispensers for single use towels shall be provided at each lavatory and sink:

(4) Every home shall provide adequate and conveniently located toilet and lavatory facilities for its employees separate from patient facilities:

(5) Dishwashing or utility sinks shall not be accepted as handwashing facilities:

(6) Bathing facilities with hot and cold or tempered running water shall be provided in the ratio of one facility for each 15 patients or fraction thereof. There shall be at least one bathtub in the home. A shower in which a chair on wheels may be used and an elevated island tub are recommended:

(7) Handrails shall be provided at bathing facilities and toilets.

(8) There shall be a toilet, lavatory, and bathing facility on each patient floor:

(9) Each sex shall be provided with separate toilet and lavatory facilities:

(10) Drinking fountains are recommended, and when provided they shall be of the inclined jet, sanitary type, meeting standards of the department:

(11) All cross-connections are prohibited. A "cross-connection" is defined as any physical arrangement whereby the domestic or potable water supply system is connected directly or indirectly with any other water supply system, sewer, drain, conduit, pool, storage reservoir, plumbing fixture, or other device which contains or may contain contaminated water, sewage, or other waste or liquid which would be capable of imparting contamination to the domestic or potable water supply as a result of backflow:)) (1) Fixtures.

(a) Lavatories shall be provided in each toilet room except where provided in connecting patient room, dressing room, or locker room.

(b) Drinking fountains shall be of the inclined jet, sanitary type meeting requirements and standards of the department.

(c) Each fixture except water closets, and special use fixtures shall be provided with hot and cold water through a mixing valve.

(d) Backflow prevention devices shall be provided on water supply to fixtures or group of fixtures where the use of extension hoses are anticipated. All cross connections are prohibited.

(2) Accessories. The following accessories with the necessary backing for mounting shall be provided:

(a) Suitable shelf or equivalent and mirror at each lavatory in toilet rooms, patient rooms and locker rooms.

(b) Towel bar or hook at each patient lavatory on nursing units and at each bathing facility.

(c) A robe hook at each bathing facility, water closet and examination room.

(d) There shall be a toilet paper holder properly located and securely mounted at each water closet.

(e) All toilet seats shall be open front type.

(f) Dispensers for single use towels at all lavatories and sinks shall be mounted to avoid contamination from splash and spray.

(g) There shall be suitable provision for soap at each lavatory, sink and bathing facility.

(h) Sanitary napkin dispensers and disposers shall be provided in public and staff womens' toilets.

(i) Grab bars shall be of suitable strength, easily cleanable, resistant to corrosion, of functional design, securely mounted and properly located at toilet and bathing facilities. Grab bars and their anchorage shall have sufficient strength to sustain a dead weight of at least two hundred fifty pounds without permanent deflection.

AMENDATORY SECTION (Amending Order 1509, filed 5/28/80)

WAC 248-14-200 ((NEW CONSTRUCTION))SEWAGE AND LIQUID WASTE DISPOSAL. All sewage and liquid wastes shall be discharged into a public sewage system where such system is available and is acceptable to the department; otherwise, sewage and liquid wastes shall be collected, treated, and disposed of in an independent sewerage system which meets with the approval of the department.

AMENDATORY SECTION (Amending Order 1509, filed 5/28/80)

WAC 248-14-235 ADMINISTRATOR. (1) There shall be a licensed administrator available either full or part time, who plans, organizes, directs and is responsible for the overall management of the nursing home.

(a) An organizational chart of the facility showing major operating programs, staff divisions, supervisory and administrative personnel, and their lines of authority, responsibility and communication and who has the authority and responsibility to act on behalf of the administrator in his/her absence, is kept current.

(b) Appropriate personnel are trained and assisted to do purchase, supply, and property control functions.

(2) Only those individuals shall be admitted whose needs can be met.

(a) Needs may be met by the facility, the facility cooperating with community resources, or with other providers of care affiliated or under contract with the facility.

(b) Recommendations by consultants are submitted in writing to the administrator and are considered.

(3) The administrator shall ensure:

(a) That health related services are delivered as necessary, by appropriately qualified staff and consultants, and in accord with facility policies and procedures and accepted standards of practice.

(b) The enforcement of rules and regulations relative to safety and accident prevention and to the protection of personal and property rights.

(c) That there shall be an electrical signaling system with a call button or cord provided at the bedside of each resident and call buttons or cords for all toilets and bathrooms. Except that this regulation may not apply in facilities certified exclusively for the care of the mentally retarded or those with related conditions.

(d) Public awareness of facility policies and services provided.

(4) The administrator or his designee shall report every case or suspected case of a reportable disease, as defined in chapter 248-100 WAC, to the local health officer.

(5) Physical plant alterations or changes in physical plant utilization which effect compliance with other regulations are submitted to the department for prior approval.

(6) Posting citations. A copy of each citation for a violation of nursing home regulations shall be prominently posted until the violation is corrected as determined by the department.

(7) Reporting of abuse. All cases of suspected abuse or neglect shall be reported to the department or the law enforcement agency.

AMENDATORY SECTION (Amending Order 1455, filed 11/15/79)

WAC 248-14-285 PHARMACEUTICAL SERVICES. (1) Administration of pharmaceutical services.

(a) There shall be provision for timely delivery of drugs and biologicals ((from a pharmacy so a physician's orders for drug therapy can be implemented without undue delay)).

(b) ((Unless the nursing home operates a pharmacy which is licensed by the Washington state board of pharmacy, the nursing home shall have a written agreement with a licensed pharmacist which provides for him to serve as a consultant on pharmaceutical services. A staff pharmacist or the consultant pharmacist shall regularly visit all nursing units and any other areas of the nursing home in which drugs are kept to review and make recommendations regarding methods and practices in ordering, storing, record keeping and disposing of drugs and biologicals. The pharmacist shall make such on-site reviews at least monthly. Signed, dated records of the pharmacist's on-site reviews with his recommendations shall be kept on file in the nursing home.

(c)) There shall be a Pharmaceutical ((and therapeutics)) Services Committee((, whose membership includes a staff or consultant pharmacist and at least one physician and the director of nursing or her designee, responsible for advising and assisting in the formulation of)) which ensures that written policies and procedures ((pertinent to pharmaceutical services and for the review and approval of such policies and procedures)) for safe and effective drug therapy, distribution, control, and use are developed and followed in practice.

((d) There shall be written policies and procedures which provide for the procurement, storage, control, use, retention, release and disposal of drugs and biologicals in accordance with applicable federal and state laws and regulations. Written policies and procedures shall be kept current and followed in practice, shall be reviewed at least annually by the pharmaceutical and therapeutics committee, and shall be dated and signed by members of the committee.

(e) If an emergency drug kit is provided, the nursing home shall comply with the rules and regulations adopted by the Washington state board of pharmacy establishing minimum standards for emergency kits which are found in WAC 360-13-010 and WAC 360-13-020.))

(c) If drugs are maintained for emergency use, a system for their control and accountability shall be established.

(2) A staff pharmacist or consultant pharmacist shall be responsible for coordinating pharmaceutical services which include:

(a) Provision of pharmaceutical services evaluations and recommendations to the administrative staff.

(b) On-site reviews to ensure that drug handling and utilization procedures are carried out in conformance with recognized standards of practice.

(c) Regularly reviewing each resident's therapy to screen for potential or existing drug therapy problems and documenting recommendations in the resident's health record.

(d) Provision of drug information to the nursing home staff and physicians as needed.

(e) Planning and participating in the nursing home staff development program.

(f) Consultation regarding resident care services with other departments.

((2)) (3) Security and storage((, labeling and control)) of drugs.

(a) ((All drugs shall be stored in an orderly fashion in locked cabinets or in cabinets in a locked room which serves exclusively for storage of drugs and supplies and equipment used in the administration of drugs.)) Drugs shall be stored under proper conditions of sanitation, temperature, light, moisture, ventilation, segregation, and security.

(b) Drugs shall be stored in locked cabinets, rooms, or carts accessible only to ((persons who are legally authorized)) personnel authorized to ((dispense or)) administer or dispense drugs ((and shall be kept in locked storage at any time such a legally authorized person is not in immediate attendance)).

(c) Outdated, unapproved, contaminated, deteriorated, adulterated, or recalled drugs shall not be available for use in the nursing home.

((b) Schedule III controlled substances shall be stored apart from other drugs on a separate shelf or in a separate compartment or cabinet; provided, however, schedule III controlled substances may be stored with schedule II controlled substances.

(c) Drugs for external use shall be stored apart from drugs for internal use on a separate shelf or in a separate compartment or cabinet. Any shelf, compartment or separate cabinet used for storage of external drugs shall be clearly labeled to indicate it is to be used for external drugs only.

(d) All drugs requiring refrigeration shall be stored in a separate, locked box or compartment within a refrigerator, or in a separate refrigerator which is locked or in a locked room and shall be accessible only to persons legally authorized to dispense or administer drugs. In each refrigerator in which drugs are stored, there shall be a thermometer located so it can be read easily. The inside temperature of a refrigerator in which drugs are stored shall be maintained within a 35° Fahrenheit to 50° Fahrenheit range.

(e) At all times, all keys to drug boxes, cabinets and rooms shall be carried by persons who are legally authorized to administer drugs and on duty on the premises. All drug administration shall be by persons legally authorized to administer drugs.

This shall not be interpreted to preclude the keeping of one set of reserve, duplicate keys to drug storage facilities, provided such a set is kept in a secure location that is known and available to only the nursing home administrator or a responsible person designated by the administrator.

(f) All drugs shall be obtained and kept in containers which have been labeled securely and legibly by a pharmacist, or in their original containers labeled by their manufacturers and shall not be transferred from the container in which they were obtained except for preparation of a dose for administration.

(g) The label for each legend drug which is not dispensed in a unit-dose in accordance with WAC 248-14-280(4) shall have: the name and address of the pharmacy from which the drug was dispensed; the prescription number; the physician's name; the patient's full name; the date of issue; the initials of the dispensing pharmacist; the name and strength of the drug; the controlled substances schedule, if any; the amount (e.g., number of tablets or cc's) of the drug dispensed; and the expiration date, if a time-dated drug. In the case of a compounded drug which contains schedule II or III controlled substances, the quantity of each controlled substance per cc or teaspoonful shall be shown on the label.

A label on a container of drugs shall not be altered or replaced except by the pharmacist. Drug containers having soiled, damaged, incomplete, or makeshift labels shall be returned to the pharmacy for relabeling or disposal. Drugs in containers having no labels or illegible labels shall be destroyed.

(h) No drugs may be returned from the nursing home to a pharmacy except as provided in the preceding subsection (g) and the following subsection WAC 248-14-280(4) pertaining to unit dose drug distribution system:

(i) Drugs shall be released to a patient upon discharge only on written authorization of a physician. A receipt shall be secured for all legend drugs released to a patient or a responsible person who accepts the drug(s) for the patient. The patient, or other responsible person to whom the drugs are released, shall acknowledge receipt of the drugs by signing a statement in which the following data are included: the name of the patient; the date of the release of the drugs; the prescription number, name, strength, and amount of each drug; the signature of the person releasing the drugs and the signature of the person receiving the drugs. Signed acknowledgments of receipt of drugs shall be kept in the patient's record. The release record for any schedule II and III controlled substance shall be entered on the appropriate page for the given drug in the bound controlled substance record book. This entry shall include the date, the amount of the drug, the location to which the patient is going, the signature of the person releasing the drug, and the signature of the person receiving the drug.

(j) There shall be written policies establishing a reasonable period of time after which the administration of drugs must be stopped automatically unless a physician's order for a drug specified the number of doses or a definite period of time the order was to be in effect. Such automatic stop order times shall not exceed: three (3) days for narcotics and anticoagulants; seven (7) days for amphetamines, antibiotics, anti-inflammatories, antiemetics, antihistamines, anti-neoplastics, barbiturates, cold preparations, cortisones, cough preparations, sulfonamides and tranquilizers; and thirty (30) days for all other drugs.

(i) Patients attending physicians shall be informed of stop order policies.

(ii) Prior to the time administration of a drug would be stopped automatically in accordance with policy, a licensed nurse shall notify the physician and review the patient's condition in conference with him so continuity in the patient's drug therapy will not be interrupted should the physician decide to renew his order. A statement about this notification of the physician and review of the patient's condition with him shall be entered in the patient's clinical record, dated and signed by the licensed nurse.

(k) All of an individual patient's drugs, including schedule III, IV, and V controlled substances, that are discontinued by the physician and remain unused, shall be destroyed by a licensed nurse employee of the nursing home within six months after having been discontinued.

Any drug having an expiration date shall be removed from usage and destroyed immediately after the expiration date.

All of an individual patient's drugs, except those released to the patient on discharge and schedule II controlled substances, shall be destroyed by a licensed nurse immediately after discharge or death of the patient; provided, however, the nursing home may, for a period not to exceed one month, retain the individual drugs of a nursing home patient who has been hospitalized and may return directly to the nursing home upon discharge from the hospital.

(i) Drugs shall be destroyed by a licensed nurse in the presence of a witness in such a manner that they cannot be retrieved, salvaged, or used; they shall not be discarded with garbage or refuse.

(ii) For any drug which is destroyed or any drug which is retained for a hospitalized patient, there shall be an entry in the patient's record which shall include the following: the date, the name, strength, and quantity of the drug; a statement as to whether the drug was destroyed or retained; the signature of the licensed nurse who destroyed or retained the drug; and, for any drug destruction, the signature of the witness. In addition, a record of the destruction of any schedule III controlled substance shall be entered on the page for the particular prescription in the schedule III record book.)

(d) If a supplemental dose kit within the unit dose drug distribution system is provided, it must comply with WAC 360-13-030.

(4) Drugs shall be clearly labeled to ensure the right medication is administered to the right resident.

(5) Records of drug disposition shall provide accurate documentation of:

(a) Administration

(b) Destruction

(c) Release

(d) Retention

(e) Return to the pharmacy.

((3)) (6) Special requirements for Schedule II and III Controlled Substances((:)):

(a) ((All schedule II controlled substances)) Storage shall be ((stored in)) separately keyed ((and locked, secure storage within a drug facility. This may be accomplished by maintaining a separately keyed and locked secure cabinet or metal-lined drawer or separately keyed and locked metal box securely fastened down within a locked drug cabinet)) except in unit dose drug distribution systems.

(b) There shall be a ((schedule II controlled substances record book which shall be a)) bound book(s) with consecutively numbered pages, in which ((each)) a complete record of receipt and ((withdrawal of a schedule II controlled substance)) disposition is ((recorded)) maintained. ((The record for each prescription of a schedule II controlled substance shall be on a separate page. For each receipt of a schedule II controlled substance the following shall be recorded: the patient's full name; the prescription number; the name of the pharmacy; the name of the prescribing physician; the name, strength and number of dosage units of the drug received; the method of administration; the date of receipt and the signature of the licensed nurse who received the drug. For each withdrawal from a prescription container of a schedule II controlled substance, the following shall be recorded, the date and time, the signature of the nurse who withdrew the drug, the amount of the drug withdrawn, and the balance of the drug in the container after the withdrawal.

At least once a day, the amount (e.g., number of tablets, ampules or cc's) of the drug in each container of a schedule II controlled substance (including any for which a physician has ordered discontinuance of administration) shall be counted simultaneously by at least two persons who are legally authorized to administer drugs. A record of each count shall be entered on the page for the particular prescription in the schedule II controlled substance record book and signed by persons

who made the count or the daily count may be entered in a separate, bound record book and signed by the persons who made the count.

(c) There shall be a schedule III controlled substances record book which shall be a bound book with numbered pages in which each receipt and withdrawal of a schedule III controlled substance shall be recorded in the same manner as that required for schedule II controlled substances.

At least once a week, the amount (e.g., number of tablets, ampules or cc's) of the drug in each container of a schedule III controlled substance (including any for which a physician has ordered discontinuance of administration) shall be counted simultaneously by at least two persons who are legally authorized to administer drugs. A record of each count shall be entered on the page for the particular prescription in the schedule III controlled substance record book and signed by persons who made the count or the weekly count may be entered in a separate, bound record book and signed by persons who made the count.

(d) For any discrepancy) (c) Discrepancies between ((actual)) count ((and the record for any schedule II or schedule III controlled substance prescription, a signed entry describing the discrepancy shall be made on)) of drugs and the record ((page for the particular prescription in which the discrepancy was found. The discrepancy)) shall be documented and reported ((in writing)) immediately to the ((responsible)) supervisor ((who shall investigate)). ((Any discrepancy)) Discrepancies which ((has)) have not been ((corrected within seven calendar days)) resolved shall be reported to the ((department or) pharmacist and the Washington state board of pharmacy.

((e) Unused schedule II controlled substances for which a physician has ordered discontinuance of administration shall be returned to the drug enforcement administration within 60 days after having been discontinued.

(f) All schedule II controlled substances which remain after the discharge or the death of patients shall be returned to the drug enforcement administration at least once each month. They may be delivered in person by an authorized representative of the nursing home or sent by registered mail to:

District Supervisor
Drug Enforcement Administration
221 First Avenue West, Room 200
Seattle, Washington 98119

Appropriate forms will be furnished by the drug enforcement administration. Receipts for drugs from the drug enforcement administration shall be kept on file in the nursing home, and readily accessible to authorized representatives of the department and the Washington state board of pharmacy.

(4) Unit dose drug distribution system. The following additional requirements shall apply to any unit dose drug distribution system:

(a) The nursing home shall have in effect a current written agreement with the pharmacy which supplies drugs for the unit dose drug distribution system. The agreement shall delineate the functions, responsibilities and services of both the nursing home and the pharmacy, shall provide assurance of compliance with applicable federal and state laws and regulations and shall be dated and signed by individuals authorized to execute such an agreement on behalf of the nursing home and the pharmacy.

(b) There shall be policies and procedures, as required under WAC 248-14-280(1)(d), which are specific to the unit dose drug distribution system as well as policies and procedures pertaining to other components of the pharmaceutical services.

(c) Policies shall specify the kinds of drugs which will and the kinds of drugs which will not be dispensed under the unit dose drug distribution system:

(i) In specifying the kinds of drugs to be included or excluded, consideration shall be given to all forms of drugs such as liquids, injectables, tablets, capsules, powders, ointments, drops, and suppositories.

(ii) Schedule II and III controlled substances may be included in the unit dose drug distribution system only if the methods of incorporating such drugs into the system are in compliance with applicable federal and state laws, rules and regulations and an accurate written description of such methods has been reviewed and approved in writing by the state board of pharmacy. A copy of this written description upon which the state board of pharmacy has recorded its approval shall be kept on file in the nursing home.

(d) There shall be a system for transmitting physicians' orders for administration of drugs from the nursing home to the pharmacist which ensures the transmission of orders is complete, accurate, and timely. This shall include provision for timely transmission of orders

for newly admitted patients, changes in orders, discontinuance of orders and orders to be carried out immediately ("Stat").

(i) A direct copy (carbon copy, photocopy, or facsimile) of each physician's order for administration of drugs shall be sent to the pharmacy.

(ii) Any telephone transmittal of a physician's order by nursing home staff shall be by a licensed nurse to a licensed pharmacist and shall be followed by transmittal of a direct copy of the physician's order.

(c) Both the pharmacist and the nursing home shall maintain a complete, up-to-date, accurate record (drug profile) of each patient's drug orders:

(i) Each record (drug profile) shall include the following for each drug order which is currently in effect: the date of the order, the name and dose of the drug, the route or method of administration, the time or frequency of administration, and the number of doses to be administered or the date and time at which the administration of the drug is to be stopped according to the physician's order or stop order policy.

For a drug which is ordered to be given only when necessary (p.r.n.) and not on a regular basis, the record (drug profile) shall clearly indicate the following instead of time and frequency: the minimum interval of time between doses, the maximum number of doses which may be administered, and the specific condition for which the drug is to be given.

(ii) The drug profile in the nursing home shall be designed and used for recording all administration of drugs to the patient:

(f) Each single unit or unit dose of a drug shall be packaged in a manner which protects the drug from contamination or deterioration and prevents escape of the drug until the time the package is opened deliberately:

(g) A clear, legible label shall be printed on or affixed securely to each package of a single unit or unit dose of a drug. Each drug label shall include: the name, strength and, for each unit dose package, the dosage amount of the drug, the expiration date for any time-dated drug, the lot or control number, and controlled substance schedule number, if any.

(h) Packages of single units or unit doses of drugs shall be placed, transported and kept in individual compartments so that drugs for one patient are segregated from drugs for another patient:

(i) Each individual drug compartment shall be labeled with the full name of the patient whose drug the compartment contains and the name of the patient's physician:

(ii) Packages of drugs shall be placed systematically in individual compartments so they may be located readily at the proper time for administration:

(i) Cabinets, carts and other equipment used to transport or store individual compartments of drugs for patients shall be designed to prevent loss or intermixing of drugs for different patients:

(j) After delivery of drugs to a nursing home, no single unit or unit dose package of a drug shall be removed from an individual patient's drug compartment and no single unit or unit dose package shall be opened until the time a nurse is ready to administer the drug to the patient:

(k) The schedule for drug delivery shall ensure that drugs are on nursing units ready for administration in accordance with physicians' orders at the established time for drug administration. Definite provision shall be made for timely delivery of drugs needed to implement changes in physicians' orders for drugs, drug orders for newly admitted patients, and orders for immediate administration of drugs ("Stat" orders):

If a supplemental use dose kit is provided, the nursing home shall comply with the rules and regulations adopted by the Washington state board of pharmacy establishing minimum standards for supplemental use dose kits which are found in WAC 360-13-030:

(l) There shall be an established system for recording and for reporting to the pharmacist any patient's untoward reaction to a drug and any errors, omissions or other variations in drug administration:

(m) There shall be an established system for determining the number of unit doses of each p.r.n. to be delivered for a particular patient each day so each p.r.n. drug is available when needed by a patient:

(n) Unopened single unit or unit dose packages of drugs which were not administered shall be left in the patient's individual drug compartments and returned to the pharmacy at the time of the next drug delivery. Single unit or unit dose packages of drugs which have been opened but not administered to the patient shall be destroyed. There shall be an established system for sending written reports to the pharmacist regarding each loss or destruction of a drug.)

- (7) Drug administration.
- (a) Staff shall follow written procedures which provide for the safe handling and administration of drugs to residents.
- (i) Only licensed nurses administer drugs.
- (ii) The resident shall be positively identified prior to administration.
- (b) All drugs shall be identified up to the point of administration.
- (c) Drugs shall be prepared for administration immediately prior to their administration and administered by the same person who prepares them.
- (d) Drug administration shall be documented as soon as possible after the act of administration and shall include:
- (i) Verification of administration.
- (ii) Reasons for ordered doses not taken.
- (iii) Reasons for administration of and response to drugs given on an as needed basis (PRN).
- (e) Drug orders shall be received only by a licensed nurse and administered only on the written or verbal order of a practitioner.
- (f) The self-administration of medication program shall provide evidence of:
- (i) Assessment of the resident's capabilities.
- (ii) Instructions for administration.
- (iii) Monitoring of progress and compliance with orders.
- (iv) Safe storage of drugs.

WSR 80-15-116
PROPOSED RULES
DEPARTMENT OF LICENSING
(Division of Professional Licensing)
 [Filed October 22, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Licensing, Division of Professional Licensing, intends to adopt, amend, or repeal rules concerning maximum fee schedules for employment agencies (the rules are shown below; however, changes may be made at the public hearing). Amending WAC 308-33-011, 308-33-020 and 308-33-030 and repealing WAC 308-33-015;

that such agency will at 1:30 p.m., Tuesday, November 25, 1980, in the 4th Floor Conference Room, Highways-Licenses Building, Olympia, Washington, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 1:30 p.m., Tuesday, November 25, 1980, in the 4th Floor Conference Room, Highways-Licenses Building, Olympia, Washington.

The authority under which these rules are proposed is RCW 19.31.070.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to November 21, 1980, and/or orally at 1:30 p.m., Tuesday, November 25, 1980, 4th Floor Conference Room, Highways-Licenses Building, Olympia, Washington.

Dated: October 22, 1980
 By: Ray Whalin
 Assistant Administrator

STATEMENT OF PURPOSE

Title, Description Of Purpose And Statutory Authority For Rule:

Title: WAC 308-33-011 Maximum fees.

Description of Purpose: This section is amended to eliminate the maximum fee schedule for employment agencies.

Statutory Authority: RCW 19.31.070.
 Title: WAC 308-33-015 Request for Excess Fees.

Description of Purpose: This section is wholly repealed. With the proposed elimination of the maximum fee schedule in WAC 308-33-011 there is no longer any necessity for an employment agency to request fees in excess of the schedule.

Statutory Authority: RCW 19.31.070.
 Title: WAC 308-33-020 Director's Review of Maximum Fee Guidelines.

Description of Purpose: This section is amended in order to eliminate any reference to "maximum fee schedules" and in order to be consistent with proposed amendments to WAC 308-33-011.

Statutory Authority: RCW 19.31.070.
 Title: WAC 308-33-030 Manner of Setting Forth Fees in Agency Contracts.

Description of Purpose: This section is amended in order to eliminate any reference to "maximum fee schedules" and in order to be consistent with proposed amendments to WAC 308-33-011.

Statutory Authority: RCW 19.31.070.
 Summary Of Proposed Rule And Reasons Supporting Action:

Summary of Rule: WAC 308-33-011 sets forth a maximum fee schedule which limits the fees which employment agencies may charge applicants.

WAC 308-33-015 sets forth the procedure and requirements which an employment agency must follow when it makes a request to charge a fee which exceeds the maximum fee schedule.

WAC 308-33-020 provides for review of the maximum fee schedule found in WAC 308-33-011 by the director with the assistance of the advisory board.

WAC 308-33-030 provides guidelines and restrictions for employment agency contracts with applicants.

Reason Supporting Action: The proposed amendments to WAC 308-33-011, 308-33-020, 308-33-030 and the repeal of WAC 308-33-015 are consistent with the recommendations of the Employment Agency Advisory Board which presently call for elimination of maximum fee schedules in the industry and deregulation of fees which may be charged.

Responsible Department Personnel: In addition to the director and deputy director, the following agency personnel have knowledge of and have responsibility for drafting, implementing and enforcing these rules: Cheryl Lux Duryea, Asst. Director, Bus. and Prof., Administration, Highways-Licenses Building, P. O. Box 9649, Olympia, WA 98504, 234-1369(SCAN), 753-1369(COMM);

Joan Baird, Administrator, Div. of Prof. Licensing, Highways-Licenses Building, P. O. Box 9649, Olympia, WA 98504, 234-6974(SCAN), 753-6974(COMM); and Ray Whalin, Asst. Administrator, Div. of Prof. Licensing, Highways-Licenses Building, P. O. Box 9649, Olympia, WA 98504, 234-1150(SCAN), 753-1150(COMM).

Name Of Person Or Organization Proposing Rule: These amendments and repealer are proposed by the Department of Licensing, Division of Professional Licensing.

Agency Comments: The intent of the proposed changes is to allow employment agencies to set the fees they charge through interaction in the marketplace.

None of the proposed changes were made necessary as a result of federal law or federal or state court action.

AMENDATORY SECTION (Amending Order PL 272, filed 9/21/77)

~~WAC 308-33-011 ((MAXIMUM)) FEES. (1) ((No employment agency may contract to charge applicants fees in excess of the fee schedule set forth below:))~~

Monthly Salary	((Maximum Percentage of Expected Monthly Compensation))
Less than \$300	30%
\$400 - 349.99	40%
\$350 - 399.99	50%
\$400 - 449.99	60%
\$450 - 499.99	65%
\$500 - 599.99	70%
\$600 - 699.99	75%
\$700 - 799.99	80%
\$800 - 999.99	100%
\$1000 and over	No Limitation))

~~The fees which employment agencies may contract to charge applicants shall not be regulated. However, no agency shall use a fee schedule or contract which has not been approved for use by the director as provided for in RCW 19.31.050.~~

~~(2) ((An employment agency may under extreme circumstances apply to the director for permission to charge fees in excess of the above fee schedule pursuant to WAC 308-33-015. Such a request, however, is not effective until affirmatively acted upon by the director.)) Although fees are not regulated, no employment agency shall require by contract or otherwise that an applicant make payments in any one month period in an amount which exceeds the applicant's anticipated gross earnings for that period.~~

(3) In the event of termination within sixty days of the start of employment, an applicant shall be required to pay no more than twenty percent (20%) of the gross earnings actually received, or the full placement fee set forth in the contract with the agency, whichever is less.

If the employment is terminated after sixty days, the applicant shall be obligated for the full placement fee set forth in the contract with the agency.

(4) The applicant may submit payroll information to the agency within seventy days after employment for reevaluation to reflect a fee based on actual gross earnings for the first sixty days.

Reviser's Note: The typographical errors in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

AMENDATORY SECTION (Amending Order PL 142, filed 2/23/73)

~~WAC 308-33-020 DIRECTOR'S REVIEW OF ((MAXIMUM)) FEES ((GUIDELINES)). The ((maximum)) fee schedules ((provided for in WAC 308-33-011)) will be reviewed by the director with the assistance of the advisory board every twelfth month after the effective date of this amendatory rule, or sooner if the director determines it necessary. Failure to review the ((maximum)) fee schedules, however, shall in no way affect the validity or effectiveness of ((WAC 308-33-011)) the existing and director-approved fee schedules.~~

AMENDATORY SECTION (Amending Order PL 142, filed 2/23/73)

~~WAC 308-33-030 MANNER OF SETTING FORTH FEES IN AGENCY CONTRACTS. (1) The fee to be charged an applicant, under usual circumstances, must be set forth in the employment agency contract only under the following headings:~~

- ~~(a) Monthly salary.~~
- ~~(b) The range of agency's fee expressed in dollars.~~
- ~~(c) Agency's fee as a percentage of the expected monthly compensation.~~

~~((Agencies may establish any monthly salary range they wish provided that the fees shall not exceed the maximum permitted pursuant to WAC 308-33-011, unless a variance has been granted as set forth herein.))~~

~~(2) An agency must set forth additional information concerning its fees within its contract as required by law and the rules in support thereof.~~

~~(3) Agencies may not indicate, either orally or in writing, that their contract and fee schedules have been "approved" or in any way "recommended" by the state. However, a licensee may indicate that their contracts are "approved for use."~~

REPEALER

The following section of the Washington Administrative Code is hereby repealed:

WAC 308-33-015 REQUEST FOR EXCESS FEES.

WSR 80-15-117

PROPOSED RULES

DEPARTMENT OF LICENSING

[Filed October 22, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Licensing, intends to adopt, amend, or repeal rules concerning the practice of barbering including: examination applications, deadline, examination scoring and student training reports;

that such agency will at 2:00 p.m., Monday, December 8, 1980, in the Auditorium, Department of Social and Health Services, Office Building 2, 12th and Franklin, Olympia, Washington, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 2:00 p.m., Monday, December 8, 1980, in the Auditorium, Department of Social and Health Services, Office Building 2, 12th and Franklin, Olympia, Washington.

The authority under which these rules are proposed is RCW 18.45.056[18.15.056].

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to December 1, 1980, and/or orally at 2:00

p.m., Monday, December 8, 1980, Auditorium, Department of Social and Health Services, Office Building 2, 12th and Franklin, Olympia, Washington.

Dated: October 22, 1980

By: Jim Terhar
Assistant Administrator

STATEMENT OF PURPOSE

Agency: Department of Licensing.

Purpose: To set a fifteen day examination application deadline to amend exam scoring standards to include the average scores of all examiners if greater than the majority average; to permit re-examination by category and to revise reporting of Barber Student Training.

Statutory Authority: These rules are adopted pursuant to RCW 18.15.056.

Reason Action is Proposed: These rules will provide for greater efficiency in the conduct of the Barber's Examination and the reporting of Barber Student Training.

Rule Summary:

WAC 308-16-218 Applications for examination.

WAC 308-16-211 Scoring for practical examinations—Permit.

WAC 308-16-212 Scoring for practical examination—Journeyman.

WAC 308-16-215 Re-examination.

WAC 308-16-216 Partial re-examination.

WAC 308-16-217 Permittees—Partial examination.

Responsible Departmental Personnel: In addition to the Director, the following agency personnel have knowledge and responsibility for drafting, implementing and enforcing this rule: Irv Addato, Executive Secretary, Barber Examining Committee, Third Floor, Highways-Licenses Bldg., Olympia, WA 98504, 234-6838(SCAN), 753-6838(COMM)

Proponents: These rules were proposed by the Department of Licensing.

NEW SECTION

WAC 308-16-218 APPLICATIONS FOR EXAMINATION. Applications for examination or reexamination and licensing must be received, complete in all respects including required fees, no later than 15 days prior to the beginning date of the next scheduled examination.

AMENDATORY SECTION (Amending Order PL 193, filed 6/12/75)

WAC 308-16-211 SCORING FOR PRACTICAL EXAMINATIONS—PERMIT. All applicants at a permit barber examination must obtain a grade average of 65% in each category of the practical examination, to wit: haircutting, shaving, massaging, shampooing and conditioning of barber tools. The final score for each category will be based upon the scores given to the applicant by the majority of the examiners (~~(grading of the applicant in each category)~~) or be based upon the average of the scores of all examiners, whichever score is greater. A failure to obtain a final score of at least 65% in any one category will result in failure of the ~~((entire))~~ practical examination. In the case of a failure of the examination and upon a proper retest, the applicant

will be required to successfully perform ~~((and))~~ those categories of the practical examination in which the applicant previously failed.

Reviser's Note: RCW 34.04.058 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

Reviser's Note: The typographical errors in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

AMENDATORY SECTION (Amending Order PL 193, filed 6/12/75)

WAC 308-16-212 SCORING FOR PRACTICAL EXAMINATION—JOURNEYMAN. All applicants for a journeyman practical examination must obtain a grade average of 75% in each category of the practical examination, to wit: haircutting, shaving, massaging, shampooing and conditioning of barber tools. The final score for each category shall be based upon the scores given the applicant by the majority of the examiners (~~(grading the applicant in each category)~~) or be based upon the average of the scores of all the examiners, whichever is greater. A failure to obtain a final score of 75% in any one category will result in failure of the examination and upon proper retest, the applicant will be required to perform ~~((and))~~ those categories of the practical examination in which the applicant previously failed.

Reviser's Note: RCW 34.04.058 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

AMENDATORY SECTION (Amending Order PL 12, filed 9/12/68)

WAC 308-16-215 REEXAMINATIONS. Applicants for barber examination shall be permitted to take ~~((the entire))~~ that category of the examination, both written and practical, ((and they shall only be reexamined in either the written or practical)) which they have failed to pass: PROVIDED HOWEVER, ((That the applicants shall not be eligible for such limited reexamination if more than one barber examination has been conducted since their taking the first portions of the examination)) That all examinations shall be completed within one year of the date of original application. If more than one year has elapsed, a new application shall be submitted and all portions of the written and practical examinations successfully completed.

Reviser's Note: RCW 34.04.058 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

Reviser's Note: The typographical errors in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

AMENDATORY SECTION (Amending Order PL 14, filed 3/14/59)

WAC 308-16-216 PARTIAL WRITTEN REEXAMINATIONS. An applicant ~~((taking))~~ retaking the written barber examination, consisting of five branches, shall be reexamined only in those branches in which ~~((he))~~ s/he has failed to receive a passing grade of 75%~~((:)).~~ ~~((PROVIDED, That the applicant has passed at least three branches of the examination. PROVIDED, FURTHER, That the applicant shall not be eligible for such limited reexamination if more than one barber examination has been conducted since he passed the three or more portions of the written examination. An extension of time may be granted by the board upon a showing of good cause that the applicant was unable to attend an examination due to injury or illness.))~~

AMENDATORY SECTION (Amending Order PL 14, filed 3/14/69)

WAC 308-16-217 PERMITTEES—PARTIAL EXAMINATION. A permit barber, upon ~~((his first))~~ examination for a journeyman barber license, shall only be required to take and successfully pass the ~~((barber services practical portion of the examination. ((However, if he fails to pass that examination, then it will be necessary to successfully pass both the barber services portion and the written branches of the barber examination before being granted a barber license.))~~

Reviser's Note: RCW 34.04.058 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

Reviser's Note: The typographical errors in the above section occurred in the copy filed by the agency and appear herein pursuant to the requirements of RCW 34.08.040.

AMENDATORY SECTION (Amending Order PL 172, filed 6/20/74)

WAC 308-16-390 BARBER STUDENT CURRICULUM. (1) The curriculum to be followed by all licensed barber schools or colleges will consist of not less than one hundred and sixty hours of classroom theory instruction and not less than one thousand and eighty-eight hours of floor instruction and practice. Theory subjects or categories as identified herein are taken from the latest revised edition of the Standardized Textbook of Barbering, published by the Associated Master Barbers and Beauticians of America.

(2) The following minimum classroom instructional hours will be given to each student attending a barber school or college:

STANDARDIZED TESTBOOK SUBJECTS

Preface, History of Barber Profession Ethics and Business Attitudes	1 hour
Implements of Barber Profession	1 hour
Honing and Stropping	2 hours
Hygiene, Sanitation	2 hours
Shaving	4 hours
Haircutting and Styling Basic, razor, long, ladies, black	20 hours
Shampoo, Hair Tonic, Scalp Massage Services	4 hours
Facials, Massages	8 hours
Hair Relaxing	6 hours
Hair Replacement	6 hours
Men's Hair Coloring	6 hours
Beard, Goatee, Mustache Designing	2 hours
Recognizing, Conditioning Damaged Hair	10 hours
Bacteriology, Sterilization	4 hours
The Skin and Its Appendages	24 hours
Hair, Scalp and Skin Ailments	12 hours
Cosmetics and Their Chemistry	12 hours
Light Therapy, Electricity	1 1/2 hours
Syphilis	4 hours
Circulation	4 hours
Digestion	4 hours
Anatomy and Physiology of Cells	4 hours
Bones of the Head	3 hours
Muscles	4 hours
Nervous System	4 hours
Barber Boards	1/2 hour
Shop Management and Ownership	5 hours
Merchandising and Shop Layout	1 hour
Barber Stylist and his Business	1 hour
TOTAL	160 hours

(3) During the floor instruction and practice phase of the barber course, the following minimum hours of instruction will be given or the student supervised in performing functions as follows:

INSTRUCTIONS OR FUNCTIONS

Care, Use and Handling Implements	50 hours
Honing and Stropping	50 hours
Haircuts	800 each
Shaves	75 each
Shampoos and Tonics	100 each
Sanitation - Sterilization	20 hours
Massage and Massage Services	100 each
Facials	100 each
Shampoos and Scalp Treatments	100 each
Hair Coloring	10 each
Shop Management	20 hours

(4) ((A monthly record of each student's training will be maintained and reported to the director on the forms as provided by him to each barber school or college.) Each licensed barber school or barber college shall record registered students' hours and requirements monthly on forms provided by the director. All original copies of the monthly record of student hours and requirements shall be retained in the school files so long as the student is registered and undergoing instruction in that school or college with the exception of a final report which shall be taken to examination. The original final report shall be submitted to the examining committee and a copy retained by the school or college. All reports shall be made available by the school at the request of students, barber executive secretary or authorized representatives. In case of separation or transfer of students, schools/colleges shall report the instructional hours and requirements to the director within ten (10) days following the student's separation or transfer. In all cases, only instructor operators or managers and the individual students shall attest to the correctness of monthly reports. A duplicate copy of the student's monthly instructional report shall be furnished to the student at the completion of each month.

Reviser's Note: RCW 34.04.058 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

**WSR 80-15-118
PROPOSED RULES
DEPARTMENT OF LICENSING
[Filed October 22, 1980]**

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Licensing, intends to adopt, amend, or repeal rules concerning the practice of cosmetology including the demonstration of cosmetics without a license; recording student hours; out of state applicant proceedings and water supply in licensed shops and schools;

that such agency will at 10:00 a.m., Monday, December 8, 1980, in the Auditorium, Department of Social and Health Services, Office Building No. 2, 12th and Franklin, Olympia, Washington, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 10:00 a.m., Monday, December 8, 1980, in the Auditorium, Department of Social and Health Services, Office Building No. 2, 12th and Franklin, Olympia, Washington.

The authority under which these rules are proposed is RCW 18.18.020.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to December 1, 1980, and/or orally at 10:00 a.m., Monday, December 8, 1980, Auditorium, Department of Social and Health Services, Office Building No. 2, 12th and Franklin, Olympia, Washington.

Dated: October 22, 1980

By: Jim Terhar

Assistant Administrator

STATEMENT OF PURPOSE

Agency: Department of Licensing.

Purpose: To limit the demonstration of cosmetic item exemption to original retail sales; to eliminate submission of monthly student reports and substitute a final reporting requirement to reclassify "reciprocity" applicants as "out of state" applicants and to require that sanitary hot and cold running water be provided in the shampoo area dispensary and in toilet facilities of licensed cosmetology shops and schools.

Statutory Authority: These rules are adopted pursuant to RCW 18.18.020.

Reason Action Is Proposed: These rules are being filed to clarify current terminology or to improve procedural requirements.

Rule Summary:

WAC 308-24-305 Demonstrations and contests.

WAC 308-24-320 Recording student hours.

WAC 308-24-403 Licensing out of state applicants without examination.

WAC 308-24-404 Licensing out of state applicants with examination.

WAC 308-24-430 Standard requirements for maintenance and operation of licensed shops or schools.

Responsible Departmental Personnel: In addition to the Director, the following agency personnel have knowledge and responsibility for drafting, implementing and enforcing this rule: Dee Spice, Executive Secretary, Business and Professions Administration, Third Floor, Highways-Licenses Building, Olympia, WA 98504, 234-3834(SCAN), 753-3834(COMM)

Proponents: These rules were proposed by the Department of Licensing.

AMENDATORY SECTION (Amending Order PL 279, filed 12/19/77)

WAC 308-24-305 DEMONSTRATIONS AND CONTESTS.

(1) Any person who represents a manufacturer, wholesaler, retailer or distributor and who for the purpose of advertising, promoting or selling any cosmetology lotion, compound, preparation, substances, equipment or supplies, may perform demonstrations of the use of application of the item, incident to the original, retail sale of the item, provided that if a person is to be used as a model, then such person must:

- (a) Voluntarily agree to serve as a demonstration model; and
- (b) Not be subject to any charge or fee for such demonstration.

However, if the demonstrator does not hold a Washington state cosmetology instructor operator license, then any such demonstration in a

cosmetology school must be performed in the presence of and under the direct supervision of a duly licensed Washington state cosmetology instructor operator.

(2) A licensee, or person who does not hold a Washington state cosmetology license, may demonstrate equipment, materials, products, hairstyling, hairwaving, or haircutting in conjunction with any state-wide or regional cosmetology or hairdressing trade show provided:

(a) The demonstration is confined to the explanation or application of cosmetics, hair products, hairstyling, haircutting or other aspects of the cosmetology industry, and,

(b) The cosmetology or hairdressing trade show is conducted or designed primarily for the benefit of licensed cosmetologists or others qualified in the profession, and

(c) If the demonstration requires the use of a person as a model, then the person servicing as a model must:

- (i) Voluntarily agree to serve as a demonstration model, and
- (ii) Not be subject to any charge or fee for such demonstration.

(3) State-wide or regional contests or competition, involving a branch of cosmetology, may be conducted in places other than licensed cosmetology schools or shops, provided:

(a) The contest or competition is held for the primary purpose of generating interest in and enhancing the cosmetology profession; and,

(b) All contestants are currently licensed as cosmetologists or registered as cosmetology students; and,

(c) The general safety and sanitation regulations governing schools and shops are met; and,

(d) If the contestants are required to use a person to serve as a model, then such person must:

- (i) Voluntarily agree to serve as the contestant's model; and,
- (ii) Not be subject to any charge or fee for the services received from the contestant.

(4) Persons or firms desiring to conduct demonstrations other than those authorized by WAC 308-24-305(1) and (2) may request the director's approval of such demonstrations. Request must be made in writing to the director at least thirty days prior to the planned demonstration date, indicating the time, place, purpose and conduct of such demonstration.

Reviser's Note: RCW 34.04.058 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

AMENDATORY SECTION (Amending Order PL 279, filed 12/19/77)

WAC 308-24-320 RECORDING STUDENT HOURS. (1) Each licensed school shall ~~((report))~~ record registered students' instructional hours and requirements monthly on forms provided by the director. ~~((Such reports shall normally be submitted to the director no later than the 10th of the month following the month during which earned.))~~ All original copies of the monthly reports of students' hours and requirements shall be retained in the school files so long as the student is registered and undergoing instruction in that school, with the exception of the original final report which is taken to examination. The original shall be submitted to the examining committee and a copy retained by the school. All retained reports will be made available by the school at the request of students, cosmetology executive secretary or authorized representatives. In case of separation or transfer of students, schools shall report the instructional hours and requirements earned not later than 10 days following the date of student's separation or transfer from the school.

(2) Only instructor operators or managers and the individual students will attest to the correctness of the monthly reports ~~((submitted to the director))~~.

(3) Fractional hours, if recorded on the monthly reports shall be in increments of no less than 15 minutes, i.e., 1/4, 1/2, 3/4 hours or 15, 30 or 45 minutes.

(4) ~~((Duplicate copies of the monthly reports of students' hours shall be retained in the school files so long as the student is registered and undergoing instruction in that school. These retained copies will be made available for inspection, by the school and upon request of students or state inspector representatives.))~~ No student will be given credit for more than eight hours of instruction in any one day.

(5) A duplicate copy of the student's monthly instructional ~~((hour))~~ report will be furnished to the student at the ~~((time it is submitted to the department))~~ completion of each month.

(6) ~~((No student may be given credit for more than eight hours of instruction in any one day.))~~ At the time of application for examination, the school shall submit a report of hours and requirements to date of application for each candidate. Such report to be submitted with list of all candidates, completed application and proper fee.

Reviser's Note: RCW 34.04.058 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

AMENDATORY SECTION (Amending Order PL 319, filed 11/8/79)

WAC 308-24-403 LICENSING ((THROUGH RECIPROCI-
TY)) OUT OF STATE APPLICANTS WITHOUT EXAMINA-
TION. (1) Applicants may be issued a license as a cosmetology operator, manager operator, instructor operator, manicurist manager operator, or manicurist without examination provided their qualifications, training and experience obtained in any state, territory, possession or foreign country are substantially equal to the prerequisites for such licensing in the state of Washington. Applicants seeking license ~~((through reciprocity))~~ must submit the following for review and determination as to whether they meet the licensing requirements of this state:

(a) Complete application form and fee.

(b) Certification by the state or country as to: The professional training or schooling obtained; results of any examination for licensing; and, the record of any cosmetologist, hairdressing or manicurist license issued to applicant and the period such license was active or valid.

(c) Evidence of graduation from an accredited high school or, in the case of foreign schooling, evidence of completion of a course of instruction equivalent to a high school education in the United States. Applicants who have not graduated from high school, or an equivalent foreign school, may submit evidence of GED test scores as substitute support for the high school graduation requirement.

(d) Summary of all cosmetology work experience acquired by applicant since first obtaining a cosmetology license.

(2) When determining whether ~~((reciprocity))~~ applicants meet the training requirements (2000 hours for cosmetology operator or 500 hours for manicurist) the committee will generally recognize hour-for-hour training and will give credit for 100 training hours for each three months of full time employment as a licensee outside the state of Washington, provided such experience was obtained within two years prior to the date of application.

(3) Each applicant for licensing ~~((through reciprocity))~~ without examination may be required to appear before a member of the examining committee for the purpose of confirming or ascertaining that all requirements for licensing have been met and that the individual is sufficiently knowledgeable of Washington state's cosmetology licensing act and the rules and regulations adopted thereunder.

(4) Individuals that claim training and experience was acquired in a foreign country and who support their application with evidence of certifications as set forth above will be required to furnish an official English language transcript of such documents, at their own expense. Additionally, such individuals may be tested by the committee member to determine if the applicant has the ability to read, write and understand basic English language.

Reviser's Note: RCW 34.04.058 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

AMENDATORY SECTION (Amending Order PL 279, filed 12/19/77)

WAC 308-24-404 LICENSING ((THROUGH RECIPROCI-
TY)) OUT OF STATE APPLICANTS WITH EXAMINATION. (1) ~~((Reciprocity for these applicants will be limited to t))~~ Those individuals seeking licensing who have only partially met the required professional training or experience requirements of this state may be required to take the practical and/or written examination normally required for the type of licensing applied for.

(2) These applicants will normally be given the same credit for training and experience as set forth in WAC 308-24-403 ~~((above))~~. However, because of failure to fully meet state standards the examining committee will then determine if additional training ~~((is required~~

~~or if applicant may take the examination for licensing)) and/or exam-
ination is required.~~

AMENDATORY SECTION (Amending Order PL 319, filed 11/8/79)

WAC 308-24-430 STANDARD REQUIREMENTS FOR MAINTENANCE AND OPERATION OF LICENSED SHOPS OR SCHOOLS. (1) Water supply. An adequate supply of hot and cold running water of safe, sanitary quality must be provided in shampoo area, dispensary and in toilet facilities in licensed premises.

(2) Waste disposal. Waste water from fixtures must be discharged into sewers where available, or suitable facilities must be installed in accordance with ordinances or rules and regulations as prescribed by the local health offices.

(3) Plumbing. Plumbing fixtures shall be of impervious material and of a type which is readily accessible for cleaning. They shall be installed in accordance with the plumbing ordinances of the area and installed so as not to constitute a cross connection.

(4) Floors. They shall consist of hardwood, tile or composition, or be suitably covered and be maintained in good repair, provided that such covering or surface shall be free from cracks, holes, and crevices which may collect dirt and hair. There shall be no accumulation of dust or dirt on floors. Hair droppings shall be removed immediately after completion of each haircut.

(5) Walls, ceilings, and fixtures. Ceilings and walls shall be kept in good repair and clean at all times. Shelves, furniture and fixtures shall be kept clean and free of dust, dirt and hair droppings.

(6) Lighting. Lighting fixtures shall be in sufficient number and properly placed so as to provide adequate lighting on all working surfaces. This lighting may be obtained by either natural or artificial light or a combination of both. Light fixtures shall be washed at sufficient intervals to be kept clean.

(7) Cabinets. Cabinets shall be provided for storage of clean linen and towels. These shall have tight fitting doors and shall be kept closed to protect the linen and towels from dust and dirt.

(8) Receptacle for used towels. A covered receptacle (need not be air tight) which can be readily emptied and cleansed shall be provided exclusively for soiled towels and linen.

(9) Refuse. Each work station shall have a waste basket or similar container that must be emptied and cleansed daily.

(10) Garbage disposal. All garbage shall be kept in a covered container and disposed of at frequent intervals so as not to create an unsanitary condition.

(11) Brushes, combs, and implements. Brushes, combs, shears, clippers and other implements shall be thoroughly cleansed and sanitized after each patron. Hair must be removed before sanitizing.

(12) Protective papers and linens. A clean towel, not previously used for any purpose since laundering shall be placed on the head rest of facial chairs before any patron reclines in that chair. A clean towel will be placed between the head and shampoo bowl when a patron is reclined in the chair for shampooing. A paper strip or clean towel shall be placed completely around the neck of each customer before any apron or hair cloth or any other protective device is fastened around the neck.

(13) Towels. Towels and other linens used in any licensed shop or school shall be washed after every use. A clean towel shall be used for each patron. Towels shall not be washed and dried on the premises except in suitable automatic washers and dryers. Drying towels on lines in shops or schools is prohibited. If towels are self-laundered in suitable automatic washers and dryers, sufficient hot water, detergent, and bleaching agents are to be used for each washing.

(14) Creams, lotions, and fluids. Individual amounts of lotion must be poured into a clean container and applied with individual pieces of clean gauze or cotton. Creams and other semi-solid substances must be removed from the container with a spatula. Powder must be applied to patrons from bottles or dispenser. Use of brush for dusting powder is prohibited. Waving fluids shall be dispensed from suitable containers in a manner which prevents contamination of unused fluid. All containers must be covered when not in use and maintained in a clean dust-free manner.

(15) Hair nets, clippies, etc. Hair nets, clippies, pins, rollers, etc., must be washed in a warm detergent solution and kept in a clean, dust-proof storage cabinet when not in use.

(16) Permanent waving. Permanent wave end papers and neck strips must not be reused. All permanent wave rods and supplies shall be thoroughly cleaned and stored in a covered container when not in use.

(17) Toilet facilities. Every licensed shop and school shall provide adequate toilet facilities for the use of its customers, employees and/or students. Separate toilet facilities for men and women will be maintained within each licensed school. Toilet facilities will be maintained within each licensed shop or adjacent thereto ("Adjacent thereto" is defined to mean: In a commercial building — on the same floor and within a reasonable distance; or in a residence — in close proximity to the shop and within the residential structure). The toilet rooms shall have a commode, lavatory (~~with hot and cold running water~~), soap dispenser, single service sanitary towels and waste basket. The rooms shall be lighted and ventilated. Toilet rooms and fixtures shall be kept clean and in good repair.

(18) Ventilation. All rooms in licensed shops or schools must have good ventilation. Where no windows are available for ventilation, there must be mechanical means for proper ventilation.

(19) Fixtures. Equipment in licensed shops or schools shall be of professional quality and kept immaculately clean.

(20) Dispensary. In each licensed shop or school there shall be a designated, separate and appropriate area for purposes of storing and dispensing cosmetic, manicuring or hairdressing supplies. This area will also contain the necessary facilities, (~~or~~) equipment and sink required for the cleansing and sanitizing of brushes, combs, rollers, pins, clippings and such other type equipment or implements.

(21) Work stands. Work stands shall be maintained in a neat, orderly manner. Equipment which has been used shall not be left lying on the work stand, but shall be placed in a container for items to be washed and sanitized. Storage drawers in work stations shall be lined with a washable or disposable material and kept free of hair and in a clean, sanitary condition.

(22) Wet sterilizer. The container must be filled with sufficient sterilizer fluid to completely cover all articles placed therein for sanitizing. Fresh solution to be made daily.

(23) Shampoo bowls. Shall be cleansed immediately after use, including removal of loose hair from trap, and tints and dyes when spilled.

(24) Pets. Except for "seeing-eye" animals accompanying in patrons, dogs, cats or pets of any kind shall not be allowed in a licensed shop or school.

(25) Booths. Licensees electing to rent or lease booths or other defined areas within their licensed shop, have the primary and direct responsibility of ensuring that all such individuals (to whom they rent or lease space) while performing services within the licensee's shop:

(a) Hold the appropriate and current license issued by the state of Washington that authorized the person to perform the services being offered to the public; and

(b) Complying with all other provisions of the law regulating the practice of cosmetology, hairdressing or manicuring (chapter 18.18 RCW) and the rules adopted thereunder (chapter 308-24 WAC).

(26) If a licensed cosmetology school is operated in connection with another business, it must be separated by solid floor-to-ceiling partition.

Reviser's Note: RCW 34.04.058 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

**WSR 80-15-119
PROPOSED RULES
SUPERINTENDENT OF
PUBLIC INSTRUCTION**

[Filed October 22, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Superintendent of Public Instruction, intends to adopt, amend, or repeal rules concerning the limitation of dollar amount of school district excess general fund property tax levies;

that such agency will at 9:00 a.m., Tuesday, November 25, 1980, in the Old Capitol Building,

Washington and Legion, Deputy Superintendent's Conference Room, Room 203, Olympia, Washington, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 11:00 a.m., Wednesday, November 26, 1980, in the Executive Services Conference Room, Old Capitol Building, Washington and Legion, Olympia, Washington.

The authority under which these rules are proposed is RCW 84.52.0531.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to November 25, 1980, and/or orally at 9:00 a.m., Tuesday, November 25, 1980, same location as shown above.

Dated: October 22, 1980

By: Frank B. Brouillet
Superintendent of Public Instruction

STATEMENT OF PURPOSE

Rule Title: Chapter 392-139 WAC Finance—Maintenance and operation levy limits.

Statutory Authority: RCW 84.52.0531.

Rule Purpose and Summary: To update and clarify the process for annually establishing the maximum dollar amount of an excess general fund maintenance and operation levy by a school district, including, but not limited to, general provisions for establishing the maximum excess general fund levy amount, definitions, determinations of the maximum amount attributable to basic education allocations and additional allowances, and repeal of chapter section rules displayed in a definition and form format as replaced in this filing by a narrative format.

Statement of Reasons Supporting Proposed Action: Rules update and facilitates understanding of process and reflects statutory revisions.

Necessary As Result of Federal Law ___ Federal Court Action ___ State Court Action ___ (attached copy of law or decision) [No information supplied by agency] Person/Organization Proposing Rule: Frank B. Brouillet, Superintendent of Public Instruction, Old Capitol Building, Olympia, 753-6717

Private ___ Public ___ Governmental X

Responsible Agency Personnel: Name(s): Chas. A. McNurlin, Assistant Superintendent

Office: Division of Financial Services, Room 103

Telephone: 753-6742

AMENDATORY SECTION (Amending Order 13-78, filed 12/8/78)

WAC 392-139-005 PURPOSE. The purpose of WAC 392-139-010 through (~~392-139-045~~) 392-139-036 is to establish the exclusive means for fixing the maximum dollar amount of taxes which may

be levied on property and collected ((m)) on behalf of any school district in a given tax year for general fund maintenance and operation purposes pursuant to RCW 84.52.053 and 84.52.0531. These rules shall be effective for calculation of taxes collected in 1981 and thereafter.

AMENDATORY SECTION (Amending Order 13-78, filed 12/8/78)

WAC 392-139-010 ESTABLISHMENT OF THE MAXIMUM DOLLAR AMOUNT OF SCHOOL DISTRICT LEVIES—GENERAL. (1) Notwithstanding such larger dollar amount as may be approved by the electorate of a school district pursuant to RCW 84.52.053, the maximum dollar amount which may be levied and collected by or for any school district for general fund maintenance and operation support in a given tax year ((or in a given school year, as the case may be;)) shall be established annually as follows:

(a) Only figures and data gathered and approved by the superintendent of public instruction, or his or her designee, shall be used.

(b) ((Approved current information and data shall be applied to Schedules I, H, III, IV, V and VI of the Form F-780 as set forth in WAC 392-139-020 through 392-139-045 in order to compute the permissible dollar amount that may be levied by or for a school district.)) Pursuant to this chapter, the division of financial services, superintendent of public instruction, shall annually during the month of September compute and notify school districts of the maximum excess general fund property tax levy capacity of each school district for taxes to be collected during the immediate succeeding calendar year. All definitions of time periods are used in this chapter in the context of such annual September action.

(c) ((The official maximum dollar amount for a given tax year shall be the amount computed by the superintendent of public instruction, or his or her designee, as of the September immediately preceding the tax year of collection.))

(d) Notice of the levy amount for each school district arrived at pursuant to this ((section)) chapter shall be provided to each affected school district ((and)), county assessor and ((auditor)) chairman of the board of county commissioners prior to ((October 1 of each year)) the date specified in RCW 84.52.020.

(2) The superintendent of public instruction, or his or her designee, shall annually provide all districts with the appropriate calculation procedures for the purposes of this ((section)) chapter.

NEW SECTION

WAC 392-139-016 DEFINITIONS. As used in this chapter, the terms:

(1) "Accounts 1000, 1030, 1040 and 3170" shall mean general fund revenue classifications as designated in Form F-195 (school district annual budget) published and distributed by the superintendent of public instruction as follows: Account 1000—total local property tax revenue; Account 1030—local property taxes collected from excess levies; Account 1040—joint district local property taxes collected from excess levies; and Account 3170—timber excise tax Fund A.

(2) "County assessor's report" shall mean the report completed by county assessors each year depicting the basic assessed valuation, regular levy senior citizen exemption, one hundred percent timber roll, excess general fund levy senior citizen exemption, and total assessed valuation data for individual school districts. County assessors provide these data annually to the superintendent of public instruction via Report 1038S.

(3) "County treasurer's monthly report" shall mean the financial statement issued to the school districts by the county treasurers each month from September through August. This report includes data concerning the school district general fund consisting of beginning and ending cash balances, investment income and expenditure, warrants outstanding, revenues in the form of cash increases credited to the various accounts and the current balance of the general fund. To determine the prior year's local property tax, joint district property tax and timber tax collections for calculating a school district's additional levy authority, cash increase data are reported in items 20, 21, 22, 23, 24, 25 and 35 of this report.

(4) "F-195" (the budget for fiscal year 19__-__) shall mean the annual school district budget document officially adopted by each school district pursuant to chapter 28A.65 RCW for each year's operations. This document contains estimates of revenues to be received from state sources and excess general fund levy revenues to be collected during the school year.

(5) "R-1191" (estimated funding required to guarantee one hundred percent of basic education allocation for 19__-__ school year) shall mean the monthly report prepared and distributed by the superintendent of public instruction which includes the number of basic education allocation formula derived certificated and classified staff units, the compensation entitlement amounts for such staff, the basic education allocation provided for each average annual full-time-equivalent student, the basic education allocation, the amount of state-funded support and any final adjustments made for the current school year for each school district. These data are used to calculate the basic levy limitation amount pursuant to WAC 392-139-021 and the additional levy capacity, if any, pursuant to WAC 392-139-026 for calendar year tax collections.

(6) "R-1191E" (full-time enrollments used to calculate staff units) shall mean the report prepared and distributed by the superintendent of public instruction which includes the number of basic certificated, formula certificated and formula classified staff units computed on the basis of the number of students enrolled in a school district as reported by the district converted to full-time-equivalent (FTE) students. The enrollment data are reported for each of the following grade levels: Kindergarten, grades 1-6, 7-8, and 9-12, excluding secondary vocational students. Vocational secondary FTE students are reported separately for private and public schools. The staff unit calculations provide for an additional number of certificated units due to a significant decrease in student enrollment as provided in the biennial appropriations acts.

(7) "R-1197" (statement of apportionment) shall mean the monthly report prepared and distributed by the superintendent of public instruction which includes the annual allotment of state funds to each school district for each of the state-funded programs which the district operates.

(8) "Spring tax collection percentage" shall mean that portion of property tax payments received by county treasurers for each school district from February 1 through August 31 expressed in terms of a percent. The superintendent of public instruction shall determine an average tax collection percentage based on a three-year period of tax collections. If a school district requests that the superintendent of public instruction review the tax collection percentage, the superintendent may choose another tax collection period on which to base the tax collection percentage.

(9) "Fall tax collection percentage" shall mean that portion of property tax payments received by county treasurers for each school district from September 1 through January 31 of the next ensuing year expressed in terms of a percent. The superintendent of public instruction shall determine an average tax collection percentage based on a three-year period of tax collections. If a school district requests that the superintendent of public instruction review the tax collection percentage, the superintendent may choose another tax collection period on which to base the tax collection percentage.

(10) "Total property tax collections" shall mean all property tax payments received by county treasurers for each school district from February 1 through January 31 of the next ensuing year. The sum of the spring tax collection percentage and the fall tax collection percentage shall always equal one hundred percent.

NEW SECTION

WAC 392-139-017 ADDITIONAL DEFINITIONS. As used in this chapter, the terms:

(1) "P-213" shall mean the form entitled Report of High School Students Residing in Nonhigh Districts. The P-213 is printed and distributed annually by the superintendent of public instruction to school districts educating students residing in other school districts not maintaining an educational program for grades seven through twelve. Data from this report are used to determine, in part, the amount of excess general fund levy capacity which shall be transferred from the nonresident high school district to the resident nonhigh school district pursuant to WAC 392-139-036.

(2) "P-223NR" shall mean the form entitled Monthly Report of School District Enrollment of Nonresident Students Enrolled in an Approved Interdistrict Cooperative. The P-223NR is printed and distributed annually by the superintendent of public instruction to school districts educating students residing in other school districts. Data from this report are used to determine the authorized levy capacity to be shifted from the nonresident school district to the resident school district.

(3) "Basic education allocation" shall mean the amount of state funds calculated by the superintendent of public instruction which is

the basis for the superintendent to distribute funds to school districts for the operation of a basic program of education pursuant to RCW 28A.58.750, et seq., 28A.41.130, 28A.41.140 and chapter 392-121 WAC. This amount is also known as the total guaranteed entitlement for basic education. In cases where a school district operates more than one small high school, the basic education allocation shall be increased by the amount calculated pursuant to the small high school formula set forth in the biennial appropriations act for each of the high schools.

(4) "Average annual full-time equivalent (AAFTE)" shall have the same meaning as this term is given in WAC 392-121-105.

(5) "Enrollment decline" shall have the same meaning as this term is given in WAC 392-121-105.

(6) "Current school year" shall mean the school year which is in session at the time the levy limitation calculations are made pursuant to this chapter and county commissioners certify to the county assessors the amount of taxes to be levied on property pursuant to RCW 84.52.070.

(7) "Prior school year" shall mean the school year immediately preceding the current school year.

(8) "Next tax collection year" shall mean the immediate succeeding calendar year referenced in WAC 392-139-010(1)(b).

(9) "Current tax collection year" shall mean the current calendar year.

(10) "Mandated restricted cash" shall mean an amount of funds from excess general fund levy collections in the fall of calendar year 1979 equal to eight percent of the school district's 1979-80 basic education allocation multiplied by the district's fall tax collection percentage rate or the amount of the district's fall 1979 collections, whichever is less, which shall be held in an unencumbered status for expenditure for excess general fund levy relief in a subsequent school year pursuant to section 107, chapter 270, Laws of 1979 extraordinary session (the biennial appropriations act).

NEW SECTION

WAC 392-139-018 ADDITIONAL DEFINITIONS. As used in this chapter, the terms:

(1) "Account 3020" shall mean the school district general fund budget classification in which are recorded state funds received by school districts for reimbursement for operation of a student transportation program approved by the superintendent of public instruction pursuant to RCW 28A.41.160 and chapter 392-141 WAC.

(2) "Account 3021" shall mean the school district general fund budget classification in which are recorded state funds received by school districts for reimbursement for cost of depreciation of transportation equipment pursuant to RCW 28A.41.160 and chapter 392-141 WAC.

(3) "Account 3030" shall mean the school district general fund budget classification in which are recorded state funds received by school districts for the operation of a program to educate handicapped students, such program approved by the superintendent of public instruction pursuant to chapter 28A.13 RCW, RCW 28A.41.053 and chapter 392-171 WAC.

(4) "Account 3220" shall mean the school district general fund budget classification in which are recorded state funds received by school districts for the operation of urban, rural, racial, disadvantaged (URRD) educational programs pursuant to RCW 28A.41.270 and chapter 392-161 WAC.

(5) "Account 3243" shall mean the school district general fund budget classification in which are recorded state funds which a school district receives for the operation of an education program for gifted students, such program approved by the superintendent of public instruction pursuant to RCW 28A.16.020 and WAC 180-68-100.

(6) "Account 3244" shall mean the school district general fund budget classification in which are recorded state funds received by a school district for the operation of a remedial assistance program pursuant to RCW 28A.41.404 and WAC 392-161-170, et seq.

(7) "Account 3245" shall mean the school district general fund budget classification in which are recorded state funds received by a school district for the operation of a transitional bilingual instruction program pursuant to RCW 28A.58.810 and chapter 392-160 WAC.

NEW SECTION

WAC 392-139-021 DETERMINATION OF EXCESS GENERAL FUND LEVY CAPACITY ATTRIBUTABLE TO BASIC EDUCATION ALLOCATION. The dollar amount of each school district's general fund excess levy authorized for the next tax collection

year shall be determined by multiplying the prior school year's basic education allocation as of August 31 by ten percent.

NEW SECTION

WAC 392-139-026 DETERMINATION OF ADDITIONAL EXCESS GENERAL FUND LEVY CAPACITY. (1) General. The dollar amount of each school district's general fund excess levy authorized for the next tax collection year may be increased over the amount determined in WAC 392-139-021 to the extent that the total of the estimated basic education allocation for the current school year as of August 31, plus the estimated current school year general fund excess levy property tax collections which would otherwise be placed in accounts 1000 and 3170 as limited pursuant to WAC 392-139-021, plus the mandated restricted cash, is less than the estimated potential current school year dollar level for basic education as established in subsection (2) of this section.

(2) Establishment of a school district's potential current school year dollar level for basic education for purposes of additional excess general fund levy capacity. The establishment of the potential current school year dollar amount for purposes of determining whether or not a school district is authorized additional general fund excess levy capacity shall be calculated as follows:

(a) Determine the district's current school year dollar level per student by dividing the total of amounts in prior school year general fund revenue accounts 1000 and 3170 plus prior school year basic education allocation as of August 31 less mandated restricted cash by the prior school year's AAFTE and multiplying the quotient obtained by one hundred six percent.

(b) Determine the district's potential aggregate current school year dollar level by:

(i) Multiplying the district's estimate of current school year's AAFTE by current school year dollar level per student calculated in (a) of this subsection;

(ii) Multiplying the enrollment decline students by the total obtained by adding the prior school year's dollar amounts in general fund revenue accounts 1000 and 3170 plus the prior school year's basic education allocation as of August 31 less the mandated restricted cash; and

(iii) Adding the products obtained in (i) and (ii) above.

(c) Determine the district's current school year revenue level in relevant budget accounts without funds from additional levy capacity calculated pursuant to this section by combining the district's estimated total dollars in the current school year's general fund revenue accounts 1000 and 3170 with the district's estimate of current school year basic education allocation as of October 1 and the mandated restricted cash.

(d) Determine the district's additional potential current school year dollar level by subtracting the total obtained in (c) of this subsection from the total obtained in (b) of this subsection.

(e) Determine the district's additional excess general fund levy capacity, if any, by dividing the amount obtained in (d) of this subsection, if greater than zero, by the spring tax collection percentage.

NEW SECTION

WAC 392-139-031 DETERMINATION OF EXCESS GENERAL FUND LEVY CAPACITY ATTRIBUTABLE TO STATE-FUNDED CATEGORICAL PROGRAMS. The dollar amount of each school district's general fund excess levy authorized for the next tax collection year pursuant to this chapter shall be determined by summing the prior school year's allocations made from the state general fund to the school district by the superintendent of public instruction in school district general fund revenue accounts 3020, 3021, 3030, 3220, 3243, 3244 and 3245 as reported on the August 31 R-1197 and multiplying the total obtained by ten percent.

NEW SECTION

WAC 392-139-036 DETERMINATION OF EXCESS GENERAL FUND LEVY CAPACITY TO BE TRANSFERRED FROM THE NONRESIDENT SCHOOL DISTRICT TO THE RESIDENT SCHOOL DISTRICT. In cases where a student resides in one school district (resident school district) but attends school in another school district (nonresident school district) pursuant to chapter 28A.44 RCW, RCW 28A.58.075 or 28A.58.245 and chapter 392-135 WAC, the nonresident school district's excess general fund levy capacity for the

next tax collection year shall be reduced and the resident school district's general fund excess levy capacity for the next tax collection year shall be increased by the same amount which shall be determined as follows:

- (1) Determine the nonresident school district's prior school year basic education allocation per AAFTE as of August 31.
- (2) Multiply the amount obtained in subsection (1) of this section by ten percent.
- (3) For each AAFTE student enrolled in a nonresident school district, deduct the amount obtained in subsection (2) of this section from the nonresident school district's excess general fund levy capacity for the next tax collection year and add that same amount to the resident school district's excess general fund levy capacity for the next tax collection year.

REPEALER

The following sections of the Washington Administrative Code are repealed:

- (1) WAC 392-139-015 DEFINITIONS.
- (2) WAC 392-139-020 SCHEDULE I—CALCULATION OF BASIC LEVY LIMITATION FOR CALENDAR YEAR 19__.
- (3) WAC 392-139-025 SCHEDULE II—CALCULATION OF ADDITIONAL LEVY AUTHORITY (EXCEEDING BASIC LEVY LIMITATION FOR 19__ CALENDAR YEAR).
- (4) WAC 392-139-030 SCHEDULE III—PRIOR YEAR 100% FORMULA FUNDING.
- (5) WAC 392-139-035 SCHEDULE IV—ESTIMATED CURRENT YEAR BASIC EDUCATION FUNDING.
- (6) WAC 392-139-040 SCHEDULE V—SMALL SCHOOL FACTORS.
- (7) WAC 392-139-045 SCHEDULE VI—SMALL HIGH SCHOOL FACTORS.

**WSR 80-15-120
PROPOSED RULES
UTILITIES AND TRANSPORTATION
COMMISSION
[Filed October 22, 1980]**

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Washington Utilities and Transportation Commission, intends to adopt, amend, or repeal rules concerning Cause No. TV-1383, the amending of WAC 480-12-445 relating to information to shippers provided by carriers of household goods. Written and/or oral submissions may also contain data, views, and arguments concerning the effect of the amendments on economic values, pursuant to chapter 43.21H RCW and WAC 480-08-050(17);

and that the adoption, amendment of repeal of such rules will take place at 8:00 a.m., Wednesday, November 26, 1980, in the Commission's Conference Room, Seventh Floor, Highways-Licenses Building, Olympia, Washington.

The authority under which these rules are proposed is RCW 80.01.040 and 81.80.290.

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to November 26, 1980, and/or orally at 8:00 a.m., Wednesday, November 26, 1980, Commission's Conference Room, Seventh Floor, Highways-Licenses Building, Olympia, Washington.

Dated: October 22, 1980
By: David Rees
Secretary

STATEMENT OF PURPOSE

Amendment of WAC 480-12-445 is proposed on this date as a permanent rule of the Washington Utilities and Transportation Commission.

WAC 480-12-445, as amended, conforms the information required to be given to shippers of household goods by carriers of household goods to the provisions of the tariffs governing transportation of household goods with respect to carrier liability for loss or damage. The Commission in Cause No. TV-955 accepted the proposal of the Household Movers Conference providing for a maximum liability for loss or damage of either a lump sum value declared by the shipper or an amount equal to \$1.25 times the actual weight in pounds of the shipment, whichever is greater, if the shipper did not expressly release the shipment to a value of 60 cents per pound per article. The amendment to WAC 480-12-445 implements the provisions of this order.

David Rees, Secretary, Seventh Floor, Highways-Licenses Building, Olympia, Washington (telephone number (206) 753-6420), and members of his staff, were responsible for drafting the amended rule and are responsible for implementation and enforcement of the amended rule.

The proponent of the rule is the Washington Movers Conference, on behalf of its member carriers engaged in transportation of household goods for hire in the State of Washington. There are no opponents of the rule who are known to the Commission.

There are no comments or recommendations by the Commission regarding statutory language, implementation, enforcement, and fiscal matters pertaining to the rule.

No federal law or federal or state court action is relied on as showing necessity for the amendment of WAC 480-12-445.

This certifies that copies of this statement are on file with the Commission and available for public inspection and that three copies of this statement are this date being forwarded to the secretary of the senate and three copies to the chief clerk of the house of representatives.

AMENDATORY SECTION (Amending Order R-5, filed 6/6/69, effective 10/9/69)

WAC 480-12-445 INFORMATION TO SHIPPER. Whenever a written estimate is submitted to a prospective shipper of household goods, the carrier shall furnish such shipper a printed statement, in not less than eight-point bold or full-faced type, in substantially the form set forth below, and the carrier shall make an appropriate notation, on the face of the estimate, that such printed statement has been furnished. Where no estimate is given, the statement shall be furnished to the shipper prior to the time the goods are moved, and a notation that such statement has been furnished shall appear on the bill of lading.

**GENERAL INFORMATION FOR SHIPPERS
OF HOUSEHOLD GOODS BY MOTOR CARRIERS
IN INTRASTATE COMMERCE**

This statement is of importance to you as a shipper of household goods and is being furnished by the carrier pursuant to a requirement of the Washington Utilities and Transportation Commission. It relates to the transportation of household goods, in intrastate commerce by motor carriers frequently called "movers" but hereinafter referred to as carriers. Some carriers perform the transportation themselves. Others act as agent for the carriers which do the actual hauling. In some instances, the transportation is arranged by brokers. You should be sure to obtain the complete and correct name, home address, and telephone number of the carrier which is to transport your shipment, and keep that carrier informed as to how and where you may be reached at all times until the shipment is delivered.

Before completing arrangements for the shipment of your household goods, all of the information herein should be considered carefully by you.

Estimates. REGARDLESS OF ANY PRIOR ESTIMATE RECEIVED, for the carriage of your shipment, you will be required to pay transportation charges and other charges computed in accordance with tariffs filed by the carrier with the Washington Utilities and Transportation Commission. The total charges which you will be required to pay may be more, or less, than the estimate received from the carrier.

Tariff. This is a publication by the Washington Utilities and Transportation Commission, (~~Insurance~~) Highways-Licenses Building, Olympia, Washington, containing charges and rules of carriers engaged in the transportation of household goods. The rates, rules and provisions are the same for all carriers and tariff is open to public inspection and may be examined at the carrier's office. The tariff rules, rates and regulations of the carrier serving you must be considered in determining the charges on your shipment. Among the rules and regulations will be found special provisions applicable to shipments picked up or delivered at more than one place; packing and marking; diversion of shipments en route; and additional services, the charges for which are called accessorial charges, and which include services such as packing, unpacking, the furnishing of boxes or other containers, and carrying goods up or down steps. The tariff of the carrier serving you contains rules relating to the subjects which follow.

Preparing articles for shipment. If your shipment includes a stove, refrigerator, washing machine, or some other article requiring special servicing, including disconnection, prior to movement, such special servicing should be performed by a person employed by you who is especially trained to perform the work. Such servicing is not the responsibility of the carrier. Similarly you should arrange to take down all blinds, draperies, window cornices, mirrors, and other items attached to the walls, and to take up carpets which are tacked down. The charge for such service is not included in the transportation charge and will be performed by the carrier only at an extra per-hour charge. Under no circumstances should you pack jewelry, money, or valuable papers with your other belongings or matches, inflammables, or other dangerous articles.

Transportation rates and released values. Rates are stated (~~in amounts per one hundred pounds for distances of more than 25 miles and~~) on an hourly basis for local moving within towns or cities or for any distance 25 miles or less. (~~Carriers generally maintain~~) These rates ((varying)) vary according to the released or declared value of the shipment, which establishes the amount a shipper may recover from the carrier if the goods are lost or damaged. The lowest rate ((usually)) applies when the shipper releases the goods ((to)) at a value ((not exceeding 30)) of 60 cents per pound per article. ((For example, you may agree that the value of any article weighing 10 pounds is only \$3.00. This value may not be what the article is worth, but it is the amount which you agree to as the released value and it will be the basis for the settlement of any claim for loss or damage which you might later file. You may declare a higher value on some or all of your goods, but if you do, the transportation charges will be higher.)) When the released value is 75 cents per pound, instead of the regular 60 cents, the transportation charge is 110% of the base rate, and is further increased by 10% of the base rate for each additional 75 cents per pound of excess value declared. Alternatively, you may elect to ship at the base rate and arrange with the carrier, at your own expense, to obtain insurance to protect you for a greater amount. Rates for hauling within Washington beyond 25 miles are stated in amounts per 100 pounds, depending on the distance involved. The rates also vary according to the released or declared value of the shipment. The carrier's

tariff provides that at its lowest rates the carrier's responsibility for loss or damage caused by it is limited to 60 cents per pound of actual weight of each lost or damaged article. If you wish to be paid full value for lost or damaged items which are worth more than 60 cents per pound, you must declare, before shipping, a lump sum value and pay an extra charge based on such value. The charge is 50 cents for each \$100.00 of value declared. Payment of the charge establishes the declared value as the amount you may recover from the carrier for loss or damage, unless the damage is caused by an event or development excluded by the terms of the carrier's printed bill of lading, of which you should have a copy. If you do not declare any lump sum value, or a value less than \$1.25 per pound, the shipment will be deemed to have been released at \$1.25 per pound, and the charge of 50 cents per \$100.00 of value will be applied. If you wish to avoid these extra charges, you must agree, in writing, on the bill of lading, that if any articles are lost or damaged, the carrier's liability will not exceed 60 cents per pound for the actual weight of any lost or damaged articles in the shipment.

Cargo protection. A carrier's liability for loss or damage is limited by the bill of lading, its tariffs, and the value declared by the shipper. If you desire the benefit of the lowest transportation rate, but seek greater protection than afforded thereunder, you may purchase cargo insurance or other protection. If such protection is purchased through the carrier, you should require the deliverance to you of evidence of such protection prior to the time your goods are moved, and such evidence should show the amount of such additional protection, the cost thereof, and the risks included or excluded, whichever is more appropriate.

Weights. The transportation charges will be determined on the basis of the weight of your shipment. Ordinarily, the carrier will weigh its empty or partially loaded vehicle prior to the loading of your goods. After loading, it will again weigh the vehicle and determine the weight of your shipment. If your shipment weighs less than 1,000 pounds, the carrier may weigh it prior to loading.

If you so request, the carrier will notify you of the weight of your shipment and the charges as soon as the weight has been determined. Further, if you question the weight reported by the carrier, you may request that the shipment be reweighed prior to delivery. Reweighing will be accomplished only where it is practicable to do so. An extra charge may be made for reweighing, but only if the difference between the two net weights obtained does not exceed 100 pounds (if your shipment weighs 5,000 pounds or less) or does not exceed 2 ((per cent)) percent of the lower net weight (if your shipment weighs more than 5,000 pounds). The lower of the two net weights must be used in determining the charges.

Exclusive use of the vehicle. If you do not desire to have the goods belonging to someone else transported with your shipment, you may direct the carrier to grant you the exclusive use of the vehicle. In such event, however, the charges will probably be much greater.

Expedited service. Carriers are not ordinarily required to make delivery on a certain date or within a definite period of time. However, their tariffs generally contain a rule to the effect that, upon request of the shipper, goods weighing less than a designated weight - usually 5,000 pounds - will be delivered on or before the date specified by the shipper. The transportation charges for such expedited service are based upon the higher weight (5,000 pounds) and, of course, are greater than the charges on shipments hauled at the carrier's convenience.

Small shipments. If your shipment weighs less than the minimum weight prescribed in the carrier's tariff, it will be subject to the minimum charge provided therein. If your shipment weighs substantially less than the minimum weight prescribed by the carrier, you should give consideration to the possibility that it may be shipped more reasonably by other means of transportation, even if the expense of crating the items is taken into consideration.

Storage in transit. In case you desire that your household goods be stored in transit, and delivered at a later date, you may usually obtain such service upon specific request. The length of time a shipment may be stored in transit is limited by the carrier's tariff, and additional charges are normally made for such service. At the end of the designated storage-in-transit period, and in the absence of final delivery instructions, the shipment will be placed in permanent storage, and the carrier's liability in respect thereof will cease. Any further service must be made the subject of a separate contract with the warehouseman. If you do not specifically request storage-in-transit from the carrier, but arrange with someone other than the carrier to pick up your goods for storage, you will be required to pay such other person for such service.

Some warehouses make separate charges for checking goods out of storage, and collect dock charges from carriers for the space occupied by their vehicles while being loaded. Such charges are passed on to the shipper.

Bill of lading. Before your shipment leaves point of origin, you should obtain from the carrier a bill of lading or receipt, signed by you and the carrier, showing the date of shipment, the names of the consignor and consignee, the points of origin and destination, a description of the goods, and the declared or released valuation thereof.

Payment of charges - freight bill. You probably will have to pay all charges in cash, by money order, or by certified check before your shipment will be finally delivered. Therefore, when the shipment arrives at destination, you should be prepared to make such payment.

When paying charges on shipments moving more than 25 miles you should obtain a receipt for the amount paid setting forth the gross and tare weights of the vehicle, the net weight of your shipment, the mileage, the applicable rate per 100 pounds for transportation, additional protection, and any accessorial services performed. On shipments moving under 25 miles the receipt should show the time the vehicle left the premises of the mover and the time the same vehicle returned thereto, the rate per hour and rates for any accessorial services performed. Such receipt is called a freight bill or expense bill. In the event of loss or damage to the shipment, be sure to have the driver place appropriate notations on the freight bill. If the driver will not make such notations, you should have some disinterested party inspect the damage in the driver's presence and report same in writing to the home office of the carrier.

Loss or damage. If loss or damage is detected when the goods are delivered by the carrier, the fact of such loss or damage should be recorded by the shipper on the bill of lading or delivery record. All claims for loss or damage must be filed with the carrier, in writing within 9 months of delivery. Although the carriers are subject to the rules and regulations of the Washington Utilities and Transportation Commission the commission has no authority to compel the carriers to settle claims for loss or damage and will not undertake to determine whether the basis for or the amount of such claims is proper, nor will it attempt to determine the carrier liable for such loss or damage. If the carrier will not voluntarily pay such claims, the only recourse of the shipper is the filing of a suit in a court of law. The names of the carrier's agents for service of process in this state may be obtained by writing the Washington Utilities and Transportation Commission, Insurance Building, Olympia, Washington.

WSR 80-15-121

ATTORNEY GENERAL OPINION

Cite as: AGO 1980 No. 20

[October 10, 1980]

OFFICES AND OFFICERS—CITY—POLICE—COUNTY—
SHERIFF—LAW ENFORCEMENT—COMMUNICATIONS—
RECORDING OF EMERGENCY PHONE CALLS TO A POLICE
AGENCY

(1) Under the provisions of chapter 9.73 RCW, the "incoming phone calls" exception in RCW 9.73.090(1)(a) does permit a police agency to record those incoming calls which are not of an "emergency" nature.

(2) Assuming the foregoing, however, care must be taken in applying the "incoming phone calls" exception in RCW 9.73.090(1)(a) where the call is received by a police agent who has deliberately induced a criminal suspect, not yet arrested or formally charged, to make an incoming call to the police agency; there, wherever the spirit or the letter of the statute dictates taped mutual consent or judicial authorization prior to recording a telephone conversation with a criminal suspect, the "incoming calls" exception could well be held inapplicable even if single party consent is present.

(3) The several statutory exceptions to the Privacy Act set forth in RCW 9.73.030(2), RCW 9.73.090(1)(a), RCW 9.73.090(1)(b) and RCW 9.73.090(2) do not overlap each other in such a way as to render any such exception(s) totally duplicative of another and therefore unnecessary and superfluous.

Requested by:

Honorable Russ Juckett
Prosecuting Attorney
Snohomish County
3000 Rockefeller Avenue
Everett, Washington 98201
ATTN: Stephen Henley
Deputy Prosecuting Attorney

WSR 80-15-122

ATTORNEY GENERAL OPINION

Cite as: AGLO 1980 No. 20

[May 13, 1980]

OFFICES AND OFFICERS—STATE—DEPARTMENT OF LA-
BOR AND INDUSTRIES—WORKMEN'S COMPENSATION—
INSURANCE—GROUP SELF-INSURANCE BY EMPLOYERS

The state industrial insurance laws, as presently written, do not permit the State Department of Labor and Industries to issue a certification to two or more employers to self-insure as members of a group, rather than individually.

Requested by:

Honorable James T. Hughes
Director
Department of Labor and
Industries
General Administration Bldg.
Olympia, Washington 98504

WSR 80-15-123

PROPOSED RULES

DEPARTMENT OF

LABOR AND INDUSTRIES

[Filed October 22, 1980]

Notice is hereby given in accordance with the provisions of RCW 34.04.025, that the Department of Labor and Industries, intends to adopt, amend, or repeal rules concerning rules and fee schedule governing payment to doctors and other health care vendors rendering services to injured workers. The agency reserves the right to modify the text of these proposed rules prior to the public hearing thereon or in response to written or oral comments thereon received prior to or during the public hearing. Written and/or oral submissions may also contain data, views and arguments concerning the effect of the proposed rules or amendments of rules on economic

values, pursuant to chapter 43.21H RCW. Correspondence relating to this notice and proposed rules shown below should be addressed to:

Mr. James T. Hughes, Director
Department of Labor and Industries
General Administration Building
Olympia, Washington 98504

Written or oral submissions may also contain data, views, and arguments concerning the effect of the proposed rules or amendments of rules on economic values, pursuant to chapter 43.21H RCW;

that such agency will at 10:00 a.m., Tuesday, November 25, 1980, in the Conference Room, first floor, General Administration Building, Olympia, Washington, conduct a hearing relative thereto;

and that the adoption, amendment, or repeal of such rules will take place at 10:00 a.m., Monday, December 1, 1980, in the Director's Office, third floor, General Administration Building, Olympia, Washington.

The authority under which these rules are proposed is RCW 51.04.020(4), 51.04.030 and 51.16.120(3).

Interested persons may submit data, views, or arguments to this agency in writing to be received by this agency prior to November 25, 1980, and/or orally at 10:00 a.m., Tuesday, November 25, 1980, Conference Room, first floor, General Administration Building, Olympia, Washington.

Dated: October 21, 1980
By: James Hughes
Director

STATEMENT OF PURPOSE

The proposals for rule changes which follow amend portions of Title 296, chapters 20, 21, 22, and 23 of the Washington Administrative Code. These titles pertain to rules and fees for treatment provided to injured workers. In addition, a new chapter, chapter 16, is being added which pertains to employer-worker re-employment incentive.

The purpose of these proposed rules is to make the following substantive changes in Title 296 as previously enacted:

Revise treatment rules and fee schedule pertaining to reimbursement of health care practitioners and other vendors for service on Workmen's Compensation claims.

Provide guidelines for premium adjustments for employers who hire certain injured workers.

Statutory authority for these proposed changes is provided in RCW 51.04.020(4), 51.04.030 and 51.16.120(3).

In summary, the following changes are accomplished by the proposed rules:

Fee schedules are revised, reflecting 9.5 percent increase over the amount presently in effect.

Some treatment procedure numbers have been changed, deleted, added, or otherwise modified to reflect current health care treatment measures practiced.

Employers are provided with an incentive to hire injured workers who are unable to return to work with previous employer.

The agency personnel responsible for the drafting, implementation and enforcement of the rules are:

Drafting: Charles Murphy, Walt Carmichael, Loris Jenkins, Leon Flaherty

Implementation: Charles Murphy, and other industrial insurance division personnel.

Enforcement: Charles Murphy, Vern Castle, and other industrial insurance division personnel.

These rule changes are proposed by the Department of Labor and Industries, an agency of the State of Washington.

The proposing agency has no comments regarding statutory language, implementation, enforcement or fiscal matters beyond those appearing in sections a) and b) of this statement.

These rules are not necessitated by any federal law or federal or state court action.

Chapter 296-16 WAC
EMPLOYER—WORKER REEMPLOYMENT INCENTIVES

NEW SECTION

WAC 296-16-010 PREMIUM WAIVED FOR EMPLOYMENT OF PREFERRED WORKER. In order to implement the provisions of RCW 51.16.120(3) by way of encouraging employment of injured workers who are not reemployed by the employer at the time of injury, the following provisions are adopted:

Any employer who employs a "preferred worker" as defined in these rules shall be excused from the payment of industrial insurance premiums and/or accident costs under the circumstances and conditions herein provided:

(1) A "preferred worker" may be classified as such by the department when the supervisor or his or her designee shall determine, in his or her discretion, that such person has sustained an industrial injury or occupational disease under our state Industrial Insurance Act which prevents the worker from returning to work with the former employer and that such injury or occupational disease is substantially impairing the likelihood of such worker's reemployment with other employers.

(2) Any state fund employer, other than the employer at the time of injury or exposure, who employs a "preferred worker" shall be excused, during the period of employment of such worker but not to exceed thirty-six calendar months, from the payment of any accident fund premiums which would otherwise be due based upon such employment.

(3) In the event that a further injury or occupational disease is sustained by a reemployed "preferred worker" while in the employ of the accepting employer, such employer, whether insured by the state fund or self-insured, shall not be charged with the first twelve months of temporary disability compensation which would otherwise be charged to or paid by such employer. Such costs shall be charged to the second injury fund. The provisions of subsections (1) and (2) of this section shall apply only if the department acknowledges the application of such rules in writing prior to such employment.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-20-010 GENERAL ((INSTRUCTIONS)) INFORMATION. (1) ((Fees cover services and reports in all cases that can qualify for worker's compensation benefits.)) The following rules and fees are promulgated pursuant to RCW 51.04.020. This Fee Schedule is intended to cover all ((examinations, reports and treatment)) services for accepted industrial insurance claims. All fees listed are the maximum fees allowable.

(2) The rules contained in the introductory section pertain to all practitioners regardless of specialty area or limitation of practice. Additional rules pertaining to specialty areas will be found in the appropriate section.

(3) The maximum allowable fee for a procedure is determined by multiplying the unit value of a procedure by ((a)) the appropriate conversion factor((-Individual)), per the conversion factor tables ((apply to separate sections of the Maximum Fee Schedule when such an item or procedure is used in the care and treatment of an industrial injury)) listed in WAC 296-20-135 to 296-20-155.

((3)) (4) Initial and follow-up visit charges by ((physicians shall)) practitioners include ((services such as, but not limited to,)) routine examinations, physical modalities, injections, minor procedures, etc., not otherwise provided for in ((the)) this schedule.

((4) Provision is made in this Fee Schedule for payment for procedures involving complications. Detailed instructions are contained in the section on Surgery concerning the information required when the value of procedures contained in that section are to be determined "By Report." When the value of procedures in other sections of this Fee Schedule are to be determined "By Report," the report must contain a detailed description of the services rendered, the time involved in rendering the service, complications, other complicating factors or unusual skills required:))

(5) When a claim has been accepted by the department or self-insurer, no provider may bill the worker for the difference between the allowable fee and his usual and customary charge. Nor can the worker be charged a fee, either for interest or completion of forms, related to services rendered for the industrial injury or condition.

(6) Correspondence: All correspondence and billings pertaining to state fund and atomic energy claims should be sent directly to Department of Labor and Industries, General Administration Building, Olympia, Washington 98504. State fund claims have six digit numbers preceded by an alpha letter other than "S" or "V".

Atomic energy claims have seven digit numbers with no alpha prefix.

All correspondence and billings pertaining to crime victims claims should be sent to Crime Victims Division, Department of Labor and Industries, General Administration Building, Olympia, Washington 98504.

Crime victim claims have six digit numbers preceded by a "V".

All correspondence and billings pertaining to self-insured claims should be sent directly to the employer or his service representative as the case may be. A listing of self-insured employers and service representatives can be found in Appendix B.

Self-insured claims are six digit numbers preceded by an "S".

Communications to the department or self-insurer must show the patient's full name and claim number if known. If the claim number is unknown, ((in addition to)) the patient's name, ((show)) social security number, the date and the nature of the injury, and the employer's name must be indicated. A communication should refer to one claim only. Correspondence regarding ((medical services)) specific claim matters should be sent directly to the department in Olympia or self-insurer in order to avoid rehandling by the service location.

((6) LIGHT WORK: The attending physician is urged to bear in mind that light work is frequently beneficial for body conditioning and the gaining of self-confidence. Accordingly, where light work is available and whenever an employer requests that a worker be certified by a physician as able to perform available work other than his usual work, the employer shall furnish to the physician, with a copy to the worker, a statement describing the available work in terms that will enable the physician to relate the physical activities of the job to the worker's disability. The physician shall then determine whether the worker is physically able to perform the work described.

(7) REGULAR WORK: When the attending physician determines that the patient is capable of returning to his regular work he should be informed and the department or self-insurer notified as to the specific date. Compensation will be terminated on this date. Further medical care will be allowed as indicated by the physician.

(8) TERMINATION OF MEDICAL CARE: When medical care is no longer required and the industrial condition stabilized, a report should be submitted to the department or self-insurer to this effect stating the specific date. This is necessary for closure of the industrial claim, even though the patient may require continued medical care for conditions not related to the industrial condition.

(9) PERMANENT DISABILITY: When the patient has, in the opinion of the attending physician, a permanent partial disability or measurable impairment of function, a report of this opinion with the

findings and estimate of the functional impairment for specified disabilities, (i.e. Loss of function of the left hand equivalent to mid-metacarpal amputation of the hand, etc.) should be submitted by the attending physician. An estimate of the functional impairment for unspecified disabilities should be submitted by indicating which of the categories listed in WAC 296-20-200 through 296-20-660 best describes the impairment. If for any reason the ratings cannot be accomplished by the attending physician, the department must be requested to make arrangement for this determination through special examination. Where the rating is accomplished by the attending physician, much inconvenience and delay can be avoided in the payment of any disability awards and the final processing of the claim.

(10) UNUSUAL OR UNLISTED PROCEDURE: Value of unlisted services or procedures and additional values for unusual services or procedures which may necessitate skills and time of the physician over and above listed services or procedures should be substantiated "By Report" (BR):

(11) "BY REPORT": "BR" in the value column indicates that the value of this service is to be determined by report (BR) because the service is too unusual, variable or new to be assigned a unit value. The report should provide an adequate definition or description of the services or procedure (e.g., operative or narrative report), using any of the following as indicated:

(a) Diagnosis;

(b) Size, location and number of lesion(s) or procedure(s) where appropriate;

(c) Major surgical procedure and supplementary procedure(s);

(d) Whenever possible, list the nearest similar procedure by number according to this schedule;

(e) Estimated follow-up;

(f) Operative time.

(12) "INDEPENDENT PROCEDURE": Certain of the listed procedures are commonly carried out as an integral part of a total service, and as such do not warrant a separate charge. When such a procedure is carried out as a separate entity, not immediately related to other services, the indicated value for "Independent Procedure" is applicable.

(13) "Sv ITEMS": "Sv" in the column indicates the value is to be calculated as the sum of the various services rendered, (e.g., office, hospital or nursing home visit, consultation or detention, etc.) according to the ground rules covering those services. Identify by using the code number of the "Sv" item. Value by identifying each individual service, listing its code number and value.

(14) This is a maximum fee schedule. All fees listed are the maximum fees allowable and if a fee for any particular service is lower to the general public than listed in the fee schedule, the practitioner shall bill the department or self-insurer at the lower rate.

(15) The following rules are promulgated pursuant to REW 51.04.020:))

(7) APPENDIX C is a listing of the department's various local service locations. These facilities should be utilized by providers to obtain information, supplies, or assistance in dealing with matters pertaining to industrial injuries.

NEW SECTION

WAC 296-20-01002 DEFINITIONS. TERMINATION OF TREATMENT: When treatment is no longer required and/or the industrial condition is stabilized, a report indicating the date of stabilization should be submitted to the department or self-insurer. This is necessary to initiate closure of the industrial claim. The patient may require continued treatment for conditions not related to the industrial condition; however, financial responsibility for such care must be the patient's.

UNUSUAL OR UNLISTED PROCEDURE: Value of unlisted services or procedures should be substantiated "By Report" (BR).

"BY REPORT": BR (by report) in the value column indicates that the value of this service is to be determined by report (BR) because the service is too unusual, variable or new to be assigned a unit value. The report should provide an adequate definition or description of the services or procedure (e.g., operative or narrative report), using any of the following as indicated:

(1) Diagnosis;

(2) Size, location and number of lesion(s) or procedure(s) where appropriate;

(3) Major surgical procedure and supplementary procedure(s);

(4) Whenever possible, list the nearest similar procedure by number according to this schedule;

(5) Estimated follow-up;

(6) Operative time.

The department or self-insurer may adjust BR procedures when such action is indicated.

"INDEPENDENT OR SEPARATE PROCEDURE": Certain of the listed procedures are commonly carried out as an integral part of a total service, and as such do not warrant a separate charge. When such a procedure is carried out as a separate entity, not immediately related to other services, the indicated value for "Independent Procedure" is applicable.

SV. ITEMS: Sv (Service) procedures are not essentially a single procedure, rather they are comprised of several other procedures. These "Sv" procedures although identified by a specific code number, can be described only in terms of the several services included. Therefore, unit values are not indicated for Sv procedures and total value is derived from the values of the individual services performed. These Sv procedures require "BR" (see above) information to substantiate billing.

LIGHT WORK STATUS: The injured worker is not able to return to his previous work, but is physically capable of carrying out work of a lighter nature. Injured workers should be urged to return to light work as soon as reasonable as such work is frequently beneficial for body conditioning and regaining self confidence.

Under RCW 51.32.090, when the employer has light work available for the worker, the employer must furnish the doctor and the worker with a statement describing the available work in terms that will enable the doctor to relate the physical activities of the job to the worker's physical limitations and capabilities. The doctor shall then determine whether the worker is physically able to perform the work described. The employer may not increase the physical requirements of the job without requesting the opinion of the doctor as to the worker's ability to perform such additional work. If after a trial period of re-employment the worker is unable to continue with such work, his time loss compensation will be resumed upon certification by the attending doctor.

If the employer has no light work available, the department should be notified immediately, so vocational assessment can be conducted to determine whether the worker will require assistance in returning to work.

REGULAR WORK STATUS: The injured worker is physically capable of returning to his/her regular work. It is the duty of the attending doctor to notify the worker and the department or self-insurer, as the case may be, of the specific date of release to return to regular work. Compensation will be terminated on the release date. Further treatment can be allowed as requested by the attending doctor if the condition is not stationary and such treatment is needed and otherwise in order.

TOTAL TEMPORARY DISABILITY: Full-time loss compensation will be paid when the worker is unable to return to any type of reasonably continuous gainful employment as a direct result of an accepted industrial injury or exposure.

TEMPORARY PARTIAL DISABILITY: Partial-time loss compensation may be paid when the worker can return to work on a limited basis or return to lesser paying job is necessitated by the accepted injury or condition. The worker must have a reduction in wages of at least five percent before consideration of partial time loss can be made. No partial-time loss compensation can be paid after the worker's condition is stationary.

ALL TIME LOSS COMPENSATION MUST BE CERTIFIED BY THE ATTENDING DOCTOR BASED ON OBJECTIVE FINDINGS.

PERMANENT PARTIAL DISABILITY: Any anatomic or functional abnormality or loss after maximum rehabilitation has been achieved, which is determined to be stable or nonprogressive at the time the evaluation is made. When the attending doctor has reason to believe a permanent impairment exists, the department or self-insurer should be notified. Appendix D contains a schedule of the permanent disability maximum awards. **UNDER WASHINGTON LAW DISABILITY AWARDS ARE BASED SOLELY ON PHYSICAL OR MENTAL IMPAIRMENT DUE TO THE ACCEPTED INJURY OR CONDITIONS WITHOUT CONSIDERATION OF ECONOMIC FACTORS.**

TOTAL PERMANENT DISABILITY: Loss of both legs or arms, or one leg and one arm, total loss of eyesight, paralysis or other condition permanently incapacitating the worker from performing any work at any gainful employment. When the attending doctor feels a worker may be totally and permanently disabled, he should communicate this

information immediately to the department or self-insurer. A vocational evaluation and an independent rating of disability may be arranged by the department prior to a determination as to total permanent disability. Coverage for treatment does not usually continue after the date an injured worker is placed on pension. No injured worker receiving scheduled drugs can be placed on pension.

FATAL: When the attending doctor has reason to believe a worker has died as a result of an industrial injury or exposure, the doctor should notify the nearest department service location (see Appendix C) or the self-insurer immediately. Often an autopsy is required by the department or self-insurer. If so, it will be authorized by the service location manager or the self-insurer. Benefits payable include burial stipend and monthly payments to the surviving spouse and/or dependents.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76)

WAC 296-20-015 WHO MAY TREAT. All licensed ((physicians)) practitioners except those under suspension by the department, are eligible to treat injured workers entitled to benefits under the Industrial Insurance Law. Only that treatment which falls within the scope and field of the ((physicians)) practitioner's license to practice will be allowed as treatment to an injured worker.

Procedures and evaluations requiring specialized skills and knowledge will be limited to board certified or board qualified physicians, as specified by the American Medical Association or the American Osteopathic Association.

No ((physician)) practitioner shall be formally refused permission to treat cases coming under the jurisdiction of the department, except for reasons that are, in the opinion of the department, to the best interest of the workers and the funds created for their protection.

Reasons for holding a ((physician)) practitioner ineligible to treat Industrial Insurance cases include, but are not necessarily limited to any one or a combination of the following:

- (1) Failure, neglect or refusal to submit complete, adequate and detailed reports.
- (2) Failure, neglect or refusal to respond to requests by the department for additional reports.
- (3) Failure, neglect or refusal to observe and comply with the department's orders and Medical Aid Rules.
- (4) Persistent failure to notify the department immediately and prior to burial in any death where the cause of death is not definitely known or where there is question of death being due to an industrial injury.
- (5) Persistent failure to recognize emotional and social factors impeding recovery of ((the)) injured workers.
- (6) Persistent unreasonable refusal to comply with the recommendations of board certified or qualified specialists who have examined the worker.
- (7) Submission of false or misleading reports to the department.
- (8) Collusion with any other persons in submission of false or misleading information to the department.
- (9) Submission of inaccurate or misleading bills.
- (10) Persistent submission of false or erroneous diagnosis.
- (11) Knowingly submitting bills to an injured worker for treatment of an industrial condition for which the department has accepted responsibility.
- (12) ~~((Treatment of a nonspecific nature not medically indicated or treatment of a controversial or experimental nature or the use of contraindicated or hazardous treatment measures or frequent, unsatisfactory results of treatment:))~~ Persistent use of:
 - (a) Treatment of controversial or experimental nature;
 - (b) Contraindicated or hazardous treatment measures;
 - (c) Continuation of treatment measures past stabilization of the industrial condition or after maximum improvement has been obtained;
 - (d) Nonspecific treatment measures;
 - (e) Treatment terminating in unsatisfactory results.
- (13) Charging or attempting to charge industrially injured workers ((any)) fees ((for the care of conditions for which)) in addition to the fee paid by the department or self-insurer ((has accepted responsibility)) for care of the industrial injury or billing for difference between the maximum allowable fee set forth in this schedule and usual and customary charges.
- (14) Conviction in any court of any offense involving moral turpitude, in which case the record of such conviction shall be conclusive evidence.

(15) The use or prescription for use, of narcotic, addictive, habituating or dependency (~~(producing)~~) inducing drugs in any way other than for therapeutic purposes.

(16) Repeated acts of gross misconduct in the practice of the profession.

(17) Declaration of mental incompetency by a court of competent jurisdiction.

(18) The finding of any peer group disciplinary board of reason to suspend or revoke a practitioner's practice privilege temporarily or permanently.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-20-020 ACCEPTANCE OF RULES AND FEES. The filing of an accident report or the rendering of treatment to an injured worker who comes under the department's or self-insurer's jurisdiction, as the case may be, constitutes acceptance of the department's Medical Aid Rules and (~~(shall comply))~~ compliance with its rules and fees.

In accordance with RCW 51.28.020 of the Industrial Insurance Law, when a (~~(physician))~~ doctor renders treatment to an injured worker entitled to benefits under the law, "it shall be the duty of the (~~(physician))~~ doctor to inform the injured (~~(workman))~~ worker of his rights under this title and to lend all necessary assistance in making the application for compensation and such proof of other matters as required by the rules of the department without charge to the (~~(workman))~~ worker," an injured worker shall not be billed for treatment rendered for his accepted industrial injury or occupational disease.

The department or self-insurer must be notified immediately, when an unrelated condition is being treated concurrently with an industrial injury, (, the department shall be notified immediately by the treating physician, of the nature of the unrelated condition and the treatment being rendered and the effect, if any, on the patient's recovery from the industrial injury). See WAC 296-20-055 for specific information required.

In cases of questionable beneficiary where the (~~(treating physician))~~ provider has billed the injured worker or other insurance, and the claim is subsequently allowed, the (~~(physician))~~ provider shall refund the injured worker or insurer in full and bill the department or self-insurer for services rendered at (~~(department))~~ fee schedule rates using billing instructions outlined in WAC 296-20-125.

Cases in which there is a question of medical ethics or quality of medical care, will be referred to the Washington State Medical Association's Medical Advisory and Utilization Review Committee to the Department of Labor and Industries for recommendations.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-20-02001 PENALTIES. RCW 51.48.060 of the Industrial Insurance Law provides that a civil penalty of \$100.00 may be assessed against any (~~(physician))~~ doctor who; ". . . fails, neglects or refuses to file a report with the Director, as required by this title, within five days of treatment showing the condition of the injured (~~(workman))~~ worker at the time of treatment, a description of the treatment given, and an estimate of the probable duration of the injury, or who fails or refuses to render all necessary assistance to the injured (~~(workman))~~ worker, as required by this title, . . ."

RCW 51.48.080 of the Industrial Insurance Law provides that, "Every person, firm or corporation who violates or fails to obey, observe or comply with any rule of the department promulgated under authority of this title, shall be subject to a penalty of not to exceed two hundred and fifty dollars."

AMENDATORY SECTION (Amending Order 71-6, filed 6/1/71)

WAC 296-20-025 INITIAL TREATMENT AND REPORT OF ACCIDENT. It is the responsibility of the worker to notify the practitioner when the worker has reason to believe his injury or condition is industrial in nature. Conversely, if the attending doctor discovers a condition which he believes to be work related or has reason to believe an injury is work related, he must so notify the worker. Once such determination is made by either the claimant or the attending doctor, a report of accident must be filed.

Failure to comply with this responsibility can result in penalties as outlined in WAC 296-20-02001.

It is the (~~(responsibility of each))~~ practitioner's responsibility (~~(accepting an industrial injury for treatment;))~~ to ascertain whether he is the first attending (~~(physician))~~ practitioner. (~~(If not, he must refer the workman to the original physician, unless the workman desires to be transferred to his care. In this event, approval for the transfer must be obtained in accordance with WAC 296-20-065.))~~ If (~~(the practitioner is the first attending physician))~~ so, he will take the following action:

(1) Give emergency treatment.

(2) Immediately complete and forward the report of accident, to the department and the employer or self-insurer. Instruct and give assistance to the injured (~~(workman))~~ worker in completing his portion of the report of accident. In filing a claim, the following information is necessary so ((that)) there is no delay in adjudication of the claim or payment of compensation.

(a) Complete history of the industrial accident or exposure.

(b) Complete listing of positive physical findings.

(c) Specific diagnosis relating to the injury.

(d) Type of treatment rendered.

(e) Known medical, emotional or social conditions which may influence recovery or cause complications.

(f) Estimate time loss due to the injury.

(3) If the patient remains under (~~(your))~~ his care continue with necessary treatment in accordance with Medical Aid Rules. If the practitioner is not the original attending doctor, he should question the injured worker to determine whether a report of accident has been filed for the injury or condition. If no report of accident has been filed, it should be completed immediately and forwarded to the department or self-insurer, as the case may be, with information as to the name and address of original practitioner if known, so that he/she may be contacted for information if necessary.

If a report of accident has been filed, it is necessary to have the worker complete a request for transfer as outlined in WAC 296-20-065, if the worker and practitioner agree that a change in attending doctor is desirable.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-20-030 ((TREATMENT FOLLOWING INITIAL TREATMENT--)) TREATMENT NOT REQUIRING AUTHORIZATION FOR ACCEPTED CONDITIONS. (1) (~~(ALL CASES~~

~~(a) Up to ten))~~ A maximum of thirty-six office calls for the treatment of the industrial condition, during the first ((thirty)) ninety days, following injury. Subsequent office calls must be authorized. Reports of treatment rendered must be filed at thirty day intervals to include number of office visits to date. See WAC 296-20-03001 for report requirements and further information.

~~((b))~~ (2) Initial diagnostic x-rays necessary for evaluation and treatment of the industrial injury or condition. See WAC 296-20-121 for further information. ((No payment will be made for unnecessary x-rays.

~~(c))~~ (3) The first twelve physical therapy ((on-hospitalized patients or out-patient physical therapy as indicated)) treatments as provided by WAC 296-23-710 and 296-21-095, upon written prescription by the attending ((physician. A Physical Therapy Progress Report must be submitted to the attending physician and the department or self-insurer, in accordance with the Physical Therapy Rules in WAC 296-23-710)) doctor or under his direct supervision. Additional physical therapy treatment must be authorized and the request substantiated by evidence of improvement. In no case will the department or self-insurer pay for inpatient hospitalization of a claimant to receive physical therapy treatment only. USE OF DIAPULSE, THERMATIC (standard model only), SPECTROWAVE AND SUPERPULSE MACHINES AND IONTOPHORESIS IS NOT AUTHORIZED FOR WORKERS ENTITLED TO BENEFITS UNDER THE INDUSTRIAL INSURANCE ACT.

~~((d))~~ (4) Routine laboratory studies reasonably necessary for diagnosis and/or treatment of the industrial condition. Other special laboratory studies require authorization.

~~((e))~~ (5) Routine ((minor and)) standard treatment measures rendered on an emergency ((service and other recognized noncontroversial medical treatment measures,)) basis or in connection with minor injuries not otherwise requiring authorization.

~~((f))~~ (6) Consultation with specialist when indicated. See WAC 296-20-051 for consultation guidelines.

~~((g))~~ (7) Nonscheduled drugs and medications during the acute phase of treatment for the industrial injury or condition. ((Addictive; habit-forming or dependency producing drugs may be prescribed in

quantities sufficient for treatment for a maximum of fifteen days. If drug therapy is to extend beyond thirty days, a special report justifying the clinical necessity for this treatment must be submitted to the department or self-insurer.)

(8) Scheduled drugs and other medications known to be addictive, habit forming or dependency inducing may be prescribed in quantities sufficient for treatment for a maximum of fifteen days. If drug therapy extends beyond thirty days, see WAC 296-20-03003 regarding management.

(9) Injectable scheduled and other drugs known to be addictive, habit forming, or dependency inducing may be provided only on an in-patient basis. Hospital admission for drug provision only will not be allowed.

~~((H))~~ (10) Diagnostic or therapeutic nerve blocks (~~(, when necessary for the industrial injury, not to exceed once weekly during the first thirty days following injury)~~). See WAC 296-20-03001 for restrictions.

~~((I))~~ (11) Intra-articular (~~(, para-articular and parenteral)~~) injections (~~(, for the industrial condition, except fibrosing agents, not to exceed once weekly during the first thirty days. INJECTIONS OF VITAMIN B-12 WILL BE AUTHORIZED ONLY FOR TREATMENT OF PERNICIOUS ANEMIA)~~). See WAC 296-20-03001 for restrictions.

~~((J))~~ (12) Myelogram (~~(and discogram;)~~) if (~~(done within thirty days from the date of injury)~~) prior to emergency surgery.

~~((K))~~ TIME LOSS CASES. This is in addition to those listed above.

(a) Hospitalization. Hospitalization solely for physical therapy is not authorized. Token medical treatment will not alter this.

(b) Hospital calls during period of hospitalization.

(c) Physical therapy as indicated during hospitalization.

(d) Emergency surgery for the industrial condition.

~~((L))~~ NO TIME LOSS CASES. This is in addition to those listed above.

(a) Routine treatment during the first 60 days or until closure is indicated, whichever occurs first.)

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-20-03002 TREATMENT NOT AUTHORIZED. The department or self-insurer will not allow nor pay for following treatment:

(1) USE OF DIAPULSE, THERMATIC (standard model only), SPECTROWAVE AND SUPERPULSE MACHINES ON WORKERS ENTITLED TO BENEFITS UNDER THE INDUSTRIAL INSURANCE ACT (~~(IS NOT AUTHORIZED)~~).

(2) Iontophoresis; prolotherapy; chemopapain injections; injections of (~~Vitamin B-12 for treatment of conditions other than pernicious anemia~~) fibrosing or sclerosing agents; and injections of substances other than anesthetic or contrast into the subarachnoid space (intrathecal injections).

(3) (~~Any treatment measure, including physical therapy, as a palliative measure will not be allowed or paid~~) Prescription and/or injection of vitamins to improve or maintain general health.

(4) Continued treatment beyond stabilization of the industrial condition(s), i.e., maintenance care, except where necessary to monitor prescription of medication necessary to maintain stabilization i.e., anti-convulsive, anti-spasmodic, etc.

(5) After consultation and advice to the department or self-insurer, any treatment measure deemed to be dangerous or inappropriate for the injured worker in question.

(6) Treatment measures of an unusual, controversial, obsolete, or experimental nature (see WAC 296-20-045). Under certain conditions, treatment in this category may be approved by the department or self-insurer. Approval must be obtained prior to treatment. Requests must contain a description of the treatment, reason for the request with benefits and results expected.

AMENDATORY SECTION (Amending Order 77-27, filed 11/30/77, effective 1/1/78)

WAC 296-20-03003 DRUGS AND MEDICATION. (1) The department is experiencing a significant increase in incidence of drug dependency and return-to-work apathy from use of addicting and habituating drugs. In response to this, the Washington State Medical Association's Industrial Insurance Committee issued "Guidelines to

Assist Attending Physicians in the Care of Industrially Injured Workers Receiving Addictive, Habituating or Dependency (~~(Producing)~~) Inducing Drugs." This rule is based on those guidelines.

(2) Agents responsible for (~~(producing)~~) inducing dependency and return-to-work apathy when used over a short period of time, i.e. sixty to ninety days are: Antianxiety drugs, sedatives, antidepressants, antipsychotics and oral or injectable natural or synthetic narcotics and other habituating or addictive drugs.

(3) Both antianxiety drugs and sedatives aggravate the depression which often occurs naturally in the injured worker. This makes return of self-esteem and return to work difficult. Their widespread use as "muscle relaxants" is being increasingly questioned. If these drugs are used after industrial injury, it should be on a short-term basis under careful observation. These include but are not limited to:

Antianxiety Drugs: Including, but not limited to, Valium, Librium, Tranxene, Serax, Meprobamate.

Sedatives: Including, but not limited to, short-acting Barbiturates, Dalmane, Doriden, Quaalude, etc.

(4) The adverse effects reported for antidepressants and antipsychotics should be considered before prescribing. The manufacturer's precautions should be carefully observed. Psychiatric consultation is recommended if used longer than sixty days. These are:

(a) Antidepressants —

(i) Tricyclics — Elavil, Tofranil, Sinequan, Vivactil, Norpramin, (~~(Pertofrance)~~) Pertofranc, etc.

(ii) Amphetamines: Are Schedule II substances under the jurisdiction of the federal controlled substances act and will not be allowed or paid by the Department of Labor and Industries.

(b) Antipsychotics —

(i) Phenothiazines, including but not limited to, Thorazine, Stelazine, Compazine, and Mellaril.

(ii) Butyrophenones, including but not limited to, Haldol and Innovar.

(5) Injectable natural or synthetic narcotics and talwin should be used as indicated on hospitalized patients only. No prescriptions for injectable forms of these drugs (nor syringes) should be written on Department of Labor and Industries prescription forms. See WAC 296-20-030(1)(i).

(6) Oral natural or synthetic narcotics. Talwin and other habituating or addictive drugs should be used as indicated for acute pain, but not longer than sixty days. Their use for the relief of pain behavior and "suffering" is being increasingly questioned.

(7) The department realizes that management of chronic pain cases is most difficult subjecting the physician to extreme pressures. With this in mind, the following guidelines are suggested with the intent that they will help the doctor cope with the pressures and assist in the management of these difficult cases:

(a) Keep a drug summary on all claimants.

(b) Determine if pain complaints are consistent with the amount of injury.

(c) Write specific instructions for the use of sedatives and analgesics.

(d) Treat the natural depression in injured workers properly, avoiding tranquilizers, and sedatives which increase depression.

(e) Evaluate recovery time frequently, and allow patient to regain self-esteem by returning to work.

(f) If a patient is requiring these drugs in amounts sufficient to cause concern about habituation or addiction or for longer than sixty days, the attending physician should:

(i) Revise the treatment plan and withdraw the drugs.

(ii) If unable to treat addiction or habituation himself, refer the patient to a physician or an institution experienced in drug withdrawal.

(iii) If (i) and (ii) are not acceptable or appropriate, obtain unbiased concurring opinion, and justify an alternate course in writing to the Department of Labor and Industries or self-insurer and the Federal Drug Enforcement Administration.

(8) The department or self-insurer will inform the attending physician when it is concerned about the amount of these drugs the patient is receiving and will provide information regarding physicians and institutions experienced in drug withdrawal.

(9) As per RCW 51.36.010, a worker cannot be placed on pension while receiving controlled substances.

(10) Physician failure to reduce or terminate prescription of controlled substances, habit forming or addicting medications, or dependency inducing medications, after department or self-insurer request to do so for an injured worker may result in a transfer of the worker to

another physician of the worker's choice. Refusal of the worker to select another doctor can result in department or self-insurer selection of new attending doctor.

(11) Should the attending doctor or the injured worker refuse to comply with the department or self-insurer request to discontinue certain medications, the department or self-insurer, after providing adequate prior notice to the worker, doctor, and pharmacy/s involved, may discontinue payment for the medication.

AMENDATORY SECTION (Amending Order 71-6, filed 6/1/71)

WAC 296-20-035 TREATMENT IN CASES THAT REMAIN ((UNABLE TO WORK)) OPEN BEYOND ((SIXTY)) NINETY DAYS. ((New injuries only)) Conditions requiring treatment beyond ((sixty)) ninety days are indicative of a major industrial condition or complication by other ((medical pathology)) conditions. Except in cases of severe and extensive injuries, i.e., quadriplegia, paraplegia, multiple fractures, etc., when the ((workman is unable to return to work within sixty)) injured worker requires treatment beyond ninety days following injury, ((the department may request)) a complete ((medical)) examination is necessary to determine and/or establish((:

(1) What, if any, other preexisting or concurrent medical conditions exist in addition to the industrial injury:

(2) What effect, if any, the unrelated conditions have on the industrial injury.

(3) The full extent, diagnosis, probable duration, anticipated treatment and prognosis of these conditions:

If this cannot be carried out by the attending physician, he must arrange this examination by another physician of his choice. The attending physician must provide the consultant with the history, x-rays if on hand and a resume of treatment rendered. The fee will be paid on the basis of the written report under WAC 296-21-030.

This examination must contain:)) need for continued treatment and/or payment of time loss compensation. This may be accomplished either by the attending doctor or a consultation exam. In either case, a detailed exam report must be provided to the department or self-insurer. The following information is required. Additional information may be included or requested.

(1) Attending doctor report.

(a) The condition(s) diagnosed.

(b) Their relationship, if any, to the industrial injury or exposure.

(c) Outline of proposed treatment program, its length, components, and expected prognosis including an estimate of when treatment should be concluded and condition(s) stable. An estimated return to work date should be included. The probability, if any, of permanent partial disability resulting from industrial conditions should be noted.

(d) If the worker has not returned to work, the attending doctor should indicate whether he feels vocational assessment will be necessary to evaluate the worker's ability to return to work and why.

(e) If the claimant has not returned to work, a physical capacities evaluation should be included with the report.

(2) Consultation exam.

((+)) (a) A DETAILED HISTORY TO ESTABLISH:

((+)) (i) The type and severity of the industrial or exposure injury.

((+)) (ii) The patient's previous physical and mental health.

((+)) (iii) Any social and emotional factors which may effect recovery.

((2) If the examination is by other than the attending physician,)) (b) A COMPARISON ((of the)) HISTORY between history provided by ((the)) attending ((physician with the history given by the)) doctor and injured ((workman)) worker, must be provided with exam.

((+)) (c) A DETAILED PHYSICAL EXAMINATION concerning all systems affected by the industrial accident.

((+)) (d) A GENERAL PHYSICAL EXAMINATION sufficient to demonstrate any preexisting impairments of function or concurrent condition.

((+)) (e) A COMPLETE DIAGNOSIS OF ALL PATHOLOGICAL CONDITIONS FOUND TO BE LISTED AS:

((+)) (i) Due solely to injury.

((+)) (ii) Preexisting condition aggravated by the injury and the extent of aggravation.

((+)) (iii) Other medical conditions neither related to nor aggravated by the injury but which may retard recovery.

((+)) (iv) Coexisting disease ((not a departmental problem)) (arthritis, congenital deformities, heart disease, etc.).

((+)) (f) CONCLUSIONS MUST INCLUDE:

((+)) (i) Type treatment recommended for each pathological condition and the probable duration of treatment.

((+)) (ii) Expected degree of recovery from the industrial condition.

((+)) (iii) Probability, if any, of permanent disability resulting from the industrial condition.

((+)) (iv) Probability of returning to work.

((+)) (g) REPORTS OF NECESSARY, REASONABLE X-RAY AND LABORATORY STUDIES TO establish or confirm the diagnosis when indicated.

AMENDATORY SECTION (Amending Order 79-18, filed 11/30/79, effective 1/1/80)

WAC 296-20-01501 PHYSICIAN'S ASSISTANT RULES. (1) Physicians' assistants may perform only those medical services in industrial injury cases, for which the physician's assistant is trained and licensed, under the control and supervision of a licensed physician. Such control and supervision shall not be construed to require the personal presence of the supervising physician.

(2) Physicians' assistants ((in remote areas)) may perform those medical services which are within the scope of their physician's assistant license for industrial injury cases within the limitations of subsections (3), (4), (5), and (6) below.

(3) Advance approval must be obtained from the department to treat industrial injury cases. To be eligible to treat industrial injuries, the physician's assistant must:

(a) Provide the department with a copy of his license indicating whether it is Type A(;) or B(;-or-€).

(b) Provide the name and address and specialty of the supervising physician.

(c) Provide the department with the evidence of a reliable and rapid system of communication with the supervising physician.

(4) Those physicians' assistants who hold Type A licenses may: Collect historical and physical data, organize the data, and present such data to the supervising physician who can then determine appropriate diagnostic or therapeutic measures. The physician's assistant may assist the physician by performing diagnostic and therapeutic procedures and coordinating the roles of other more technical assistants. The physician's assistant may under certain circumstances and rules defined by the Professional License Division, perform medical services without the immediate surveillance of the physician. The supervising physician may bill for physician assistant service at eighty percent of procedure value as using applicable modifier code -01 or -04.

(5) A physician's assistant holding Type B license may: Collect and organize data; perform appropriate diagnostic or therapeutic measures; and perform independent action only within the specialty field of the supervising physician. The supervising physician may bill for physician assistant services at seventy-five percent of procedure value using applicable modifier code -02 or -05.

((6) A physician assistant holding Type C license may: Perform a specific function within the specialty field of the supervising physician or physicians, only. The supervising physician may bill for physician assistant services at seventy percent of procedure value using applicable modifier code -03 or -06.))

AMENDATORY SECTION (Amending Order 79-18, filed 11/30/79, effective 1/1/80)

WAC 296-20-03001 TREATMENT REQUIRING AUTHORIZATION((=ALL CASES)). Requests for authorization must include a statement of: The condition(s) diagnosed; their relationship, if any, to the industrial injury/exposure; an outline of the proposed treatment program, its length and components, and expected prognosis; and an estimate of when treatment would be concluded and condition stable.

(1) Office calls in excess of the first ((ten)) thirty-six visits or ninety days whichever occurs first.

(2) ((Elective)) All nonemergent major surgery must be authorized prior to surgery date. Some surgical procedures require concurring opinions prior to authorization. (See WAC 296-20-045 for details).

(3) X-ray and radium therapy.

(4) ((Specific)) Diagnostic ((service—Codes 92000-95900)) studies.

(5) Myelogram and discogram((, unless carried out within thirty days from the date of injury)) in nonemergent cases.

(6) Physical therapy((-Advance authorization on an individual basis is required in remote isolated areas where there is no Registered Physical Therapist or Physical Therapist Assistant serving under the direction of a Registered Physical Therapist, and physical therapy is to be given in a physician's office, hospital or nurse practitioner clinic by other than a Registered Physical Therapist. USE OF DIAPULSE OR

~~SIMILAR MACHINE ON PERSONS UNDER THE JURISDICTION OF THE DEPARTMENT OR SELF-INSURER IS NOT AUTHORIZED~~) treatment beyond initial twelve treatments as outlined in WAC 296-21-095 and 296-23-710.

(7) Diagnostic or therapeutic (nerve blocks subsequent to the first thirty days following injury, or in excess of once weekly.

(8) Intra-articular, para-articular and parenteral injections subsequent to the first thirty days following injury, or in excess of once weekly. ~~INJECTION OF VITAMIN B-12 WILL BE AUTHORIZED ONLY FOR TREATMENT OF PERNICIOUS ANEMIA.~~

(9) Prior approval is required for injections of all fibrosing or sclerosing agents. The fibrosing or sclerosing agents to be employed, the reason for treatment and the areas to be treated must be included on the request for authorization.

(10) Treatment measures of an unusual, controversial, complicated, obsolete or experimental nature (see WAC 296-20-045 and 296-20-131) must be approved in advance by the department. Requests for approval of such treatment must contain a description of the treatment, the reason for its employment, its benefits and the expected results.

(11) The long term prescription of medication under the specific conditions and circumstances in (a) and (b) are considered corrective therapy rather than palliative treatment and approval in advance must be obtained.

(a) Nonsteroidal antiinflammatory agents for the treatment of degenerative joint conditions aggravated by occupational injury.

(b) Anticonvulsive agents for the treatment of seizure disorders caused by trauma) injection. Epidural or caudal injection of substances other than anesthetic or contrast solution will be authorized under the following conditions only:

(a) When the worker has experienced acute low back pain or acute exacerbation of chronic low back pain of no more than six months duration.

(b) The worker will receive no more than three injections in an initial thirty-day treatment period, followed by a thirty-day evaluation period. If significant pain relief is demonstrated one additional series of three injections will be authorized. No more than six injections will be authorized per acute episode.

(8) Home nursing or convalescent center care must be authorized per provision outlined in WAC 296-20-091.

(9) Provision of prosthetics, orthotics, surgical appliances, special equipment for home or transportation vehicle; orthopedic shoes; TNS units; masking devices; hearing aids; etc., must be authorized in advance as per WAC 296-20-1101 and 296-20-1102.

(10) Biofeedback program; pain clinic; weight loss program; psychotherapy; rehabilitation programs; and other programs designed to treat special problems must be authorized in advance. See WAC 296-21-0501 and 296-20-0502 for details.

(11) Prescription or injection of vitamins for specific therapeutic treatment of the industrial condition(s) when the attending doctor can demonstrate that published clinical studies indicate vitamin therapy is the treatment of choice for the condition. Authorization for this treatment will require presentation of facts to and review by department medical consultant.

(12) Injections of anesthetic and/or antiinflammatory agents into the vertebral facet joints will be authorized to qualified specialists in orthopedics, neurology, and anesthesia, under the following conditions:

(a) Rationale for procedure, treatment plan, and request for authorization must be presented in writing to the supervisor of medical services.

(b) Procedure must be performed in an accredited hospital under radiographic control.

(c) Not more than four facet injection procedures will be authorized in any one patient.

((d) Payment for services will be contingent upon receipt of satisfactory reports from the physician in regard to claimant's response to the procedure. Such reports are to be directed to the attention of the medical consultant to the department.))

(13) The long term prescription of medication under the specific conditions and circumstances in (a) and (b) are considered corrective therapy rather than palliative treatment and approval in advance must be obtained.

(a) Nonsteroidal antiinflammatory agents for the treatment of degenerative joint conditions aggravated by occupational injury.

(b) Anticonvulsive agents for the treatment of seizure disorders caused by trauma.

AMENDATORY SECTION (Amending Order 79-18, filed 11/30/79, effective 1/1/80)

WAC 296-20-045 PROCEDURES REQUIRING CONSULTATION. In the event of complication, controversy, or dispute over the ((medical)) treatment aspects of any claim, the department or self-insurer will not authorize treatment until the attending ((physician)) doctor has ((obtained concurring opinion from)) arranged a consultation with a qualified ((physician)) doctor with experience and expertise on the subject, and the department or self-insurer has received notification of the findings and recommendations of the consultant.

This consultation must be arranged in accordance with WAC 296-20-051.

Consultations ((is)) are also required in the following ((cases)) situations:

(1) All ((elective)) nonemergent neck and back surgery.

(2) All repeat ((elective)) nonemergent major surgery((, except inguinal hernia)).

(3) All ((elective)) nonemergent major surgery on a patient with serious medical, emotional or social problems which are likely to complicate recovery.

(4) All procedures of a controversial nature or type not in common use for the specific condition.

(5) Surgical cases where there are complications or unfavorable circumstances such as age, preexisting conditions or interference with occupational requirements, etc.

(6) Conservative or chiropractic care extending past ninety days following initial visit. Such consultation may be with a chiropractic consultant.

AMENDATORY SECTION (Amending Order 79-18, filed 11/30/79, effective 1/1/80)

WAC 296-20-12502 PHYSICIAN ASSISTANT MODIFIERS. As the scope of physician assistant treatment covers a broad area of treatment procedures, the following modifier codes are to be used after the applicable procedure code.

-01 Physician Assistant, Type A License, if performing procedure without presence of supervising physician. Bill 80% of Procedure Value.

-02 Physician Assistant, Type B License, if performing procedure without presence of supervising physician. Bill 75% of Procedure Value.

((-03 Physician Assistant, Type C License, if performing procedure without presence of supervising physician. Bill 70% of Procedure Value.))

-04 Physician Assistant, Type A License, if performing procedure in presence of supervising physician. Bill 80% of Procedure Value.

-05 Physician Assistant, Type B License, if performing procedure in presence of supervising physician. Bill 75% of Procedure Value.

((-06 Physician Assistant, Type C License, if performing procedure in presence of supervising physician. Bill 75% of Procedure Value.))

-99 Multiple modifiers: Under certain circumstances, multiple modifier may be applicable. One or more such modifiers may be taken from another section, as applicable. For example, a physician assistant might be serving as a surgical assistant (modifier -80), assisting in performing a multiple or bilateral procedure (modifier -50). In such cases, he would add this modifier (-99) to the procedure code and briefly indicate the circumstances.

AMENDATORY SECTION (Amending Order 74-32, filed 6/21/74, effective 10/1/74)

WAC 296-20-680 CLASSIFICATION OF DISABILITIES IN PROPORTION TO TOTAL BODILY IMPAIRMENT.

- (1) Permanent Cervical and Cervico-Dorsal Impairments

Category	1	0%
	2	10%
	3	20%
	4	25%
	5	35%

(2) Permanent Dorsal Region Impairments

Category	1	0%
	2	10%
	3	20%

(3) Permanent Dorso-Lumbar and Lumbosacral Impairments

Category	1	0%
	2	5%
	3	10%
	4	15%
	5	25%
	6	40%
	7	60%
	8	75%

(4) Permanent Impairments of the Pelvis

Category	1	0%
	2	2%
	3	5%
	4	5%
	5	5%
	6	5%
	7	10%
	8	10%
	9	15%

(5) Permanent Convulsive Neurologic Impairments

Category	1	0%
	2	10%
	3	35%
	4	60%

(6) Permanent Mental Health Impairments

Category	1	0%
	2	10%
	3	25%
	4	45%
	5	70%

(7) Permanent Cardiac Impairments

Category	1	0%
	2	10%
	3	20%
	4	35%
	5	50%
	6	65%

(8) Permanent Respiratory Impairments

Category	1	0%
	2	15%
	3	25%
	4	40%
	5	65%

(9) Permanent Air Passage Impairments

Category	1	0%
	2	5%
	3	15%
	4	25%
	5	35%
	6	60%

(10) Permanent Air Passage Impairments Due to Nasal Septum Perforations

Category	1	0%
	2	2%

(11) Permanent Loss of Taste and Smell

Category	1	3%
	2	3%

(12) Permanent Speech Impairments

Category	1	0%
	2	5%
	3	10%
	4	20%
	5	30%
	6	35%

(13) Permanent Skin Impairments

Category	1	0%
	2	5%
	3	10%
	4	25%
	5	40%
	6	60%

(14) Permanent Impairments of Upper Digestive Tract, Stomach, Esophagus or Pancreas

Category	1	0%
	2	5%
	3	10%
	4	35%
	5	60%

(15) Permanent Impairments of Lower Digestive Tract

Category	1	0%
	2	5%
	3	15%
	4	30%

(16) Permanent Impairments of Anal Function

Category	1	0%
	2	5%
	3	15%
	4	25%

(17) Permanent Impairments of Liver and Biliary Tract

Category	1	0%
	2	5%
	3	20%
	4	40%
	5	60%

(18) Permanent Impairments of the Spleen, Loss of One Kidney, and Surgical Removal of Bladder with Urinary Diversion

Category	(10%) 15%	
	2	10%
	3	20%

(19) Permanent Impairments of Upper Urinary Tract

Category	1	0%
	2	10%
	3	25%
	4	45%
	5	65%

(20) Additional Permanent Impairments of Upper Urinary Tract Due to Surgical Diversion

Category	1	10%
	2	15%

(21) Permanent Impairments of Bladder Function

Category	1	0%
	2	10%
	3	20%
	4	30%
	5	50%

(22) Permanent Anatomical or Functional Loss of Testes

Category	1	0%
	2	5%
	3	10%
	4	25%
	5	35%

AMENDATORY SECTION (Amending Order 71-6, filed 6/1/71)

WAC 296-20-051 CONSULTATIONS. In cases presenting diagnostic or therapeutic problems to the attending ((physician)) doctor, consultation with a specialist will be allowed without prior authorization. The consultant must submit his findings and recommendations immediately to the attending ((physician)) doctor and the department or self-insurer. See WAC 296-20-035 for report content requirements.

Whenever possible, the referring ((physician)) doctor should make his x-rays and records available to the consultant to avoid ((the necessity of)) unnecessary duplication. Consultants may proceed with indicated and reasonable x-rays or laboratory work and reasonable diagnostic studies as permitted within their scope of practice.

Consultations will be held with a specialist within a reasonable geographic area.

The attending ((physician)) doctor will not arrange a consultation if he has received notification ((of)) that a Special or Commission Examination is being arranged by the department or self-insurer. If he has had recent consultation and is notified that the department or self-insurer is arranging an examination, he must immediately advise the department or self-insurer of the consultation.

The consultation fee will be paid only if a consultation report is complete and contains all pathological findings as well as all pertinent negative or normal findings. The report must be received in the department within fifteen days from the date of the consultation. No fee is paid to the consultant if the worker fails the appointment.

No transfer will be made to the consultant without the prior approval of the attending doctor and the injured worker.

AMENDATORY SECTION (Amending Order 71-6, filed 6/1/71)

WAC 296-20-055 ((SCOPE)) LIMITATION OF TREATMENT AND TEMPORARY TREATMENT OF UNRELATED CONDITIONS WHEN RETARDING RECOVERY. ((Medical)) Conditions preexisting the injury or occupational disease are not the responsibility of the department. When an unrelated condition is being treated concurrently with the industrial condition, the attending doctor must notify the department or self-insurer immediately and submit the following:

- (1) Diagnosis and/or nature of unrelated condition.
- (2) Treatment being rendered.
- (3) The effect, if any, on industrial condition.

Temporary treatment of an unrelated condition may be allowed, upon prior approval by the department or self-insurer, provided these conditions directly retard recovery of the accepted condition. The department or self-insurer will not approve or pay for treatment for a known preexisting unrelated condition for which the claimant was receiving treatment prior to his industrial injury or occupational disease, which is not retarding recovery of his industrial condition.

A thorough explanation of how the unrelated condition is affecting the industrial condition must be included with the request for authorization.

The department or self-insurer will not pay for treatment of an unrelated condition when it no longer exerts any influence upon the accepted industrial condition. When treatment of an unrelated condition is being rendered, reports must be submitted monthly outlining the effect of treatment on both the unrelated and the accepted industrial conditions.

THE DEPARTMENT OR SELF-INSURER WILL NOT PAY FOR TREATMENT FOR UNRELATED CONDITIONS UNLESS ((IF HAS BEEN PREVIOUSLY)) SPECIFICALLY AUTHORIZED ((BY THE DEPARTMENT)). This includes prescription of drugs and ((medications)) medicines.

AMENDATORY SECTION (Amending Order 74-39, filed 11/22/74, effective 1/1/75)

WAC 296-20-06101 ((DOCTOR'S SUPPLEMENTAL REPORT)) REPORTING REQUIREMENTS. ((The department of

self-insurer will make periodic requests for the doctor to submit a supplemental report. When requesting a report the department or self-insurer will forward a "Doctor's Supplemental Report" form to be completed and returned to the department or self-insurer. It is intended that this report contain sufficient information to allow the department to authorize treatment, pay time loss compensation and medical bills without requiring additional correspondence from the doctor. When the report is completed in adequate detail for this purpose and returned promptly, the department or the self-insurer, as the case may be, will pay for its completion. Billing for the report must be submitted in accordance with the procedures outlined in WAC 296-20-125.) As per WAC 296-20-035, narrative reports in cases extending beyond ninety days are required in order to authorize treatment, pay Time Loss Compensation and treatment bills. Such reports are required at thirty day intervals during first ninety days of treatment and at sixty day intervals thereafter. Attachment of office notes to billings for office visits may reduce the need for subsequent reports. However, in some instances, the department or self-insurer may request the doctor to provide a narrative report supplying additional specific information and/or a status report. When such report is provided in adequate detail to allow adjudication, the department or self-insurer will pay the fee allowed under procedure #99080.

AMENDATORY SECTION (Amending Order 77-27, filed 11/30/77, effective 1/1/78)

WAC 296-20-065 TRANSFER OF ((PHYSICIANS)) DOCTORS. All transfers from one ((physician)) doctor to another must be approved by the department or self-insurer. Normally transfers will be allowed only after the worker has been under the care of the attending ((physician)) doctor for sufficient time for the doctor to: Complete necessary diagnostic studies, ((to)) establish an appropriate treatment regimen, and ((to)) evaluate the efficacy of the therapeutic ((course)) program.

When a transfer is approved, the new attending doctor must be provided with a copy of the worker's treatment record by the previous attending doctor. X-rays in ((these cases will be)) the possession of the previous attending doctor must be immediately forwarded to the new attending ((physician)) doctor.

The department or self-insurer reserves the right to require a worker to select another ((physician)) doctor or specialist for treatment, under the following conditions:

- (1) When more conveniently located ((physicians)) doctors, qualified to provide the necessary treatment, are available.
- (2) When the attending ((physician)) doctor fails to cooperate in observance and compliance with the department rules.
- (3) In time loss cases where reasonable progress towards return to work is not shown.
- (4) Cases requiring specialized treatment, which the attending ((physician)) doctor is not qualified to render, or is outside the scope of the attending doctor's license to practice.
- (5) Where the department or self-insurer finds a transfer of ((physicians)) doctor to be appropriate and has requested the ((workman)) worker to transfer in accordance with this rule, the department or self-insurer may select a new attending ((physician)) doctor if the worker unreasonably refuses or delays in selecting another attending ((physician)) doctor.
- (6) In cases where the ((physician)) attending doctor is not qualified to treat each of several accepted conditions ((which the attending physician is not qualified to treat)). This does not preclude concurrent care where indicated. See WAC 296-20-071.
- (7) No transfer will be approved to a consultant or special examiner without the approval of the attending doctor and the worker.

Transfers will be authorized for the foregoing reasons or where the department or self-insurer in its discretion finds that a transfer is in the best interest of returning the injured worker to a productive role in society.

When a flat fee case is transferred to another ((physician)) doctor it is the responsibility of the two ((physicians)) doctors involved to determine the proper apportionment of the total fee for the flat fee procedure. It shall be the responsibility of the operating ((physician)) doctor to advise the department or self-insurer of the proportion of the post-operative care provided by each ((physician)) doctor and the fee distribution. Each ((physician)) doctor must submit a separate bill to the department or self-insurer for his portion of the care. No payment will be made until this apportionment has been received by the department or self-insurer. If no agreement can be reached between the two ((physicians)) doctors concerning the fee distribution, the matter will

be referred to the Washington State Medical Association's Medical Advisory and Utilization Review Committee to the Department of Labor and Industries.

AMENDATORY SECTION (Amending Order 75-39, filed 11/28/75, effective 1/1/76)

WAC 296-20-071 CONCURRENT TREATMENT. In some cases, treatment by more than one (~~physician concurrently with~~) practitioner may be allowed (~~only when the conditions resulting from the injury involve more than one system requiring specialty care, and when approved by the attending physician. When more than one physician are providing care, the department or self-insurer shall designate one as the attending physician who shall be responsible for directing care, including all prescriptions provided~~). The department or self-insurer will consider concurrent treatment when the accepted conditions resulting from the injury involve more than one system and require specialty care.

When requesting consideration for concurrent treatment, the attending doctor must provide the department or self-insurer with the following:

The name, address and specialty of all other practitioners assisting in the treatment of the injured worker and an outline of their responsibility in the case.

When concurrent treatment is allowed, the department or self-insurer will recognize one primary attending doctor, who will be responsible for prescribing all medications; directing the over-all treatment program; providing copies of all reports and other data received from the involved practitioners and, in time loss cases, providing adequate certification evidence of the worker's inability to work.

AMENDATORY SECTION (Amending Order 71-6, filed 6/1/71)

WAC 296-20-075 HOSPITALIZATION. Hospitalization (~~is allowed~~) will be paid when indicated for (~~those cases in which the care~~) treatment of the (~~patient is of such complicated or exacting nature that it would be detrimental to his treatment and recovery if not hospitalized~~) accepted condition(s). (~~Need for~~) Hospitalization (~~must be justified by report~~) solely for physical therapy or administration of injectable drugs will not be paid.

(~~When a case no longer requires care in an acute care hospital, arrangements must be made with the department for transferring the patient to a convalescent facility or a nursing home until he is ready for discharge to his home.~~)

Discharge (~~of the patient~~) from the hospital shall be at the earliest date possible consistent with proper (~~medical~~) health care. If transfer to a convalescent center or nursing home is indicated, prior arrangements should be made with the department or self-insurer. See WAC 296-20-091 for further information.

AMENDATORY SECTION (Amending Order 70-12, filed 12/1/70, effective 1/1/71)

WAC 296-20-081 UNRELATED CONCURRENT ELECTIVE SURGERY. Elective surgery for an unrelated condition is not normally permitted during hospitalization for an industrial condition. Under some circumstances unrelated elective surgery may be permitted through prior agreement and approval by the department provided the unrelated surgery is not more extensive than the procedure for the industrial condition. The requesting doctor must submit a written request and identify which services are needed due to the industrial injury and which are needed due to unrelated conditions, along with an estimate of what effect, if any, the unrelated surgery will have on the accepted conditions and recovery time from surgery.

AMENDATORY SECTION (Amending Order 71-6, filed 6/1/71)

WAC 296-20-091 PRIVATE ROOM—INTENSIVE CARE SPECIAL OR HOME NURSES. (~~In a critical case where~~) When the worker's condition is such that he requires special nurses, a private room or intensive care (~~are indicated~~), the attending (~~physician~~) doctor may order these services, subject to later department or self-insurer approval of the claim(;) without prior authorization. The department or self-insurer should be notified immediately by collect telephone.

RCW 51.32.060 provides attendant care for injured workers on total permanent disability pension when such injured worker is so "physically helpless as to be unable to care for his personal needs". However,

prior to Total Permanent Disability determination some other workers, i.e., paraplegic, quadriplegic, double amputees, multiple fractures, etc. may either temporarily or permanently require special or attendant (home nurse) care.

When the attending doctor has reason to believe such care is needed the following information must be submitted in addition to basic report requirements outlined in WAC 296-20-035:

(1) Description of special/home nurse care required to include estimated time required i.e., catheterization, 3 times per day -30 minutes; bathing, 2 times per day -one hour; toilet transfers -as needed; dressing change, 4 times per day -two hours.

(2) Skill level or special training required to administer care -i.e., RN; LPN; family member who has received special training; no special training required.

(3) If known, name and address of person willing to provide care.

(4) Length of time special/home nurse care will be required.

Fees for home nurse/attendant care are negotiable based upon care provided, and level of training of provider.

In addition, the department or self-insurer may authorize and pay for visiting nurse care necessary for evaluation or instruction of home health care provider.

AMENDATORY SECTION (Amending Order 71-6, filed 6/1/71)

WAC 296-20-097 REOPENINGS. (~~After~~) When a claim has been closed by department or self-insurer order and notice for sixty days, (~~a reopening thereof requires the~~) submission of a formal "Application to Reopen Claim for Aggravation of Condition" form (LI 210-) is necessary. Exam and diagnostic studies associated with the reopening application will be (~~allowed~~) paid regardless of department or self-insurer action on the application. **NO OTHER BENEFITS WILL BE PAID UNTIL ADJUDICATION DECISION IS RENDERED.** Reopening applications should be submitted immediately. (~~If~~) When reopening is granted, (~~necessary treatment rendered prior to the submission of the application will be accepted by the department~~) the department or self-insurer can pay time loss and treatment benefits only for a period not to exceed sixty days prior to date the application is received by department or self-insurer. Necessary treatment should not be deferred pending a department or self-insurer adjudication decision (~~upon the application by the department~~). However, should reopening be denied treatment costs become the financial responsibility of the worker.

NEW SECTION

WAC 296-20-09701 REQUEST FOR RECONSIDERATION. On occasion, a claim may be closed prematurely or in error. When this occurs the attending doctor should submit immediately in writing his request for reconsideration of the closing action, supported by an outline of:

- (1) The claimant's current condition.
- (2) The treatment program being received.
- (3) The prognosis of when stabilization will occur.

All requests for reconsideration must be received by the department or self-insurer within sixty days from date of the order and notice of closure. Request for reconsideration of other department or self-insurer orders or actions must be made in writing within sixty days of the date of the action or order.

AMENDATORY SECTION (Amending Order 71-6, filed 6/1/71)

WAC 296-20-100 EYE GLASSES AND REFRACTIONS. The department (~~shall~~) or self-insurer will be (~~liable~~) responsible for replacement of glasses or contact lenses only (~~for~~) to the extent of the cost of restoring damaged (~~eye glasses~~) item to (~~their~~) its condition at the time of the accident.

If glasses are repairable and a worker determines that he/she prefers a replacement, the department or self-insurer is responsible only for the cost of the repairs and the worker is responsible for the difference between repair and replacement costs.

(~~Lenses broken or lost in an industrial accident are replaceable by the department.~~) Refraction to replace a broken or lost lens (~~in fact~~) is only payable when (~~the report substantiates~~) it is substantiated that the prescription (~~could~~) was not (~~be obtained~~) available from the broken lens or (~~is not available elsewhere~~) any other source. If the prescription is available, and the patient needs a new refraction, he is responsible for the costs of (~~the refraction~~) such exam.

If a refractive error is ~~((due to the injury))~~ the result of the industrial condition, refraction and glasses or contact lenses will be authorized and paid by the department or self-insurer.

When broken or lost glasses or contact lenses are the only injury or condition suffered, the doctor's portion of the report of accident can be completed by an optometrist or other vendor furnishing the replacement. A report of accident must be received by the department or self-insurer in order to adjudicate the claim.

AMENDATORY SECTION (Amending Order 70-12, filed 12/1/70, effective 1/1/71)

WAC 296-20-110 DENTAL. Only dentists or dental specialists licensed in the state in which they practice are eligible to treat ~~((cases))~~ injured workers entitled to benefits under the ~~((Medical Aid Act))~~ Industrial Insurance Law.

If only a dental injury is involved, the ~~((physician's))~~ doctor's portion of the report of accident must be completed by the dentist to whom the ~~((patient))~~ worker first reports. See WAC 296-20-025 for further information.

If the accident report has been submitted by another ~~((physician))~~ doctor, the dentist's report ~~((may))~~ should be made by letter. In addition to the information required under WAC 296-20-025, the dentist should outline the extent of the dental injury and the treatment program necessary to repair damage due to the injury.

The department or self-insurer is responsible only for repair or replacement of teeth injured or dentures broken as a result of an industrial accident. ~~((The patient must be so advised.))~~ Any dental work needed due to underlying conditions unrelated to the industrial injury is the responsibility of the worker. It is the responsibility of the dentist to advise the worker accordingly.

Bills covering the cost of dentures should be submitted for the denture only and should not include the cost for subsequent relining. If relining becomes necessary, authorization for relining must be obtained in advance from the department or self-insurer.

Bills must be submitted to the department or self-insurer within ~~((sixty))~~ ninety days from the date ~~((that))~~ the service is rendered. Bills must itemize the service rendered, the materials used and it must be accompanied by a dental chart illustrating the teeth insured. See WAC 296-20-125 for further billing instructions.

NEW SECTION

WAC 296-20-1101 HEARING AIDS AND MASKING DEVICES. The department or self-insurer is responsible for replacement or repair of hearing aids damaged or lost due to an industrial accident only to the extent of restoring the damaged item to its condition at time of the accident. If the hearing aid is repairable and the worker determines he prefers replacement, the department or self-insurer is responsible only to the extent of the cost to repair the original and the worker is responsible for the difference between repair and replacement costs.

When the department or self-insurer has accepted a hearing loss condition either as a result of industrial injury or occupational exposure, the department or self-insurer will furnish a hearing aid (hearing aids when bilateral loss is present) when prescribed or recommended by a physician.

The department or self-insurer will bear the cost of repairs or replacement due to normal wear and the cost of battery replacement for the life of the hearing aid.

In cases of accepted tinnitus, the department or self-insurer may provide masking devices under the same provisions as outlined for hearing aids due to hearing loss.

Provision of masking devices and hearing aids require prior authorization.

NEW SECTION

WAC 296-20-1102 SPECIAL EQUIPMENT RENTAL AND PURCHASE PROSTHETIC AND ORTHOTICS EQUIPMENT. The department or self-insurer will authorize and pay rental fee for equipment or devices if the need for the equipment will be for a short period of treatment during the acute phase of condition. If the equipment will be needed on long term basis, the department or self-insurer will consider purchase of the equipment or device.

The prescribing doctor must obtain prior authorization from the department or self-insurer, for rental or purchase of special equipment or devices.

The department or self-insurer will authorize and pay for prosthetics and orthotics as needed by claimant and substantiated by attending doctor. If such items are furnished by the attending doctor, the department or self-insurer will reimburse the doctor his cost for the item plus a reasonable fitting fee.

The department or self-insurer will repair or replace originally provided damaged, broken, or worn-out prosthetics, orthotics, or special equipment devices upon documentation and substantiation from the attending doctor.

Provision of such equipment requires prior authorization.

Equipment not requiring prior authorization includes crutches, cervical collars, lumbar and rib belts, and other commonly used orthotics of minimal cost.

Personal appliances such as vibrators, heating pads, exercise equipment, jacuzzis, etc. will not be authorized or paid.

NEW SECTION

WAC 296-20-1103 TRAVEL EXPENSE. The department or self-insurer will reimburse travel expense incurred by claimants for the following reasons: (1) Special exam at department's or self-insurer's request; (2) vocational evaluation at department's or self-insurer's request; (3) treatment at Department Rehabilitation Center; (4) fitting of prosthetic device; and (5) upon prior authorization for treatment when claimant must travel more than ten miles one-way from his home to the nearest point of adequate treatment. Travel expense is not payable when adequate treatment is available within ten miles of claimant's home, yet the claimant prefers to report to an attending doctor outside his home area.

Travel expense will be reimbursed at the current department established rate.

When travel involves need for food and lodging these items will be reimbursed at the currently established rates.

Parking, vehicle storage, ferry and bridge tolls will be reimbursed if receipt is provided. No receipt will be required for parking expenses under two dollars.

Request for reimbursement of travel expenses must be received by the department or self-insurer within ninety days of the date expense was incurred.

AMENDATORY SECTION (Amending Order 71-6, filed 6/1/71)

WAC 296-20-115 FLAT FEES. The values for procedures listed in the surgical section of the Fee Schedule include the surgical procedure and the "follow-up days". Necessary follow-up care beyond this period is to be added on a fee-for-service basis.

When post-operative care is to be provided by other than the operating surgeon, it shall be the responsibility of the two ~~((physicians))~~ doctors involved to determine the appropriate apportionment of the total fee for the flat fee procedure. It shall be the responsibility of the operating surgeon to advise the department or self-insurer of the proportion of the post-operative care provided by each ~~((physician))~~ doctor and the fee distribution. Each ~~((physician))~~ doctor must submit a separate bill to the department or self-insurer for his portion of the care. No payment will be made until notice of the apportionment has been received by the department or self-insurer. In the event that no agreement can be reached concerning the distribution of the fee, the matter will be referred to the Washington State Medical Association's Medical Advisory and Utilization Review Committee to the Department of Labor and Industries.

AMENDATORY SECTION (Amending Order 71-6, filed 6/1/71)

WAC 296-20-120 PROCEDURES NOT LISTED IN THIS SCHEDULE. Procedures not specifically listed will be given values comparable to those of the listed procedures of closest similarity. ~~((The operative record or a written report of the procedure must be submitted.))~~ Codes for unlisted procedures can be found in each section. See 'BR' instructions under WAC 296-20-010 for needed billing documentation.

AMENDATORY SECTION (Amending Order 77-27, filed 11/30/77, effective 1/1/78)

WAC 296-20-121 X-RAYS. ~~((Radiographs are required for comparison and interpretation in determining))~~ Recognizing the greatest need for access to x-rays lies with the attending doctor, the department or self-insurer does not require submission of the actual films except upon specific request when needed for purposes of permanent

disability rating, other administrative or legal decisions, ~~((and for cases))~~ or in litigation ~~((hence must be available to the department, the self-insurer and/or the board of industrial insurance appeals on request))~~ cases. The department or self-insurer requires the attending doctor retain x-rays ~~((must be retained and available))~~ for a period of not less than seven years ~~((by the physician))~~. In transfer cases, the x-rays in the possession of the current attending doctor must be made available to the new attending doctor.

When requesting consultation, the attending doctor should make any x-rays in his possession available to the consultant.

When ~~((a physician's))~~ the doctor's office is closed because of death, retirement or leaving the state, ~~((department approved custodial))~~ arrangements must be made with the department or self-insurer regarding custody of x-rays to insure availability on request. When submitting billing for x-ray service, a copy of the x-ray findings must be attached. No payment will be made for excessive or unnecessary x-rays. No payment will be made on closed or rejected claims, except under conditions outlined in WAC 296-20-124.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-20-124 REJECTED AND CLOSED CLAIMS. (1) ~~((Except for services requested by the department or the self-insurer or diagnostic procedures forming the basis for action on a claim;))~~ No payment will be made for treatment or medication ~~((will be made in))~~ on rejected claims ~~((for which responsibility has not been accepted (rejected))~~ or for services rendered after the date of claim closure.

(2) When ~~((a claim is closed))~~ the department or self-insurer has denied responsibility for an alleged injury or industrial condition the only services ~~((for))~~ which ~~((payment))~~ will be ~~((made))~~ paid are those ~~((services requested by))~~ which were carried out at the specific request of the department or the self-insurer and/or ~~((the examination, along with necessary))~~ those examination or diagnostic ~~((procedures, in connection with the submission of an application to reopen a claim for aggravation))~~ services which served as a basis for the adjudication decision. Following the date of the order and notice of claim closure, the department or self-insurer will be responsible only for those services specifically requested or those examinations, and diagnostic services necessary to complete and file a reopening application. Replacement of prosthetics, orthotics, and special equipment can be provided on closed claims after prior authorization. See WAC 296-20-1102 for further information.

AMENDATORY SECTION (Amending Order 77-27, filed 11/30/77, effective 1/1/78)

WAC 296-20-125 BILLING PROCEDURES. All services rendered must be in accordance with the Medical Aid Rules. The department or self-insurer may reject bills for services rendered in violation of these rules. The injured worker may not be billed for services rendered in violation of these rules.

(1) Bills must be itemized on department or self-insurer forms ~~((as the case may be, specifying the date, type of service and charges for each service))~~ or other forms which have been approved by the department or self-insurer.

(2) Bills must specify the date and type of service, the appropriate procedure code, and the charges for each service.

(3) Special department prescription forms are available upon request and should be used whenever possible. If department prescription forms are not available, a copy of the prescription, with the ~~((physician's))~~ doctor's signature, must ~~((accompany all))~~ be attached to bills for medication or other supplies. Prescriptions for self-insurer workers cannot be written on department forms.

~~((3))~~ (4) The bill form must be completed ~~((in detail))~~ to include the ~~((claim number. The account number and name of the practitioner rendering service must be included on the bill. Bills will be accepted when signed by other than the practitioner rendering service. When bills are prepared by someone else, responsibility for the completeness and accuracy of the description of services and charges rests with the practitioner rendering the service))~~ following:

- (a) Worker's name and address;
- (b) Worker's claim number;
- (c) Date of injury;
- (d) Area of body injured including identification of right or left if appropriate;
- (e) The name and address of the practitioner rendering the services and if assigned, the payee account number;

(f) Date of billing;
(g) Responsibility for the completeness and accuracy of the description of services and charges billed rests with the practitioner rendering the service, regardless of who actually completes the bill form;

(h) Attachment of supporting documentation required under (6) below.

~~((4))~~ (5) ~~((For a))~~ Bills ~~((to be considered for payment; it))~~ must be received ~~((in the department or by the self-insurer))~~ within ninety days ~~((from the date))~~ of ~~((each specific treatment and/or))~~ service ~~((s or procedures rendered or performed))~~ to be considered for payment. All services rendered during a billing period can be billed at end of the billing period. ~~((Bills for flat fee procedures may be exempt from this ninety day requirement under the following conditions:~~

(a) When the flat fee period exceeds ninety days, the bill must be received in the department or by the self-insurer prior to the expiration of the flat fee period.

A complete narrative interpretation of the x-rays must be submitted with the bill.

(5) Bills for x-ray services must be submitted in conformance with the fee specified in the fee schedule, for the particular service.)

(6) ~~((Payment will not be made for excessive or unnecessary x-rays. No payment will be made for x-rays taken on rejected or closed claims except as outlined in paragraph (8) below.))~~ The following supporting documentation is required when billing for services:

- (a) Laboratory and pathology reports;
- (b) X-ray findings;
- (c) Operative reports;
- (d) Office notes;
- (e) Consultation reports;
- (f) Special diagnostic study reports;
- (g) For BR procedures - see WAC 296-20-010 for requirements;

and

(h) Special or closing exam reports.

(7) ~~((Bills for laboratory work must be accompanied by copies of the reports of findings:~~

~~((8) Except for services requested by the department or self-insurer, completion of a reopening examination and application (see Code 90089) along with any necessary diagnostic procedures are the only services for which payment may be made while the claim is closed. UNDER NO CIRCUMSTANCES CAN BILLS BE PAID FOR ANY OTHER SERVICES RENDERED WHILE A CLAIM IS CLOSED.~~

(9) The department or the self-insurer may reject bills for services rendered in violation of the medical aid rules.

(10) The emergency room will be considered the office for those physicians providing regular emergency room care to the hospital, and fees will be allowed on this basis.

(H) The claim number must be placed on each bill and on each ~~((page of attached documents))~~ attachment in upper right-hand corner.

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 296-20-085 ISOLATION OF INFECTED CASES.

AMENDATORY SECTION (Amending Order 79-18, filed 11/30/79, effective 1/1/80)

WAC 296-20-135 CONVERSION FACTOR TABLE—MEDICINE, CHIROPRACTIC, PHYSICAL THERAPY, DRUGLESS THERAPEUTICS AND NURSE PRACTITIONER SECTIONS. This table is a conversion of fee schedule unit values to fees in dollar amounts at \$0.~~((88))~~96 per unit. This conversion factor is to be applied to the medicine section of the fee schedule, the chiropractic, physical therapy, drugless therapeutic and nurse practitioner sections.

Unit Value	@\$ ((88)) 0.96	Unit Value	@\$ ((88)) 0.96	Unit Value	@\$ ((88)) 0.96
.1	((.09)) .10	5.0	((4.40)) 4.80	9.9	((8.71)) 9.50
.2	((.18)) .19	5.1	((4.49)) 4.90	10.0	((8.80)) 9.60
.3	((.27)) .29	5.2	((4.58)) 4.99	10.5	((9.24)) 10.08

Unit Value	@\$(0.88) 0.96	Unit Value	@\$(0.88) 0.96	Unit Value	@\$(0.88) 0.96	Unit Value	@\$(0.88) 0.96	Unit Value	@\$(0.88) 0.96	Unit Value	@\$(0.88) 0.96
.4	((-.35)) <u>.38</u>	5.3	((4.66)) <u>5.09</u>	11.0	((9.68)) <u>10.56</u>	4.6	((4.05)) <u>4.42</u>	9.5	((8.36)) <u>9.12</u>	160.0	((140.80)) <u>153.60</u>
.5	((-.44)) <u>.48</u>	5.4	((4.75)) <u>5.18</u>	11.5	((10.12)) <u>11.04</u>	4.7	((4.14)) <u>4.51</u>	9.6	((8.45)) <u>9.22</u>	170.0	((149.60)) <u>163.20</u>
.6	((-.53)) <u>.58</u>	5.5	((4.84)) <u>5.28</u>	12.0	((10.56)) <u>11.52</u>	4.8	((4.22)) <u>4.61</u>	9.7	((8.54)) <u>9.31</u>	180.0	((158.40)) <u>172.80</u>
.7	((-.62)) <u>.67</u>	5.6	((4.93)) <u>5.38</u>	12.5	((11.00)) <u>12.00</u>	4.9	((4.31)) <u>4.70</u>	9.8	((8.62)) <u>9.41</u>	190.0	((167.20)) <u>182.40</u>
.8	((-.70)) <u>.77</u>	5.7	((5.02)) <u>5.47</u>	13.0	((11.44)) <u>12.48</u>					200.0	((176.00)) <u>192.00</u>
.9	((-.79)) <u>.86</u>	5.8	((5.10)) <u>5.57</u>	13.5	((11.88)) <u>12.96</u>						
1.0	((-.88)) <u>.96</u>	5.9	((5.19)) <u>5.66</u>	14.0	((12.32)) <u>13.44</u>						
1.1	((-.97)) <u>1.06</u>	6.0	((5.28)) <u>5.76</u>	14.5	((12.76)) <u>13.92</u>						
1.2	((-1.06)) <u>1.15</u>	6.1	((5.37)) <u>5.86</u>	15.0	((13.20)) <u>14.40</u>						
1.3	((-1.14)) <u>1.25</u>	6.2	((5.46)) <u>5.95</u>	16.0	((14.08)) <u>15.36</u>						
1.4	((-1.23)) <u>1.34</u>	6.3	((5.54)) <u>6.05</u>	17.0	((14.96)) <u>16.32</u>						
1.5	((-1.32)) <u>1.44</u>	6.4	((5.63)) <u>6.14</u>	18.0	((15.84)) <u>17.28</u>						
1.6	((-1.41)) <u>1.54</u>	6.5	((5.72)) <u>6.24</u>	19.0	((16.72)) <u>18.24</u>						
1.7	((-1.50)) <u>1.63</u>	6.6	((5.81)) <u>6.34</u>	20.0	((17.60)) <u>19.20</u>						
1.8	((-1.58)) <u>1.73</u>	6.7	((5.90)) <u>6.43</u>	21.0	((18.48)) <u>20.16</u>						
1.9	((-1.67)) <u>1.82</u>	6.8	((5.98)) <u>6.53</u>	22.0	((19.36)) <u>21.12</u>						
2.0	((-1.76)) <u>1.92</u>	6.9	((6.07)) <u>6.62</u>	23.0	((20.24)) <u>22.08</u>						
2.1	((-1.85)) <u>2.02</u>	7.0	((6.16)) <u>6.72</u>	24.0	((21.12)) <u>23.04</u>						
2.2	((-1.94)) <u>2.11</u>	7.1	((6.25)) <u>6.82</u>	25.0	((22.00)) <u>24.00</u>						
2.3	((-2.02)) <u>2.21</u>	7.2	((6.34)) <u>6.91</u>	30.0	((26.40)) <u>28.80</u>						
2.4	((-2.11)) <u>2.30</u>	7.3	((6.42)) <u>7.01</u>	35.0	((30.80)) <u>33.60</u>						
2.5	((-2.20)) <u>2.40</u>	7.4	((6.51)) <u>7.10</u>	40.0	((35.20)) <u>38.40</u>						
2.6	((-2.29)) <u>2.50</u>	7.5	((6.60)) <u>7.20</u>	45.0	((39.60)) <u>43.20</u>						
2.7	((-2.38)) <u>2.59</u>	7.6	((6.69)) <u>7.30</u>	50.0	((44.00)) <u>48.00</u>						
2.8	((-2.46)) <u>2.69</u>	7.7	((6.78)) <u>7.39</u>	55.0	((48.40)) <u>52.80</u>						
2.9	((-2.55)) <u>2.78</u>	7.8	((6.86)) <u>7.49</u>	60.0	((52.80)) <u>57.60</u>						
3.0	((-2.64)) <u>2.88</u>	7.9	((6.95)) <u>7.58</u>	65.0	((57.20)) <u>62.40</u>						
3.1	((-2.73)) <u>2.98</u>	8.0	((7.04)) <u>7.68</u>	70.0	((61.60)) <u>67.20</u>						
3.2	((-2.82)) <u>3.07</u>	8.1	((7.13)) <u>7.78</u>	75.0	((66.00)) <u>72.00</u>						
3.3	((-2.90)) <u>3.17</u>	8.2	((7.22)) <u>7.87</u>	80.0	((70.40)) <u>76.80</u>						
3.4	((-2.99)) <u>3.26</u>	8.3	((7.30)) <u>7.97</u>	85.0	((74.80)) <u>81.60</u>						
3.5	((-3.08)) <u>3.36</u>	8.4	((7.39)) <u>8.06</u>	90.0	((79.20)) <u>86.40</u>						
3.6	((-3.17)) <u>3.46</u>	8.5	((7.48)) <u>8.16</u>	95.0	((83.60)) <u>91.20</u>						
3.7	((-3.26)) <u>3.55</u>	8.6	((7.57)) <u>8.26</u>	100.0	((88.00)) <u>96.00</u>						
3.8	((-3.34)) <u>3.65</u>	8.7	((7.66)) <u>8.35</u>	105.0	((92.40)) <u>100.80</u>						
3.9	((-3.43)) <u>3.74</u>	8.8	((7.74)) <u>8.45</u>	110.0	((96.80)) <u>105.60</u>						
4.0	((-3.52)) <u>3.84</u>	8.9	((7.83)) <u>8.54</u>	115.0	((101.20)) <u>110.40</u>						
4.1	((-3.61)) <u>3.94</u>	9.0	((7.92)) <u>8.64</u>	120.0	((105.60)) <u>115.20</u>						
4.2	((-3.70)) <u>4.03</u>	9.1	((8.01)) <u>8.74</u>	125.0	((110.00)) <u>120.00</u>						
4.3	((-3.78)) <u>4.13</u>	9.2	((8.10)) <u>8.83</u>	130.0	((114.40)) <u>124.80</u>						
4.4	((-3.87)) <u>4.22</u>	9.3	((8.18)) <u>8.93</u>	140.0	((123.20)) <u>134.40</u>						
4.5	((-3.96)) <u>4.32</u>	9.4	((8.27)) <u>9.02</u>	150.0	((132.00)) <u>144.00</u>						

AMENDATORY SECTION (Amending Order 79-18, filed 11/30/79, effective 1/1/80)

WAC 296-20-140 CONVERSION FACTOR TABLE—ANESTHESIA. This table is a conversion of fee schedule unit values to fees in dollar amounts at \$(+2.30)13.47 per unit. This conversion factor is to be applied to the anesthesia section of the fee schedule.

Unit Value	@\$(+2.30) 13.47	Unit Value	@\$(+2.30) 13.47	Unit Value	@\$(+2.30) 13.47
.1	((+1.23)) <u>1.34</u>	5.0	((61.50)) <u>67.35</u>	9.9	((21.77)) <u>133.35</u>
.2	((2.46)) <u>2.69</u>	5.1	((62.73)) <u>68.69</u>	10.0	((23.00)) <u>134.70</u>
.3	((3.69)) <u>4.04</u>	5.2	((63.96)) <u>70.04</u>	10.5	((29.15)) <u>141.43</u>
.4	((4.92)) <u>5.38</u>	5.3	((65.19)) <u>71.39</u>	11.0	((35.30)) <u>148.17</u>
.5	((6.15)) <u>6.73</u>	5.4	((66.42)) <u>72.73</u>	11.5	((41.45)) <u>154.90</u>
.6	((7.38)) <u>8.08</u>	5.5	((67.65)) <u>74.08</u>	12.0	((47.60)) <u>161.64</u>
.7	((8.61)) <u>9.42</u>	5.6	((68.88)) <u>75.43</u>	12.5	((53.75)) <u>168.37</u>
.8	((9.84)) <u>10.77</u>	5.7	((70.11)) <u>76.77</u>	13.0	((59.90)) <u>175.11</u>
.9	((11.07)) <u>12.12</u>	5.8	((71.34)) <u>78.12</u>	13.5	((66.05)) <u>181.84</u>
1.0	((12.30)) <u>13.47</u>	5.9	((72.57)) <u>79.47</u>	14.0	((72.20)) <u>188.58</u>
1.1	((13.53)) <u>14.81</u>	6.0	((73.80)) <u>80.82</u>	14.5	((78.35)) <u>195.31</u>
1.2	((14.76)) <u>16.16</u>	6.1	((75.03)) <u>82.16</u>	15.0	((84.50)) <u>202.05</u>
1.3	((15.99)) <u>17.51</u>	6.2	((76.26)) <u>83.51</u>	16.0	((90.65)) <u>208.79</u>
1.4	((17.22)) <u>18.85</u>	6.3	((77.49)) <u>84.86</u>	17.0	((96.80)) <u>215.52</u>
1.5	((18.45)) <u>20.20</u>	6.4	((78.72)) <u>86.20</u>	17.5	((102.95)) <u>222.29</u>
1.6	((19.68)) <u>21.55</u>	6.5	((79.95)) <u>87.55</u>	18.0	((109.10)) <u>229.03</u>
1.7	((20.91)) <u>22.89</u>	6.6	((81.18)) <u>88.90</u>	19.0	((115.25)) <u>235.77</u>
1.8	((22.14)) <u>24.24</u>	6.7	((82.41)) <u>90.24</u>	20.0	((121.40)) <u>242.46</u>
1.9	((23.37)) <u>25.59</u>	6.8	((83.64)) <u>91.59</u>	21.0	((127.55)) <u>249.15</u>
2.0	((24.60)) <u>26.94</u>	6.9	((84.87)) <u>92.94</u>	22.0	((133.70)) <u>255.84</u>
2.1	((25.83)) <u>28.28</u>	7.0	((86.10)) <u>94.29</u>	23.0	((139.85)) <u>262.53</u>
2.2	((27.06)) <u>29.63</u>	7.1	((87.33)) <u>95.63</u>	24.0	((146.00)) <u>269.22</u>
2.3	((28.29)) <u>30.98</u>	7.2	((88.56)) <u>96.98</u>	25.0	((152.15)) <u>275.91</u>
2.4	((29.52)) <u>32.32</u>	7.3	((89.79)) <u>98.33</u>	30.0	((194.30)) <u>336.75</u>
2.5	((30.75)) <u>33.67</u>	7.4	((91.02)) <u>99.67</u>	35.0	((236.45)) <u>404.10</u>
2.6	((31.98)) <u>35.02</u>	7.5	((92.25)) <u>101.02</u>	40.0	((278.60)) <u>471.45</u>
2.7	((33.21)) <u>36.36</u>	7.6	((93.48)) <u>102.37</u>	45.0	((320.75)) <u>538.80</u>
2.8	((34.44)) <u>37.71</u>	7.7	((94.71)) <u>103.71</u>	50.0	((362.90)) <u>606.15</u>
2.9	((35.67)) <u>39.06</u>	7.8	((95.94)) <u>105.06</u>	55.0	((405.05)) <u>673.50</u>
3.0	((36.90)) <u>40.40</u>	7.9	((97.17)) <u>106.40</u>	60.0	((447.20)) <u>740.85</u>

Table with 6 columns: Unit Value, @\$(+230), Unit Value, @\$(+230), Unit Value, @\$(+230). Rows 3.1-4.9.

Table with 6 columns: Unit Value, @\$(+42.60), Unit Value, @\$(+42.60), Unit Value, @\$(+42.60). Rows 1.4-4.9.

AMENDATORY SECTION (Amending Order 79-18, filed 11/30/79, effective 1/1/80)

WAC 296-20-145 CONVERSION FACTOR TABLE—SURGERY. This table is a conversion of fee schedule unit values to fees in dollar amounts at \$(+42.60)46.65 per unit. This conversion factor applies only to the surgery section of the fee schedule.

Table with 6 columns: Unit Value, @\$(+42.60), Unit Value, @\$(+42.60), Unit Value, @\$(+42.60). Rows .1-1.3.

AMENDATORY SECTION (Amending Order 79-18, filed 11/30/79, effective 1/1/80)

WAC 296-20-150 CONVERSION FACTOR TABLE—RADIOLOGY. This table is a conversion of the fee schedule unit values to fees in dollar amounts at \$(+4.35)4.76 per unit. This conversion factor is to be applied only to the radiology section of the fee schedule.

Unit Value	@\$(4.35) 4.76	Unit Value	@\$(4.35) 4.76	Unit Value	@\$(4.35) 4.76	Unit Value	@\$(4.35) 4.76	Unit Value	@\$(4.35) 4.76	Unit Value	@\$(4.35) 4.76
.1	(-44) .48	5.0	((21.75)) 23.80	9.9	((43.07)) 47.12	4.3	((18.71)) 20.46	9.2	((40.02)) 43.79	130.0	((565.50)) 618.80
.2	(-87) .95	5.1	((22.19)) 24.28	10.0	((43.50)) 47.60	4.4	((19.14)) 20.94	9.3	((40.46)) 44.26	140.0	((609.06)) 666.40
.3	(-131) 1.43	5.2	((22.62)) 24.75	10.5	((45.68)) 49.98	4.5	((19.58)) 21.42	9.4	((40.89)) 44.74	150.0	((652.50)) 714.00
.4	(-174) 1.90	5.3	((23.06)) 25.23	11.0	((47.85)) 52.36	4.6	((20.01)) 21.89	9.5	((41.33)) 45.22	160.0	((696.00)) 761.60
.5	(-218) 2.38	5.4	((23.49)) 25.70	11.5	((50.03)) 54.74	4.7	((20.45)) 22.37	9.6	((41.76)) 45.69	170.0	((739.50)) 809.20
.6	(-261) 2.86	5.5	((23.93)) 26.18	12.0	((52.20)) 57.12	4.8	((20.88)) 22.84	9.7	((42.20)) 46.17	180.0	((783.00)) 856.80
.7	(-305) 3.33	5.6	((24.36)) 26.66	12.5	((54.38)) 59.50	4.9	((21.32)) 23.32	9.8	((42.63)) 46.64	190.0	((826.50)) 904.40
.8	(-348) 3.81	5.7	((24.80)) 27.13	13.0	((56.55)) 61.88					200.0	((870.00)) 952.00
.9	(-392) 4.29	5.8	((25.23)) 27.61	13.5	((58.73)) 64.26						
1.0	(-435) 4.76	5.9	((25.67)) 28.08	14.0	((60.90)) 66.64						
1.1	(-479) 5.24	6.0	((26.10)) 28.56	14.5	((63.08)) 69.02						
1.2	(-522) 5.71	6.1	((26.54)) 29.04	15.0	((65.25)) 71.40						
1.3	(-566) 6.19	6.2	((26.97)) 29.51	16.0	((69.60)) 76.16						
1.4	(-609) 6.66	6.3	((27.41)) 29.99	17.0	((73.95)) 80.92						
1.5	(-653) 7.14	6.4	((27.84)) 30.46	18.0	((78.30)) 85.68						
1.6	(-696) 7.62	6.5	((28.28)) 30.94	19.0	((82.65)) 90.44						
1.7	(-740) 8.09	6.6	((28.71)) 31.42	20.0	((87.00)) 95.20						
1.8	(-783) 8.57	6.7	((29.15)) 31.89	21.0	((91.35)) 99.96						
1.9	(-827) 9.04	6.8	((29.58)) 32.37	22.0	((95.70)) 104.72						
2.0	(-870) 9.52	6.9	((30.02)) 32.84	23.0	((100.05)) 109.48						
2.1	(-914) 10.00	7.0	((30.45)) 33.32	24.0	((104.40)) 114.24						
2.2	(-957) 10.47	7.1	((30.89)) 33.80	25.0	((108.75)) 119.00						
2.3	(-1001) 10.95	7.2	((31.32)) 34.27	30.0	((130.50)) 142.80						
2.4	(-1044) 11.42	7.3	((31.76)) 34.75	35.0	((152.25)) 166.60						
2.5	(-1088) 11.90	7.4	((32.19)) 35.22	40.0	((174.00)) 190.40						
2.6	(-1131) 12.38	7.5	((32.63)) 35.70	45.0	((195.75)) 214.20						
2.7	(-1175) 12.85	7.6	((33.06)) 36.18	50.0	((217.50)) 238.00						
2.8	(-1218) 13.33	7.7	((33.50)) 36.65	55.0	((239.25)) 261.80						
2.9	(-1262) 13.80	7.8	((33.93)) 37.12	60.0	((261.00)) 285.60						
3.0	(-1305) 14.28	7.9	((34.37)) 37.60	65.0	((282.75)) 309.40						
3.1	(-1349) 14.75	8.0	((34.80)) 38.08	70.0	((304.50)) 333.20						
3.2	(-1392) 15.23	8.1	((35.24)) 38.55	75.0	((326.25)) 357.00						
3.3	(-1436) 15.70	8.2	((35.67)) 39.03	80.0	((348.00)) 380.80						
3.4	(-1479) 16.18	8.3	((36.11)) 39.50	85.0	((369.75)) 404.60						
3.5	(-1523) 16.66	8.4	((36.54)) 39.98	90.0	((391.50)) 428.40						
3.6	(-1566) 17.13	8.5	((36.98)) 40.46	95.0	((413.25)) 452.20						
3.7	(-1610) 17.61	8.6	((37.41)) 40.93	100.0	((435.00)) 476.00						
3.8	(-1653) 18.08	8.7	((37.85)) 41.41	105.0	((456.75)) 499.80						
3.9	(-1697) 18.56	8.8	((38.28)) 41.88	110.0	((478.50)) 523.60						
4.0	(-1740) 19.04	8.9	((38.72)) 42.36	115.0	((500.25)) 547.40						
4.1	(-1784) 19.51	9.0	((39.15)) 42.84	120.0	((522.00)) 571.20						
4.2	(-1827) 19.99	9.1	((39.59)) 43.31	125.0	((543.75)) 595.00						

AMENDATORY SECTION (Amending Order 79-18, filed 11/30/79, effective 1/1/80)					
WAC 296-20-155 CONVERSION FACTOR TABLE—PATHOLOGY. This table is a conversion of the fee schedule unit values to fees in dollar amounts at \$0.((41))45 per unit. This conversion factor is to be applied only to the pathology section of the fee section schedule.					
Unit Value	@\$(4.35) 4.76	Unit Value	@\$(4.35) 4.76	Unit Value	@\$(4.35) 4.76
.1	.04	5.0	((2.05)) 2.25	9.9	((4.06)) 4.45
.2	(-86) .09	5.1	((2.09)) 2.29	10.0	((4.10)) 4.50
.3	(-129) .13	5.2	((2.13)) 2.34	10.5	((4.31)) 4.72
.4	(-172) .18	5.3	((2.17)) 2.38	11.0	((4.51)) 4.95
.5	(-215) .22	5.4	((2.21)) 2.43	11.5	((4.72)) 5.17
.6	(-258) .27	5.5	((2.26)) 2.47	12.0	((4.92)) 5.40
.7	(-301) .31	5.6	((2.30)) 2.52	12.5	((5.13)) 5.62
.8	(-344) .36	5.7	((2.34)) 2.56	13.0	((5.33)) 5.85
.9	(-387) .40	5.8	((2.38)) 2.61	13.5	((5.54)) 6.07
1.0	(-430) .45	5.9	((2.42)) 2.65	14.0	((5.74)) 6.30
1.1	(-473) .49	6.0	((2.46)) 2.70	14.5	((5.95)) 6.52
1.2	(-516) .54	6.1	((2.50)) 2.74	15.0	((6.15)) 6.75
1.3	(-559) .58	6.2	((2.54)) 2.79	16.0	((6.56)) 7.20
1.4	(-602) .63	6.3	((2.58)) 2.83	17.0	((6.97)) 7.65
1.5	(-645) .67	6.4	((2.62)) 2.88	18.0	((7.38)) 8.10
1.6	(-688) .72	6.5	((2.67)) 2.92	19.0	((7.79)) 8.55
1.7	(-731) .76	6.6	((2.71)) 2.97	20.0	((8.20)) 9.00
1.8	(-774) .81	6.7	((2.75)) 3.01	21.0	((8.61)) 9.45
1.9	(-817) .85	6.8	((2.79)) 3.06	22.0	((9.02)) 9.90
2.0	(-860) .90	6.9	((2.83)) 3.10	23.0	((9.43)) 10.35
2.1	(-903) .94	7.0	((2.87)) 3.15	24.0	((9.84)) 10.80
2.2	(-946) .99	7.1	((2.91)) 3.19	25.0	((10.25)) 11.25
2.3	(-989) 1.03	7.2	((2.95)) 3.24	30.0	((12.30)) 13.50
2.4	(-1032) 1.08	7.3	((2.99)) 3.28	35.0	((14.35)) 15.75
2.5	(-1075) 1.12	7.4	((3.03)) 3.33	40.0	((16.40)) 18.00
2.6	(-1118) 1.17	7.5	((3.08)) 3.37	45.0	((18.45)) 20.25

Unit Value	@\$(-+)) .45	Unit Value	@\$(-+)) .45	Unit Value	@\$(-+)) .45
2.7	((+11))	7.6	((3+2))	50.0	((20-50))
	1.21		3.42		22.50
2.8	((+15))	7.7	((3+16))	55.0	((22-55))
	1.26		3.46		24.75
2.9	((+19))	7.8	((3+20))	60.0	((24-60))
	1.30		3.51		27.00
3.0	((+23))	7.9	((3+24))	65.0	((26-65))
	1.35		3.55		29.25
3.1	((+27))	8.0	((3+28))	70.0	((28-70))
	1.39		3.60		31.50
3.2	((+31))	8.1	((3+32))	75.0	((30-75))
	1.44		3.64		33.75
3.3	((+35))	8.2	((3+36))	80.0	((32-80))
	1.48		3.69		36.00
3.4	((+39))	8.3	((3+40))	85.0	((34-85))
	1.53		3.73		38.25
3.5	((+44))	8.4	((3+44))	90.0	((36-90))
	1.57		3.78		40.50
3.6	((+48))	8.5	((3+49))	95.0	((38-95))
	1.62		3.82		42.75
3.7	((+52))	8.6	((3+53))	100.0	((41-100))
	1.66		3.87		45.00
3.8	((+56))	8.7	((3+57))	105.0	((43-105))
	1.71		3.91		47.25
3.9	((+60))	8.8	((3+64))	110.0	((45-110))
	1.75		3.96		49.50
4.0	((+64))	8.9	((3+65))	115.0	((47-115))
	1.80		4.00		51.75
4.1	((+68))	9.0	((3+69))	120.0	((49-120))
	1.84		4.05		54.00
4.2	((+72))	9.1	((3+73))	125.0	((51-125))
	1.89		4.09		56.25
4.3	((+76))	9.2	((3+77))	130.0	((53-130))
	1.93		4.14		58.50
4.4	((+80))	9.3	((3+81))	140.0	((57-140))
	1.98		4.18		63.00
4.5	((+85))	9.4	((3+85))	150.0	((61-150))
	2.02		4.23		67.50
4.6	((+89))	9.5	((3+90))	160.0	((65-160))
	2.07		4.27		72.00
4.7	((+93))	9.6	((3+94))	170.0	((69-170))
	2.11		4.32		76.50
4.8	((+97))	9.7	((3+98))	180.0	((73-180))
	2.16		4.36		81.00
4.9	((2-01))	9.8	((4-02))	190.0	((77-190))
	2.20		4.41		85.50
				200.0	((82-200))
					90.00

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-20-170 PHARMACY—ACCEPTANCE OF RULES AND FEES. ((The)) Acceptance and filling of a prescription for an injured worker entitled to benefits under the Industrial Insurance Law, constitutes acceptance of the department's ((Medical Aid Rules and shall comply with its)) rules and fees. When there is questionable eligibility, (i.e., no claim number, prescription is for medication other than usually prescribed for industrial injury; or pharmacist has reason to believe claim is closed or rejected), the pharmacist may require the worker to pay for the prescription. In these cases, the pharmacist must furnish the claimant with a signed receipt and a nonnegotiable copy of the prescription in order for the worker to bill the department or self-insurer for reimbursement. The worker must submit such reimbursement request within ninety days of service.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-20-17001 ALLOWANCE AND PAYMENT FOR MEDICATION. The department or self-insurer will pay for medications or supplies dispensed for the treatment of conditions resulting from an industrial injury and/or conditions which are retarding the recovery from the industrial injury, for which the department or self-insurer has accepted temporary responsibility. No bills will be paid for medication dispensed((following closure)) after the date of order and notice of ((a)) claim closure, on an accepted claim; nor, on rejected claims ((or)); nor for conditions unrelated to the industrial ((injury will not be paid)) condition even though the prescription may be written on departmental prescription forms.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-20-17002 BILLING. In addition to the billing procedures described in WAC 296-20-125 the current national drug code number for each prescribed drug, followed by the wholesale cost to the pharmacy must be entered on each prescription. Bills for medication not containing this information ((on each prescription form)) will be returned to the pharmacy. ((Billing will be in accordance with the procedures outlimes in WAC 296-20-125.))

AMENDATORY SECTION (Amending Order 77-27, filed 11/30/77, effective 1/1/78)

WAC 296-20-17003 FEES. Payment for drugs and medications will be made at the wholesale cost plus an additional fee, on the following basis:

Wholesale cost		Additional fee
up to \$1.99	+	\$3.25
\$2.00 to \$3.99	+	\$4.75
\$4.00 to \$7.99	+	\$5.75
\$8.00 to \$19.99	+	\$7.00
\$20.00 & over	+	\$7.00 + 10% wholesale cost

Orders may be written for over the counter drugs or nondrug items on department prescription forms. However, these items should be billed at normal retail price. No allowance will be made for professional fees for filling such prescriptions.

Compounded prescriptions will be paid at the cost of the ingredients plus the applicable professional component based on that cost as indicated above.

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-21-010 GENERAL INFORMATION AND INSTRUCTIONS. Rules and billing procedures pertaining to all practitioners rendering services to injured workers are presented in the GENERAL INFORMATION section beginning with WAC 296-20-010. Some commonalities are repeated here for the convenience of those doctors referring to the Medicine Section. Definitions and items unique to medicine are also included.

(1) The following (visits, examinations, consultations and similar services) procedures are the most frequently recurring and widely variable items of medical care. The time requirements ((of these services)) range from the briefest ((possible)) contact ((with the patient)) to the ((time-consuming interview and exhaustive)) comprehensive examination ((needed to appraise a complete)) of a complex medical problem. The following ((graduation)) graduated listing of services is ((listed in)) an attempt to reflect the relative values of the ((various)) time(s) and skills required at the various service levels. The listed values apply only when these services are performed by or under the responsible supervision of a physician. Separate rules and fee structure exist for services provided by other health care practitioners including nurse practitioners and physician's assistants.

(2) ((When a cast is applied in the physician's office, the values for the cast materials only and for the use of the physician's cast room will be found in the Hospital section of the Fee Schedule.

(3) **SUPPLEMENTAL SKILLS:** When warranted ((by the necessity of supplemental skills)), values for the services of two or more physicians will be allowed. Billings for such services must be supported "By Report". See WAC 296-20-01002 for By Report content information.

(3) **CAST ROOM CHARGES:** See WAC 296-22-095 for information.

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-21-011 FOOTNOTES.
+ BR: By Report; see WAC ((296-20-010, item 11)) 296-20-01002 for detailed information.

@ Listed units represent basic anesthesia value only; add value for time. See WAC 296-21-130 for calculating total anesthesia values.

MEDICINE MODIFIERS

Listed values for most procedures may be modified under certain circumstances. When applicable, the modifying circumstance should be identified by the addition of the appropriate "modifier code number" (including the hyphen) after the usual procedure number. The value should be listed as a single modified total for the procedure. When multiple modifiers are applicable to a single procedure, see modifier code -99.

	Unit Value
-18 EMERGENCY ROOM SERVICES: When the physician is in the hospital, but is involved in patient care elsewhere and is called to the emergency room to provide emergency services, identify by adding this modifier (-18) to the usual emergency room procedure number and add.	4.0
-20 EMERGENCY ROOM SERVICES: When the physician is called to the emergency room from outside the hospital to provide services, identify by adding this modifier (-20) to the usual emergency room service procedure number and add.	14.0
-22 UNUSUAL SERVICES: When the services provided are greater than those usually required for the listed procedure, identify by adding this modifier (-22) to the usual procedure number. List modified value. May require report.	BR+
-26 PROFESSIONAL COMPONENT: The listed values of certain procedures (laboratory, x-ray, specific diagnostic services, etc.) are a combination of a physician component and a technical component. When the physician component is billed separately, identify by adding this modifier (-26) to the usual procedure number.	
-52 REDUCED VALUES: Under certain circumstances, the listed value for a procedure is reduced or eliminated because of ground rules, common practice, or at the physician's election (e.g., the management of a patient in diabetic coma involving detention with patient in critical condition, with spinal tap, gastric lavage, multiple arterial punctures, cutdown, etc.). Under these or similar circumstances, the services provided can be identified by their usual procedure numbers and the use of a reduced value indicated by adding this modifier (-52) to the procedure number. (Use of this modifier provides a means of reporting services at a reduced charge without disturbing usual relative values.)	
-90 REFERENCE (OUTSIDE) LABORATORY: When laboratory procedures are performed by other than the billing physician, the procedure(s) shall be identified by adding this modifier (-90) to the usual single or panel procedure number and shall be billed as charged to the physician.	
-99 MULTIPLE MODIFIERS: Under certain circumstances multiple modifiers may be applicable. Under such circumstances, identify by adding this modifier (-99) to the usual procedure number and briefly indicate the circumstances. Value in accordance with appropriate modifiers.	BR+

AMENDATORY SECTION (Amending Order 74-39, filed 11/22/74)

WAC 296-21-013 SPECIAL SERVICES AND BILLING PROCEDURES. The following services are generally part of the basic services listed in the Maximum Fee Schedule but do involve additional expenses to the physician for materials, for his time or that of his employees. These services are generally provided as an adjunct to common medical services and should be used only when circumstances clearly warrant an additional charge over and above the usual charges for the basic services.

99000 Collection and handling of specimen for transfer from the physician's office to a laboratory.	6.0
99001 Collection, handling, and/or conveyance of specimen for transfer from the patient's home to a laboratory (distance may be indicated).	8.0
99002 Collection, handling, conveyance, and/or any other service in connection with the implementation of an order involving devices (e.g., designing, fitting, packaging, handling, delivery or mailing) when devices such as orthotics, protectives, prosthetics are fabricated by an outside laboratory or shop but which items have been designed, and are to be fitted and adjusted by the attending physician.	12.0
99012 Telephone calls, phone consultations or repeated or lengthy phone calls may need to be separately identified per 15 minutes.	10.0
99024 Post-operative follow-up.	BR
(See WAC 296-22-010)	
99025 Initial (new patient) visit when asterisk (*) surgical procedure constitutes major service at that visit.	20.0
99030 Mileage, one way, each mile beyond 7 mile radius of point of origin (office or home), per mile.	2.0
((99038) Detention, prolonged, with patient requiring attention beyond usual service (e.g., critically ill patient, 30 minutes or less).	25.0))
99040 Completion of certificate of disability card.	2.0
99050 Services requested after office hours in addition to basic service.	10.0
99052 Services requested between ((6:00)) 10:00 p.m. and 8:00 a.m. in addition to basic services provided the office is closed during this period of time.	12.0
99054 Services requested on Sundays and holidays in addition to basic services.	12.0
99056 Services provided at request of patient in a location other than physician's office which are normally provided in the office.	BR
99058 Office services provided on an emergency basis.	BR
(For hospital-based emergency care facility services, see 90500 et seq)	
99062 Emergency care facility services: When the non-hospital-based physician is in the hospital but is involved in patient care elsewhere and is called to the emergency facility to provide emergency services.	8.0
99064 Emergency care facility services: When the non-hospital-based physician is called to the emergency facility from outside the hospital to provide emergency services; not during regular office hours.	16.0
99065 during regular office hours.	25.0
99070 Supplies and materials provided by the physician over and above those usually included with the office visit or other services rendered (list drugs, trays, supplies or materials cast room and/or casting supplies provided).	BR+
(For spectacles, see 92390-92395)	
((99082))99040 Completion of Certificate of Disability Card.	2.0
99080 Special reports as insurance forms, or the review of medical data to clarify a patient's status—more than the information conveyed in the usual medical communications or standard reporting form at Department Request.	BR
99082 Unusual travel (e.g., transportation and escort of patient) per mile.	2.0
99085 Physician called on to convey instructions by telephone to hospital emergency room or nurse practitioner clinic—to be paid only to initial attending	

	Unit Value
physician upon completion of Report of Accident form	12.0
99150 <u>Detention, prolonged, with patient requiring attention beyond usual service (e.g., critically ill patient, 30 minutes or less)</u>	<u>25.0</u>
99151 <u>one hour</u>	<u>50.0</u>

CRITICAL CARE

Critical care includes the care of critically ill patients in a variety of medical emergencies that requires the constant attention of the physician (cardiac arrest, shock, bleeding, respiratory failure, postoperative complications, critically ill neonate). Critical care is usually, but not always, given in a critical care area, such as the coronary care unit, intensive care unit, respiratory care unit, or the emergency care facility. The descriptors for critical care are intended to include cardiopulmonary resuscitation and a variety of services attendant to this procedure as well as other acute emergency situations. Separate procedure codes for services performed during this period, such as placement of catheters, cardiac output measurement, management of dialysis, control of gastrointestinal hemorrhage, electrical conversion of arrhythmia, etc., are excluded when this descriptor is used on a per hour basis. (The physician may list his services separately if he desires.)

99160 <u>Critical care, initial, including the diagnostic and therapeutic services and direction of care of the critically ill or multiple injured or comatose patient, requiring the prolonged presence of the physician; each hour</u>	<u>100.0</u>
99162 <u>additional 30 minutes</u>	<u>50.0</u>
99165 <u>Monitoring respiration</u>	<u>20.0</u>
99166 <u>Monitoring temperature</u>	<u>20.0</u>

OTHER SERVICES

99170 <u>Gastric intubation, and aspiration or lavage for treatment (e.g., for ingested poisons)</u>	<u>SV</u>
99175 <u>Ipecac or similar administration for individual emesis and continued observation until stomach adequately emptied of poison</u>	

(For diagnostic intubation, see 82926-82932, 89130-89141)

(For gastric lavage for diagnostic purposes, see 91055)

99180 <u>Hyperbaric oxygen pressurization; initial</u>	<u>BR</u>
99182 <u>Subsequent</u>	<u>BR</u>
99185 <u>Hypothermia; regional</u>	<u>BR</u>
99186 <u>total body</u>	<u>BR</u>
99190 <u>Assembly and operation of pump with oxygenator or heat exchanger (with or without ECG and/or pressure monitoring); each hour</u>	<u>BR</u>
99191 <u>3/4 hour</u>	<u>BR</u>
99192 <u>1/2 hour</u>	<u>BR</u>
99195 <u>Phlebotomy, therapeutic (separate procedure)</u>	
99199 <u>Unlisted special service or report</u>	<u>BR</u>

(For monitoring cardiac output, see 78470, 93561, 93962)

(For monitoring intra-aortic balloon counterpulsation, see 33972)

(For subsequent visits, see appropriate hospital visits, 90200-90280)

(For physicians assigned to critical care units or other long-term attendance, use Special Reports)

DEFINITIONS

Definitions and Items of Commonality.

Terms and phrases common to the practice of medicine are defined as follows and apply to procedures 90000 through 90696.

(1) **NEW PATIENT:** A patient new to the physician.

(2) **ESTABLISHED PATIENT:** A patient known to the physician and/or whose records are usually available.

(3) **CONSULTATION:** A consultation includes services rendered by a physician whose opinion or advice is requested for the further evaluation and/or treatment of the patient. When the consulting physician assumes responsibility for the continuing care of the patient, any subsequent service rendered by him will cease to be a consultation. Four levels of consultation are recognized: Limited, extensive, comprehensive and consultation of complexity.

For example:

(a) In a LIMITED consultation the physician confines his service to the examination or evaluation of a single organ system for a limited condition. For example, the dermatologist's opinion about a skin lesion, the neurologist's opinion about a disc problem and the orthopedist's opinion about a knee or low back problem.

(b) An EXTENSIVE consultation involves a prolonged evaluation including more than a single organ system or region. For example((:)); The examination of the cardiac patient who needs clearance before undergoing a surgical operation, consultations involving cardio-pulmonary problems and neurologic and orthopedic examinations of patient whose complaints seem disproportionate to his objective findings requiring detailed psychosocial evaluation.

(c) A COMPREHENSIVE consultation indicates the performance of detailed history (including the current problem, any previous illnesses, family disease tendencies and a review of all organ systems) and a thorough physical examination on a patient with a complex illness to establish the diagnosis and/or recommended therapy. For example; The young person with fever, arthritis and anemia and examination of patient for diagnosis and in depth evaluation of all organ systems for pre-existing and/or unrelated nonindustrial conditions.

(d) The consultation of UNUSUAL COMPLEXITY: This is an uncommonly performed service with an indepth medical opinion in a case involving all components of a detailed history with exhaustive examination of all organ systems and regions. For example((:)); The patient with an undiagnosed fever of several years duration, with multiple hospitalizations, requiring a review of previous records, laboratory studies and radiographs as well as a comprehensive examination. Another example is the psychotic patient with minor cardiac findings who is being considered for cardio-pulmonary bypass because of complaints of angina. Another example is the paraplegic patient with iatrogenic drug addiction or dependency (condition resulting from treatment).

(4) **REFERRAL:** (Transfer) A referral is the transfer of the total or specific care of a patient from one physician to another and does not constitute a consultation. Initial evaluation and subsequent services are designated as listed below in levels of service.

(5) **INDEPENDENT PROCEDURE:** Certain listed procedures are commonly undertaken as an integral part of a total service. When such a procedure is undertaken as a separate entity, the designation "Independent Procedure" is appropriate. For example: A patient being seen in consultation by an ophthalmologist and it is necessary for him to perform a gonioscopy or a ophthalmoscopy with intravenous fluorescein as diagnostic procedures in connection with the consultation, then they would be considered as independent procedures. Another example would be cardiac monitoring with electronic equipment in intrathoracic or other critical surgery.

(6) **LEVELS OF SERVICE:** Examinations, evaluations, treatment, counseling, conferences with or concerning patients, and services which necessitate wide variations in skill, effort and time required for the diagnosis and treatment of illness and the promotion of optimal health. Six levels are recognized:

MINIMAL: A level of service including injections, dressings, minimal care, etc., not necessarily requiring the presence of the physician.

For Example:

- (a) Routine immunization for tetanus administered by a nurse.
- (b) Blood pressure determination by a nurse for medication control.
- (c) Removal of sutures from laceration.

BRIEF: A level of service requiring a brief period of time, with minimal effort by the physician.

For Example:

- (a) Certification of time loss in a stable or chronic case.
- (b) Re-examination of contusion or abrasion.
- (c) Examination of conjunctiva by the physician in a patient with subconjunctival hemorrhage, irrigation, medication and removal of foreign body with instrument.

LIMITED: A level of service requiring limited effort or judgment, such as abbreviated or interval history, limited examination or discussion of findings and/or treatment.

For Example:

- (a) Review and examination of uncomplicated sprains and strains with initiation, continuation and/or change of treatment.
- (b) Examination of an extremity fracture not requiring reduction.
- (c) Post-operative care in instances where the unit value is for surgical procedure only.

INTERMEDIATE: A level of service such as a complete history and physical examination of one or more organ systems, or an in depth counseling or discussion of the findings, but not requiring a comprehensive examination of the patient as a whole.

For Example:

- (a) Review of interval history; examination of neck veins, lungs, heart, abdomen and extremities, discussion of findings and prescription of treatment in decompensated arteriosclerotic heart disease.
- (b) Review of interval history, examination of musculoskeletal system, discussion of findings, and adjustment of therapeutic program in low back and/or arthritic disorders.
- (c) Review of recent illness: Examination of pharynx, neck, axilla, groin, and abdomen; interpretation of laboratory tests and prescription of treatment in infectious mononucleosis.
- (d) Evaluation of a chest, post trauma, with impaired respiration with development of shock.

EXTENDED: A level of service requiring an unusual amount of time, effort or judgment but not complete examination of the patient as a whole.

For Example:

- (a) Detailed review of results of diagnostic evaluation including discussion of physical findings, laboratory studies, x-ray examinations, diagnostic conclusions and recommendations for treatment.
- (b) Prolonged evaluation required for psychologically unstable or dependent patient.

COMPREHENSIVE: A level of service providing an in depth evaluation of the patient.

For Example:

- (a) Evaluation of the patient including complete history, physical examination and initiation of diagnostic and/or treatment program.
- (b) Re-examination or re-evaluation of patient with continuing or new illness, including complete history, physical examination and initiation of diagnostic and/or treatment program.
- (c) Evaluation of a head injury immediately post trauma with a known previous history of convulsive disorders and a post trauma history of transitory loss of consciousness, dizziness, visual problems, etc.
- (d) Evaluation of a cardiac problem with respiratory distress resulting from inhalation of toxic and/or irritant chemicals.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-21-014 UNLISTED SERVICE OR PROCEDURE. A service or procedure may be provided that is not listed in this fee schedule. When reporting such a service, the appropriate "Unlisted Procedure" code may be used to indicate the service, identifying it by "Special Report" as discussed in WAC 296-21-01401 below. The "Unlisted Procedures" and accompanying codes for MEDICINE are as follows:

- 90699 Unlisted medical service, general
- 90749 Unlisted immunization procedure
- 90799 Unlisted therapeutic injection
- 90899 Unlisted psychiatric service or procedure
- ~~((90939 Unlisted monitoring service))~~
- 90999 Unlisted dialysis procedure
- 92499 Unlisted ophthalmological service
- 92599 Unlisted otorhinolaryngological service or procedure
- 93799 Unlisted cardiovascular service or procedure
- 94799 Unlisted pulmonary service or procedure
- 94899 Unlisted neurological service or procedure

- 95199 Unlisted allergy/clinical immunological service or procedure
- 95999 Unlisted miscellaneous diagnostic service or procedure
- ~~((96499 Unlisted miscellaneous therapeutic service or procedure))~~
- 96999 Unlisted special dermatological service or procedure
- 97799 Unlisted physical medicine service or procedure

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-21-015 OFFICE VISITS.

	Unit Value
((New Patient)) Initial Visit	
90000 BRIEF evaluation, history, examination and/or treatment and submission of a report and/or if immediately following an injury submission of a Report of Accident	20.0
90001 Completion of Report of Accident only (for use in minor injuries not requiring the presence of the physician but rather cases in which he has been consulted and has issued treatment orders to staff, office or hospital).	12.0
90010 Initial LIMITED history and physical examination, including initiation of diagnostic and treatment program and submission of a report and/or if immediately following an injury, submission of a Report of Accident. (Routine visit involving a single region or organ system)	30.0
90015 Initial INTERMEDIATE history and physical examination, including initiation of diagnostic and treatment program and submission of a report and/or if immediately following an injury, submission of a Report of Accident. (Serious or complicated case involving one or more regions or organ systems. Complexity or complication must be indicated in report)	50.0
90017 <u>Extended-Initial office visit including history and physical exam, and initiation of treatment program with submission of a report</u>	60.0
90020 Initial COMPREHENSIVE history and physical examination, including initiation of diagnostic and treatment program with submission of a report and/or if immediately following an injury, submission of a Report of Accident. (A complex case requiring an unusual amount of time, skill or judgment and an evaluation of the patient as a whole and accompanied with a detailed report in addition to the Report of Accident)	70.0
((Established Patient)) Follow-up Visits	
90030 MINIMAL service (e.g., Injection, immunization, minimal dressing) (Independent procedure)	8.0
90040 BRIEF examination, evaluation and/or treatment. (Routine followup office visit)	12.0
90050 LIMITED examination, evaluation and/or treatment. (Routine follow up office visit).	16.0
90060 INTERMEDIATE examination, evaluation and/or treatment. (Serious or complicated case involving one or more regions and/or organ systems, and accompanied with a detailed report)	20.0
90070 EXTENDED re-examination or re-evaluation requiring an unusual amount of time, skill or judgment, but not necessitating a complete examination or re-examination of the patient as a whole	30.0
90080 COMPREHENSIVE re-examination or re-evaluation requiring complete re-evaluation of the patient as a whole	50.0
90089 EXAMINATION FOR REOPENING and completion of a reopening application. A new patient or initial office visit fee will be paid for this reopening examination when justified by a report. Diagnostic studies and x-ray studies associated with the reopening examination will be allowed in addition to this fee	BR

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-21-025 HOSPITAL VISITS.

	Unit Value
New or Established Patients	
90200 Initial hospital care, BRIEF or LIMITED history and physical examination, including initiation of diagnostic and treatment program, preparation of hospital records and Report of Accident if being seen immediately following an industrial injury. (Routine visit involving a single region or organ system).....	30.0
90215 Initial hospital care, INTERMEDIATE history and physical examination, including initiation of diagnostic and treatment program, preparation of hospital records and Report of Accident if being seen immediately following an industrial injury. (Serious or complicated case involving one or more regions and/or organ systems and indicated in a report).....	50.0
90220 Initial hospital care, COMPREHENSIVE history and physical examination, including initiation of diagnostic and treatment program, preparation of hospital records and Report of Accident if being seen immediately following an industrial injury. (A complex case requiring an unusual amount of time, skill or judgment and evaluation of the patient as a whole accompanied by a detailed report in addition to the Report of Accident).....	70.0
90240 BRIEF examination, evaluation and/or treatment, same illness. (Followup hospital care).....	12.0
90250 LIMITED examination, evaluation and/or treatment. (Routine followup hospital care).....	20.0
90260 INTERMEDIATE examination, evaluation and/or treatment. (Serious or complicated case involving one or more regions or organ systems).....	30.0
90270 EXTENDED re-examination or re-evaluation, requiring an unusual amount of time, skill or judgment, but not necessitating a complete examination or re-evaluation of the patient as a whole.....	40.0
90280 <u>Comprehensive examination, evaluation or treatment. Report Required.</u>	50.0

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-21-027 EMERGENCY ROOM SERVICE. The following values apply for services performed in the Emergency Room when the physician is assigned to Emergency Room duty or is present in the Emergency Room because of other activity there, or if the physician elects to use the Emergency Room as a substitute for his office.

When the physician is in the hospital but is involved in patient care elsewhere and is called to the Emergency Room to provide emergency service, use modifier code -18, under WAC 296-21-011.

When the physician is called to the Emergency Room from outside the hospital to provide services, use modifier code -20, WAC 296-21-011.

	Unit Value
((New Patient)) Initial Visit	
90500 BRIEF evaluation, history, examination and/or treatment. (Not payable when other fees are payable except as indicated by modifiers).....	20.0
90510 Initial LIMITED history and physical examination, including initiation of diagnostic and treatment program. (Routine case involving a single region and/or organ system) (Not payable when other fees are payable except as indicated by modifiers).....	30.0
90515 Initial INTERMEDIATE history and physical examination, including initiation of diagnostic and treatment program. (Serious or complicated case	

	involving one or more regions and/or organ systems) (Not payable when other fees are payable except as indicated by modifiers).....	50.0
90517	<u>Initial EXTENDED history and physical examination, including initiation of diagnostic and treatment program. (Examination or evaluation requiring an unusual amount of time, skill or judgment.) (Not payable when other fees are payable except as indicated by modifiers.)</u>	BR
	((Established Patient)) Follow-up Visit	
90530	MINIMAL service (e.g., injection, minimal dressing, suture removal, minor laceration) (Not payable when other fees are applicable except as indicated by modifiers).....	8.0
90540	BRIEF examination, evaluation and/or treatment. (Not payable when other fees are applicable except as indicated by modifiers).....	12.0
90550	LIMITED examination, evaluation and/or treatment. (Routine follow up care) (Not payable when other fees are applicable except as indicated by modifiers).....	16.0
90560	INTERMEDIATE examination, evaluation and/or treatment. (Case involving one or more regions and/or organ systems) (Not payable when other fees are payable except as indicated by modifiers).....	20.0
90570	EXTENDED re-examination or re-evaluation and/or treatment requiring an unusual amount of time, skill or judgment but not necessitating evaluation of the man as a whole. (Not payable when other fees are applicable except as indicated by modifiers).....	30.0

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-21-030 CONSULTATIONS. A CONSULTATION is considered here to include those services rendered by a physician whose OPINION OR ADVICE is requested by another physician or agency in the evaluation and/or treatment of a patient's illness. When the consultant physician thereupon assumes the CONTINUING CARE of the patient, any subsequent service(s) rendered by him will no longer be considered as a consultation.

A REFERRAL is considered here to be the transfer of the total or specific care of a patient from one physician to another. THIS IS NOT A CONSULTATION. Values for the initial visit and the subsequent services for referrals are listed under the appropriate headings in other portions of this schedule.

The values do not necessarily include consultations involving litigation.

(For special narrative reports or review of records, see 99080)

		Unit Value
90600	Consultation requiring LIMITED examination and/or evaluation of a given system or region but not requiring a comprehensive history and examination with report.	30.0
90605	<u>Intermediate consultation - Consultation requiring intermediate history and physical exam of one or more regions and/or organ system, but not requiring comprehensive history and examination. Requires Report.</u>	40.0
90610	Consultation requiring more EXTENSIVE examination and/or evaluation of one or more regions or organ systems but not requiring comprehensive history and examination with report.....	50.0
90620	Consultation requiring COMPREHENSIVE history, examination and/or evaluation of one or more regions and/or organ systems with report.....	70.0

90630 Consultation of unusual complexity (in excess of scope of services identified by 90600, 90610 and 90620.) Necessitating exceptionally detailed history and examination with extensive review of prior or medical records, completion and assessment of data and the preparation of a special report. BR+

Unit Value

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-21-047 THERAPEUTIC INJECTIONS.

- (For cost of drugs supplied by physician, see 99070)
- (For injections performed as an independent procedure, see 90030)
- (For allergy testing, see WAC 296-21-075)
- (For skin testing, see 86450-86585)

((90750 Therapeutic injections performed in conjunction with other services may warrant an additional charge 6.0	Unit Value
90755 First and last office visit for parenteral medication when given in a series to include the treatment of the day 11.0))	
90782 Therapeutic injection of medication (specify); subcutaneous or intramuscular 3.0	
90784 intravenous 6.0	
90788 Intramuscular injection of antibiotic (specify) 3.0	
90790 Chemotherapy for malignant disease; parenteral SV	
90791 infusion (continuous or intermittent) BR	
90792 perfusion BR	
90793 intracavitary BR	

(For intra-arterial chemotherapy requiring arterial catheterization, see 36100-36299, 36640-36660)

(For monitoring of an intra-arterial chemotherapy, drip or forced infusion, see 36620-36625)

(For radioactive isotope therapy, see 79000-79999)

90796 Injection of an intrathecal chemotherapeutic agent administered by the physician 6.0	
90798 Intravenous therapy for severe or intractable allergic disease in physician's office or institution with theophyllines, corticosteroids, antihistamines 11.0	
90799 Unlisted therapeutic injection BR	

(For allergy immunizations, see 9500 et seq.)

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-21-050 PSYCHIATRIC SERVICES.

((Unit)) ((Basic))
((Value)) ((Anes@))

((90800 Psychotherapy, office, hospital, verbal, drug augmented or other methods, 50 minutes 50.0	
90801 25 minutes 30.0	
90802 15 minutes 20.0	
90810 group (maximum 8 persons per group) one and one-half hours, per person, per session 20.0	
90820 Convulsive therapy, electroconvulsive or drug induced, inpatient or outpatient, with or without anesthesia by treating physician 50.0	3.0
90830 Insulin shock therapy, hypoglycemic, subcutaneous, per treatment 40.0))	

NOTES

Hospital care by the attending physician in treating a psychiatric inpatient may be initial or subsequent in nature (see 90200-90280) and may include exchanges with nursing and ancillary personnel. Hospital care services involve a variety of responsibilities unique to the

medical management of inpatients, such as physician hospital orders, interpretation of laboratory or other medical diagnostic studies and observations, review of activity therapy reports, supervision of nursing and ancillary personnel, and the programming of all hospital resources for diagnosis and treatment. Some patients receive hospital care services only and others receive hospital care services and other procedures. If other procedures such as electroconvulsive therapy or medical psychotherapy are rendered in addition to hospital care services, these should be listed separately (i.e., hospital care service plus electroconvulsive therapy or plus medical psychotherapy if rendered).

Psychiatric care may be reported without time dimensions according to the procedure or service as are other medical or surgical procedures. In reporting medical psychotherapy procedures, time is only one aspect and may be expressed as is customary in the local area. For example, the usual appointment length of an individual medical psychotherapy procedure may be signified by the procedure code alone. The modifier '-52' may be used to signify a service that is reduced or less extensive than the usual procedure. The modifier '-22' may be used to indicate a more extensive service. Thus medical psychotherapy procedures may be reported by the procedure code alone or by the procedure code with a modifier. If appropriate and customary in the local area, codes 90841, 90843 or 90844 may be used.

Other medical services, such as 90050—Limited office medical service or other patient encounters, may be described as listed in the section on Medicine if appropriate).

CONSULTATION

Consultation for psychiatric evaluation of a patient. Includes examination of patient and exchange of information with primary physician and other informants such as nurses or family members, and preparation of report. Apply to consultations as listed in the section on Medicine. (90600-90630) (See also definition of consultation)

GENERAL CLINICAL PSYCHIATRIC DIAGNOSTIC OR EVALUATIVE INTERVIEW PROCEDURES

	Unit Value	Basic Anes@
90801 Psychiatric diagnostic interview examination including history, mental status, or disposition (may include communication with family or other sources, ordering and medical interpretation of laboratory or other medical diagnostic studies; in certain circumstances other informants will be seen in lieu of the patient)		50.0

SPECIAL CLINICAL PSYCHIATRIC DIAGNOSTIC OR EVALUATIVE PROCEDURE

90825 Psychiatric evaluation of hospital records, other psychiatric reports, psychometric and/or projective tests, and other accumulated data for medical diagnostic purposes (without other informants or patient interview)		30.0
90831 Telephone consultation with or about patient for psychiatric therapeutic or diagnostic purposes		20.0
90835 Narcosynthesis for psychiatric diagnostic and therapeutic purposes, e.g. sodium amobarbital (Amytal) interview		
90840 Psychologic testing, psychometric and/or projective tests, with written report, given by or under supervision of physician, per hour		45.0

PSYCHIATRIC THERAPEUTIC PROCEDURES

MEDICAL PSYCHOTHERAPY

90841 Individual medical psychotherapy with continuing medical diagnostic evaluation, and drug management when indicated, including psychoanalysis, insight oriented, behavior modifying or supportive psychotherapy; time unspecified		50.0
90843 approximately 20 TO 30 minutes		20.0

	Unit Value	Basic Anes@
90844	30.0	
90847	50.0	
90848	60.0	
90849	50.0	
90850	50.0	
90851	30.0	
90852	20.0	
90853	50.0	

PSYCHIATRIC SOMATOTHERAPY

90862	50.0	
90870	50.0	
90872	40.0	

OTHER PSYCHIATRIC THERAPY

90880	35.0	
90882	30.0	
90887	30.0	
90889	50.0	

(For psychiatric consultation see 90600-90630)

(90853) 90898	50.0	
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OTHER PROCEDURES

90899	BR	
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NEW SECTION

WAC 296-21-0501 BIOFEEDBACK RULES. Procedures listed under WAC 296-20-0502 are for use by M.D.'s, D.O.'s and certified psychologists. RPT's and LPT's must use rules and procedures listed under WAC 296-23-710 through 296-23-725.

Administration of Biofeedback treatment is limited to those practitioners who are certified by the Biofeedback Society of Washington or who meet the minimum education, experience, and training qualifications to be so certified. Those practitioners wishing to administer Biofeedback treatment to injured workers, must submit a copy of their Biofeedback certification or supply evidence of their qualifications to the department of self-insurer as the case may be.

(1) The department will authorize Biofeedback treatment for the following conditions when accepted under the Industrial Insurance claim:

- (a) Idiopathic Raynaud's disease

- (b) Temporomandibular Joint Dysfunction
- (c) Myofascial Pain Dysfunction Syndrome (MPD)
- (d) Tension headaches
- (e) Migraine headaches
- (f) Tinnitus
- (g) Torticollis
- (h) Neuromuscular re-education as result of neurological damage in CVA or spinal cord injury
- (i) Inflammatory and/or musculoskeletal disorders causally related to the accepted condition.
- (2) Twelve Biofeedback treatments in a ninety day period will be authorized for the above conditions when the following is presented:
 - (a) An evaluation report documenting:
 - (i) The basis for the claimant's condition;
 - (ii) the condition's relationship to the industrial injury;
 - (iii) an evaluation of the claimant's current functional measurable modalities (i.e., range of motion, up time, walking tolerance, medication intake, etc.);
 - (iv) an outline of the proposed treatment program;
 - (v) an outline of the expected restoration goals.
 - (b) No further Biofeedback treatments will be authorized or paid for without substantiation of evidence of improvement in measurable, functional modalities (i.e., range of motion, up time, walking tolerance, medication intake, etc.). Only one additional treatment block of twelve treatments per ninety days will be authorized. Requests for Biofeedback treatment beyond twenty-four treatments or one hundred eighty days will be granted only after file review by and on the advice of the department's medical consultant.
 - (c) In addition to treatment, pre-treatment and periodic evaluation will be authorized. Follow-up evaluation can be authorized at one, three, six, and twelve months post-treatment.
 - (d) At the department's option, a concurring opinion may be required regarding relationship of the condition to the industrial injury and/or need for Biofeedback treatment.

NEW SECTION

<u>WAC 296-21-0502</u>	<u>BIOFEEDBACK.</u>	Unit
90900	Biofeedback training, by electromyogram application separate procedure (one-half hour)	30
90901	Biofeedback training, by electromyogram application including office visit (one hour)	50
90902	In conduction disorder separate procedure (one-half hour)	30
90903	In conduction disorder including office visit (one hour)	50
90904	Regulation of blood pressure separate procedure (one-half hour)	30
90905	Regulation of blood pressure including office visit (one hour)	50
90906	Regulation of skin temperature or peripheral blood flow separate procedure (one-half hour)	30
90907	Regulation of skin temperature or peripheral blood flow including office visit (one hour)	50
90908	By electroencephalogram application separate procedure (one-half hour)	30
90909	By electroencephalogram application including office visit	50
90910	By electro-oculogram application separate procedure (one-half hour)	30
90911	By electro-oculogram application including office visit (one hour)	50
90912	Diagnostic evaluation includes report (one hour)	60
90913	Follow-up evaluation includes report (one-half hour)	30

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-21-057 MONITORING SERVICES. The following values are for physician's services only and do not include charges for use of equipment or supplies.

	Unit Value
((90900) Assembly and operation of pump with oxygenator or heat exchanger (with or without ECG and/or pressure monitoring), per hour.....	60.0
90920 Monitoring ECG, pressures, etc., in intrathoracic or other critical surgery, per hour (independent procedure).....	55.0
90930 Monitoring EEG at surgery (independent procedure).....	BR+)

Dialysis

HEMODIALYSIS

(For cannula declotting, see 36860, 36861)

((90940)) 90941 Hemodialysis, acute renal failure or intoxication, per dialysis	BR+
90942 patient 21-40 kg.....	BR
90943 patient 11-20 kg.....	BR
90944 patient under 10 kg	BR
90951 Hemodialysis, for chronic irreversible renal insufficiency, initial stabilizing therapy via shunt or fistula, up to 4-6 weeks; patient over 40 kg	BR
90952 patient 21-40 kg.....	BR
90953 patient 11-20 kg.....	BR
90954 patient under 10 kg	BR
90955 Hemodialysis, for chronic irreversible renal insufficiency, maintenance for stabilized condition, more than 4-6 weeks, hospital, patient over 40 kg	BR
90956 patient 21-40 kg.....	BR
90957 patient 11-20 kg.....	BR
90958 patient under 10 kg	BR

PERITONEAL DIALYSIS

(For insertion of cannula or catheter, see 49420, 49421)

90966 Peritoneal dialysis for acute renal failure and/or intoxication, excluding catheter/cannula insertion; patient more than 40 kg.....	BR
90967 patient 21-40 kg.....	BR
90968 patient 11-20 kg.....	BR
90969 patient under 10 kg	BR
90976 Peritoneal dialysis for chronic renal failure; patient more than 40 kg.....	BR
90977 patient 21-40 kg.....	BR
90978 patient 11-20 kg.....	BR
90979 patient under 10 kg	BR

MISCELLANEOUS DIALYSIS PROCEDURES

90990 Hemodialysis training and/or counseling	BR
90991 Home hemodialysis care, outpatient, for those services either provided by the physician primarily responsible for total hemolysis care or under his direct supervision, and excludes care for complicating illnesses unrelated to hemodialysis	BR
90997 Hemoperfusion (eg, with activated charcoal or resin).....	BR
90999 Unlisted dialysis procedure	BR
((90945) chronic irreversible renal insufficiency, initial stabilizing therapy, up to 4 weeks	BR+
90946 per dialysis.....	BR+
90947 maintenance, hospital, per month.....	BR+
90950 per dialysis.....	BR+

(For cannula insertion, see 36800-36820)

90960 Peritoneal dialysis, including cannula insertion, per dialysis.....	BR+
90961 excluding cannula insertion, per dialysis.....	BR+)

(For cannula insertion by other than treating physician, see 49420)

((SPECIFIC DIAGNOSTIC SERVICES

Listed values may be added to other significant services, except when commonly performed as an integral part of a history and physical examination:))

GASTROENTEROLOGY

(For duodenal intubation and aspiration, see 89100-89105)

(For gastrointestinal radiologic procedures, see 74210-74340)

91000 Esophageal intubation and collection of washings for cytology, including preparation of specimens (separate procedure).....	36.0
91010 Esophageal motility study;.....	106.0
91011 with mecholyl or similar stimulant.....	130.0
91012 with acid perfusion studies.....	72.0
91030 Esophagus, acid perfusion (Bernstein) test for esophagitis	36.0
91032 Esophagus, acid reflux test, with intraluminal pH electrode for detection of gastroesophageal reflux.....	72.0
91052 Gastric analysis test with injection of stimulant of gastric secretion (eg., histamine, insulin, pentagastrin)	BR

(For gastric biopsy by capsule, per oral, via tube, one or more specimens, see 43600)

(For gastric laboratory procedures, see also 89130-89141)

91055 Gastric intubation, washings, and preparing slides for cytology (separate procedure)	36.0
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(For gastric lavage, therapeutic, see 99170)

91060 Gastric saline load test	30.0
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(For biopsy by capsule, small intestine, per oral, via tube (one or more specimens), see 44100)

91090 Fluorescein-string test for upper gastrointestinal bleeding.....	30.0
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91100 Intestinal bleeding tube, passage, positioning and monitoring	BR
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(For injection procedure for percutaneous transhepatic cholangiography, see 47500)

(For cholangiography, see 74320, 74321)

(For abdominal paracentesis, see 49080, 49081; with instillation of medication, see 90793)

(For peritoneoscopy, see 49300; with biopsy see 49301)

(For peritoneoscopy and guided transhepatic cholangiography, see 49302; with biopsy, see 49303)

(For injection procedure for splenoportography, see 38200)

91299 Unlisted diagnostic gastroenterology procedure	BR
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AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-21-062 EYE.

Unit Basic
Value Anes@

((Eye examination, including visual acuity determination, ophthalmoscopy, tonometry, gross visual fields, muscle balance, and slit lamp microscopy.....		40.0
92001 with refraction.....		50.0
92005 with plotting of central and/or peripheral visual fields		60.0

	Unit Value	Basic Anes@
92006 with refraction	70.0	
92020 Gonioscopy: adult (independent procedure)	20.0	3.0
92040 Gross external examination and ophthalmoscopy with refraction, without cycloplegic or mydriatic	30.0	
92045 with cycloplegic or mydriatic, which may include post-cycloplegic visit	40.0	
92060 Orthoptic and/or pleoptic evaluation (independent procedure)	25.0	
92065 training, each 30 minutes	15.0	

OPHTHALMOLOGICAL DIAGNOSTIC AND TREATMENT SERVICES

(For surgical procedures, see Surgery, Eye and Ocular Adnexa, 65091 et seq.)

NOTES

REPORTING

See Guidelines in MEDICINE section WAC 296-21-010 and special Ophthalmology notations below.

To report MINIMAL, BRIEF, AND LIMITED office services, use descriptors from the general medical section (90000 et seq.).

To report INTERMEDIATE, COMPREHENSIVE AND SPECIAL services, use the specific ophthalmological descriptors (92002 et seq.).

To report CONSULTATIONS, wherever performed, use descriptors from the general medical section (90600 et seq.).

To report HOME, HOSPITAL, EMERGENCY DEPARTMENT and other institutional medical services, use the descriptors from the general medical section (90100 et seq.) unless specific ophthalmological descriptors (92002 et seq.) are more appropriate.

To report surgical services, see SURGERY, EYE and OCULAR ADNEXA (65091 et seq.) and surgical Guidelines WAC 296-22-010.

DEFINITIONS

MINIMAL MEDICAL SERVICE: A level of service supervised by a physician but not necessarily requiring his presence.

For example:

Visual acuity check or verification of lenses.

BRIEF MEDICAL SERVICE: A level of service pertaining to the evaluation and treatment of a condition requiring only an abbreviated history and examination.

For example:

- a. Follow-up for conjunctivitis.
- b. Removal of sutures from laceration (when not a post-op part of a total surgical service).

LIMITED MEDICAL SERVICE: A level of service pertaining to the evaluation of a circumscribed acute illness or to the periodic re-evaluation of a problem including an interval history and examination, the review of effectiveness of past medical management, the ordering and evaluation of appropriate diagnostic tests, the adjustment of therapeutic management as indicated, and the discussion of findings and/or medical management.

For example:

- a. Review of history, external examination of eye, initiation of treatment for acute conjunctivitis.
- b. Review of interval history, and physical and sensory status, and adjustment of medication in a patient with iridocyclitis or glaucoma.

INTERMEDIATE OPHTHALMOLOGICAL SERVICES: A level of service pertaining to the evaluation of a new or existing condition complicated with a new diagnostic or management problem not necessarily relating to the primary diagnosis, including history, general medical observation, external ocular and adnexal examination and

other diagnostic procedures as indicated; may include the use of mydriasis. Intermediate services do not usually include determination of the refractive state but may do so in an established patient (92012) who is under continuing active treatment.

For example:

- a. Review of history, external examination, ophthalmoscopy, biomicroscopy for an acute complicated condition (e.g. iritis) not requiring comprehensive ophthalmological services.
- b. Review of interval history, external examination, ophthalmoscopy, biomicroscopy and tonometry in established patient with known cataract not requiring comprehensive ophthalmological services.

COMPREHENSIVE OPHTHALMOLOGICAL SERVICES: A level of service in which a general evaluation of the complete visual system is made. The comprehensive services constitute a single service entity but need not be performed at one session. The service includes history, general medical observation, external and ophthalmoscopic examination, gross visual fields and basic sensorimotor examination. It often includes, as indicated: Biomicroscopy, examination with cycloplegia or mydriasis, tonometry, and usually determination of the refractive state unless known, or unless the condition of the media precludes this or it is otherwise contraindicated, as in presence of trauma or severe inflammation. It always includes initiation of diagnostic and treatment programs as indicated.

For example:

The comprehensive services required for diagnosis and treatment of a patient with symptoms indicating possible disease of the visual system, such as glaucoma, cataract or retinal disease, or to rule out disease of the visual system, new or established patient.

"Initiation of diagnostic and treatment program" includes the prescription of medication, lenses and other therapy and arranging for special ophthalmological diagnostic or treatment services, consultations, laboratory procedures and radiological services as may be indicated.

Prescription of lenses may be deferred to a subsequent visit, but in any circumstance is not reported separately. ("Prescription of lenses" does not include anatomical facial measurements for or writing of laboratory specifications for spectacles. For Spectacle Services, see 92340 et seq.)

DETERMINATION OF THE REFRACTIVE STATE is the quantitative procedure that yields the refractive data necessary to determine the best visual acuity with lenses and to prescribe lenses. It is not a separate medical procedure, or service entity, but is an integral part of the general ophthalmological services, carried out with reference to other diagnostic procedures. The evaluation of the need for and the prescription of lenses is never based on the refractive state alone.

Determination of the refractive state is not reported separately. It is usually part of the comprehensive ophthalmological services (92004, 92014), but may occasionally be a part of intermediate ophthalmological services to an established patient (92012) who, under continuing active treatment with periodic observation, may not require comprehensive re-evaluation.

The explanatory codes, -X and -Y, are administrative codes only and not modifiers, and need only be used when by law a carrier in order to administer a program (e.g., MEDICARE) requires the information that "determination of the refractive state of the eyes" was or was not done in the course of the reported services 92004, 92012 or 92014 exclusively:

- X determination of refractive state was performed in course of diagnostic ophthalmological examination
- Y determination of refractive state was not performed in course of diagnostic ophthalmological examination

SPECIAL OPHTHALMOLOGICAL SERVICES: Services in which a special evaluation of part of the visual system is made, which goes beyond the services usually included under general ophthalmological services, or in which special treatment is given.

For example:

Fluorescein angiography, quantitative visual field examination, or extended color vision examination (such as Nagel's

anomaloscope) should be specifically reported as special ophthalmological services.

Unit Basic
Value Anes@

Medical diagnostic evaluation by the physician is an integral part of all ophthalmological services. Technical procedures (which may or may not be performed by the physician personally) are often part of the service, but should not be mistaken to constitute the service itself.

Intermediate and comprehensive ophthalmological services constitute integrated services in which medical diagnostic evaluation cannot be separated from the examining techniques used. Itemization of service components, such as slit lamp examination, keratometry, ophthalmoscopy, retinoscopy, determination of refractive state, tonometry, motor evaluation, etc. is not applicable.

GENERAL OPHTHALMOLOGICAL SERVICES

NEW PATIENT

A patient who is new to the physician whose medical and administrative record needs to be established.

(For brief or limited services to new patient, as for minor adnexal condition, see 90000, 90010)

- 92002 Ophthalmological services: Medical examination and evaluation with initiation of diagnostic and treatment program; intermediate, new patient
- 92004 comprehensive, new patient, one or more visits

ESTABLISHED PATIENT

A patient whose medical and administrative records are available to the physician. The designation of new or established patient does not preclude the use of a specific level of service.

(For minimal, brief, or limited services to an established patient, see 90030-90050)

- 92012 Ophthalmological services: Medical examination and evaluation, with initiation or continuation of diagnostic and treatment program; intermediate, established patient
- 92014 comprehensive, established patient, one or more visits

Unit Basic
Value Anes@

SPECIAL OPHTHALMOLOGICAL SERVICES

- 92018 Ophthalmological examination and evaluation, under general anesthesia, with or without manipulation of globe for passive range of motion or other manipulation to facilitate diagnostic examination; initial 20.0 3.0
- 92019 subsequent 15.0
- 92020 Gonioscopy with medical diagnostic evaluation (separate procedure) 15.0

(For gonioscopy under general anesthesia see 92018)

- 92060 Sensorimotor examination with medical diagnostic evaluation (separate procedure) 25.0
- 92065 Orthoptic and/or pleoptic training, with continuing medical direction and evaluation 15.0
- 92070 Fitting of contact lens for treatment of disease, including supply of lens 150.0
- 92080 Visual fields: Plotting, central and/or peripheral (independent procedure) 20.0
- 92081 Visual field examination with medical diagnostic evaluation; tangent screen, Autoplot or equivalent 20.0
- 92082 quantitative perimetry, e.g., several isopters on Goldmann perimeter, or equivalent 20.0
- 92083 static and kinetic perimetry, or equivalent 20.0

Routine tonometry is part of general and special ophthalmological services whenever indicated. It is not reported separately.

- 92100 ((Tonometry, one or multiple readings, same day (independent procedure))) Serial tonometry with medical diagnostic evaluation (separate procedure), one or more sessions, same day 15.0
- 92120 ((Tonography (recording tonometer method or perilimbal suction device) (independent procedure))) Tonography with medical diagnostic evaluation, recording indentation tonometer method or perilimbal suction method 30.0
- 92130 Tonography with water provocation 20.0
- 92140 ((Provocative test(s) for glaucoma, including water drinking, and/or mydriatic, and/or dark room test 20-0)) Provocative tests for glaucoma, with medical diagnostic evaluation, without tonography 30.0
- ((92200 Ophthalmoscopy (funduscopy) with mydriasis, direct and/or indirect methods (independent procedure) 20.0
- 92210 with general anesthesia (independent procedure) 40.0 3.0
- 92220 with contact lens (independent procedure) 30.0
- 92230 with intravenous fluorescein (independent procedure) 50.0
- 92235 with multi-frame photography (independent procedure) BR+
- 92250 with intraocular photography (independent procedure) BR+
- 92260 and ophthalmodynamometry (independent procedure) 40.0
- 92300 Fitting and evaluation of contact lenses Sv.&))

OPHTHALMOSCOPY

Routine ophthalmoscopy is part of general and special ophthalmological services whenever indicated. It is not reported separately.

- 92225 Ophthalmoscopy, extended as for retinal detachment (may include use of contact lens, drawing or sketch, and/or fundus biomicroscopy), with medical diagnostic evaluation; initial 20.0
- 92226 subsequent
- 92230 Ophthalmoscopy, including medical diagnostic evaluation; with fluorescein angiography (observation only) 50.0
- 92235 with fluorescein angiography (includes multiframe photography and medical interpretation) BR
- 92250 with fundus photography BR
- 92260 with ophthalmodynamometry 40.0

(For ophthalmoscopy under general anesthesia, see 92018)

OTHER SPECIALIZED SERVICES

- 92265 Oculoelectromyography, one or more extraocular muscles, one or both eyes, with medical diagnostic evaluation 40.0
- 92270 Electro-oculography, with medical diagnostic evaluation 40.0
- 92275 Electroretinography, with medical diagnostic evaluation 40.0
- 92280 Visually evoked potential (response) study, with medical diagnostic evaluation 40.0

(For electronystagmography for vestibular function studies, see 92541 et seq.)

(For ophthalmic echography (diagnostic ultrasound), see 76511-76529)

- 92283 Color vision examination, extended, e.g., anomaloscope or equivalent BR

Unit Basic
Value Anes@

Unit Basic
Value Anes@

(Color vision testing with pseudoisochromatic plates (such as HRR or Ishihara) is not reported separately. It is included in the appropriate general or ophthalmological service.)

- 92284 Dark adaptation examination, with medical diagnostic evaluation BR
- 92285 External ocular photography for documentation of medical progress BR

CONTACT LENS SERVICE

The prescription of contact lenses (optical and physical characteristics, power, size, curvature) is NOT a part of the general ophthalmological services.

The fitting of contact lenses includes instruction and training of the wearer and incidental revision of the lens.

The supply of the prescribed contact lenses is often reported as a part of the service of fitting. Use modifier '-26' to describe the services of fitting without supply.

To report the supply of contact lens separately, use 92391 or 92396.

(For therapeutic or surgical use of contact lens, see 68340, 92070)

- 92310 Prescription of optical and physical characteristics of and fitting of contact lens, with medical supervision of adaptation; corneal lens, both eyes, except for aphakia SV

(For prescription and fitting of one eye, see modifier -52)

- 92311 corneal lens for aphakia, one eye SV
- 92312 corneal lens for aphakia, both eyes SV
- 92313 corneal scleral lens SV

- 92314 Prescription of optical and physical characteristics of contact lens, with medical supervision of adaptation and direction of fitting by independent technician; corneal lens, both eyes, except for aphakia SV

(For prescription and fitting of one eye, see modifier -52)

- 92315 corneal lens for aphakia, one eye SV
- 92316 corneal lens for aphakia, both eyes SV
- 92317 corneal scleral lens SV

- 92325 Modification of contact lens (separate procedure), with medical supervision of adaptation SV

- 92326 Replacement of contact lens SV

OCULAR PROSTHETICS, ARTIFICIAL EYE

- 92330 Prescription, fitting, and supply of ocular prosthesis (artificial eye), with medical supervision of adaptation SV

(If supply is not included, see modifier -26; to report supply separately, see 92393)

- 92335 Prescription of ocular prosthesis (artificial eye) and direction of fitting and supply by independent technician, with medical supervision of adaptation SV

SPECTACLE SERVICES (INCLUDING PROSTHESIS FOR APHAKIA)

Prescription of spectacles, when required, is an integral part of general ophthalmological services and is not reported separately. It includes specification of lens type (monofocal, bifocal, other), lens power, axis, prism, absorptive factor, impact resistance, and other factors.

Fitting of spectacles is a separate service; when provided by the physician, it is reported as indicated by 92340-92371. Fitting includes measurement of anatomical facial characteristics, the writing of laboratory specification, and the final adjustment of the spectacles to the visual axes and anatomical topography. Presence of physician is not required.

Supply of materials is a separate service component; it is not a part of the service of fitting spectacles.

- 92340 Fitting of spectacles, except for aphakia; monofocal SV
- 92341 bifocal SV
- 92342 multifocal, other than bifocal SV
- 92352 Fitting of spectacle prosthesis for aphakia; monofocal SV
- 92353 multifocal SV
- 92354 Fitting of spectacle mounted low vision aid; single element system SV
- 92355 telescopic or other compound lens system SV
- 92358 Prosthesis service for aphakia, temporary (disposable or loan, including materials) SV
- 92370 Repair and refitting spectacles, except for aphakia SV
- 92371 spectacle prosthesis for aphakia SV

SUPPLY OF MATERIALS

- 92390 Supply of spectacles, except prosthesis for aphakia and low vision aids SV
- 92391 Supply of contact lenses, except prosthesis for aphakia SV

(For supply of contact lenses reported as part of the service of fitting, see 92310-92313)

(For replacement of contact lens, see 92326)

- 92392 Supply of low vision aids (A low vision aid is any lens or device used to aid or improve visual function in a person whose vision cannot be normalized by conventional spectacle correction. Conventional spectacle correction includes reading additions up to 4 D) SV
- 92393 Supply of ocular prosthesis (artificial eye) SV

(For supply reported as part of the service of fitting, see 92330)

- 92395 Supply of permanent prosthesis for aphakia; spectacles SV

(For temporary spectacle correction, see 92358)

- 92396 contact lenses SV

(For supply reported as part of the service of fitting, see 92311, 92312)

(See 99070 for the supply of other materials, drugs, trays, etc.)

OTHER PROCEDURES

- 92499 Unlisted ophthalmological service or procedure BR

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-21-064 EAR.

Unit
Value

- (92500 Audiometric hearing test, pure tone (air only) screening (e.g., Oto-check) 10.0
- 92505 complete, air, with audiogram 15.0
- 92510 air and bone, with or without masking 20.0
- 92515 speech 30.0
- 92530 Vestibular function test 30.0
- 92535 Electronystagmography BR+
- 92550 Audiologic evaluation for site of lesion
— Any or all of the following tests may be included: pure tone air and bone audiometry, speech audiometry, Bekesy audiometry, tone decay test, SISI test (two or more frequencies), equal loudness balance tests (or alternate binaural balance tests) BR+
- 92570 Special audiologic evaluation for functional (non-organic) hearing loss

Any or all of the following tests may be necessary: pure tone air and bone audiometry, speech audiometry, psychogalvanic skin reflex tests, Bekesy audiometry, Stenger test, Docrifer-Stewart test, Lombard test, delayed feed-back test. Repeat tests for any or all of the above procedures may be necessary BR+))

(For evaluation of speech, language and/or hearing problems through observation and assessment of performance, see 92506)

The audiometric tests listed below imply the use of calibrated electronic equipment. Other hearing tests (such as whispered voice, tuning fork) are considered part of the general otorhinolaryngologic services and are not reported separately. All descriptors refer to testing of both ears. Use the modifier "Reduced Service," if a test is applied to one ear instead of to two ears. All descriptors (except 92559), apply to testing of individuals; for testing of groups, use 92559 and specify test(s) used.

SPECIAL OTORHINOLARYNGOLOGIC SERVICES

NOTES

Diagnostic or treatment procedures usually included in a comprehensive otorhinolaryngologic evaluation or office visit, are reported as an integrated medical service, using appropriate descriptors from the 90000 series. Itemization of component procedures, e.g., otoscopy, rhinoscopy, tuning fork test, does not apply.

Special otorhinolaryngologic services are those diagnostic and treatment services not usually included in a comprehensive otorhinolaryngologic evaluation or office visit. These services are reported separately, using descriptors from the 92500 series.

All services include medical diagnostic evaluation. Technical procedures (which may or may not be performed by the physician personally) are often part of the service, but should not be mistaken to constitute the service itself.

	Unit Value	Basic Anes@
92502 Otolaryngologic examination under general anesthesia	20.0	3.0
92504 Binocular microscopy (separate diagnostic procedure)	13.0	
92506 Medical evaluation speech, language and/or hearing problems	50.0	
92507 Speech, language or hearing therapy, with continuing medical supervision; individual ..	20.0	
92508 group	15.0	
92511 Nasopharyngoscopy with endoscope (separate procedure)	35.0	
92512 Nasal function studies, e.g., rhinomanometry	20.0	
92516 Facial nerve function studies	20.0	
92520 Laryngeal function studies	20.0	

VESTIBULAR FUNCTION TESTS, WITH OBSERVATION AND EVALUATION BY PHYSICIAN, WITHOUT ELECTRICAL RECORDING

92531 Spontaneous nystagmus, including gaze	SV
92532 Positional nystagmus	SV
92533 Caloric vestibular test, each irrigation (binaural, bithermal stimulation constitutes four tests)	SV
92534 Optokinetic nystagmus	SV

VESTIBULAR FUNCTION TESTS, WITH RECORDING, e.g., ENG, PENG, AND MEDICAL DIAGNOSTIC EVALUATION

92541 Spontaneous nystagmus test, including gaze and fixation nystagmus, with recording	SV
92542 Positional nystagmus test, minimum of 4 positions, with recording	SV
92543 Caloric vestibular test, each irrigation (binaural, bithermal stimulation constitutes four tests), with recording	SV
92544 Optokinetic nystagmus test, bidirectional, foveal or peripheral stimulation, with recording	SV
92545 Oscillating tracking test, with recording	SV
92546 Torsion swing test, with recording	SV
92547 Use of vertical electrodes in any or all of above tests counts as one additional test	SV

(For unlisted vestibular tests, see 92599)

AUDIOLOGIC FUNCTION TESTS WITH MEDICAL DIAGNOSTIC EVALUATION

BASIC AUDIOMETRY

92551 Screening test, pure tone, air only	10.0
92552 Pure tone audiometry (threshold); air only ..	15.0
92553 air and bone	20.0
92555 Speech audiometry; threshold only	30.0
92556 threshold and discrimination	20.0
92557 Basic comprehensive audiometry (92553 and 92556 combined), (pure tone, air and bone, and speech, threshold and discrimination)	
92558 Hearing aid evaluation and selection	45.0
92559 Audiometric testing of groups	50.0

PURE TONE AUDIOMETRY, EXTENDED

92560 Bekesy audiometry; screening	20.0
92561 diagnostic	30.0
92562 Loudness balance test, alternate binaural or monaural	20.0
92563 Tone decay test	20.0
92564 Short increment sensitivity index (SISI)	20.0
92565 Stenger test, pure tone	20.0
92566 Impedance testing	20.0
92567 Tympanometry	20.0
92568 Acoustic reflex testing	20.0

SPEECH AUDIOMETRY, EXTENDED

92571 Filtered speech test	30.0
92572 Staggered spondaic word test	30.0
92573 Lombard test	30.0
92574 Swinging story test	30.0
92575 Sensorineural acuity level test	30.0
92576 Synthetic sentence identification test	30.0
92577 Stenger test, speech	30.0
92578 Delayed auditory feedback test	30.0

SPECIAL AUDIOMETRIC FUNCTION TESTS

92580 Electrodermal audiometry	35.0
92581 Evoked response (EEG) audiometry	35.0
92582 Conditioning play audiometry	35.0
92583 Select picture audiometry	35.0
92584 Electrocochleography	35.0

OTHER PROCEDURES

92599 Unlisted otorhinolaryngological service or procedure	BR
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AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-21-066 **CARDIOVASCULAR.** Values for items ((93000-93781)) 92950-93799 include laboratory procedure(s), interpretation and physician's services (except surgical and anesthesia services as listed in the section on Surgery), unless otherwise stated.

Unit Basic Value Anes@

THERAPEUTIC SERVICES

92950 Cardiopulmonary resuscitation (e.g., in cardiac arrest)	SV
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(see also critical care services, 99160)

	Unit Value	Basic Anes@
92960 Cardioversion, elective, electrical conversion of arrhythmia, external	100.0	4.0
92970 Cardioassist-method of circulatory assist; internal		
92971 external		
(For balloon atrial-septostomy, see 33738)		
(For placement of catheters for use in circulatory assist devices such as intra-aortic balloon pumping, see 33970)		

CARDIOGRAPHY

(For echocardiography, see 76601-76628)

93000 Electrocardiogram, with interpretation and report; routine ECG with at least 12 leads	30.0	
93005 tracing only, without interpretation and report	20.0	
93010 interpretation and report only	15.0	
(For ECG monitoring at surgery, see 90920)		
93020 with exercise test	50.0	
93025 tracing only without interpretation and report	30.0	
93030 interpretation and report only	25.0	
93040 single lead (for rhythm) with interpretation	10.0	
93045 esophageal lead	50.0	

(For ECG monitoring, see 99150, 99151)

93015 Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise; continuous electrocardiographic monitoring, with interpretation and report	50.0	
93017 tracing only, without interpretation and report	30.0	
93018 interpretation and report only	25.0	
93040 Rhythm ECG, one to three leads; with interpretation	10.0	
93041 tracing only without interpretation and report	15.0	
93042 interpretation and report only	20.0	
93045 esophageal lead (includes placement and interpretation)	50.0	
93050 Transportation of ECG equipment to home within radius of 7 miles	10.0	

(For additional mileage, see 99030)

93200 Phonocardiogram with interpretation and report	50.0	
93205 with indirect carotid artery tracing or similar study	60.0	
93201 Phonocardiogram with ECG lead; with supervision during recording with interpretation and report (when equipment is supplied by the physician)	50.0	
93202 tracing only, without interpretation and report (when equipment is supplied by the hospital, clinic, etc.)	15.0	
93204 interpretation and report	25.0	
93205 Phonocardiogram with ECG lead, with indirect carotid artery and/or jugular vein tracing, and/or apex cardiogram; with interpretation and report	60.0	
93208 tracing only, without interpretation and report	15.0	
93209 interpretation and report only	30.0	
93210 Phonocardiogram, intracardiac	70.0	
93220 Vectorcardiogram (VCG), with or without ECG, interpretation and report	50.0	
93221 tracing only, without interpretation and report	15.0	
93222 interpretation and report only	25.0	
93240 Ballistocardiogram	BR+	
93255 Apexcardiography	BR	

	Unit Value	Basic Anes@
93260 Cardiovascular stress testing		BR+
93270 Electrocardiographic monitoring utilizing a system such as magnetic tape, for up through 12 hours; includes recording, scanning analysis, interpretation and report		
93271 recording only		
93272 scanning analysis with report		
93273 physician review and interpretation, with report		
93274 Electrocardiographic monitoring utilizing a system such as magnetic tape, 12 through 24 hours; includes recording, scanning analysis, interpretation and report		
93275 recording only		
93276 scanning analysis with report		
93277 physician review and interpretation, with report		

(For unlisted cardiographic procedure, see 93799)

ECHOCARDIOGRAPHY

(See 76601-76628)

CARDIAC FLUOROSCOPY

93280 Cardiac fluoroscopy	BR
(For chest fluoroscopy, see 71034, 76000)	
(For exercising ECG, see 93020-93030)	

ECHOCARDIOGRAPHY

93300 Echocardiography, M-Mode; complete	BR
93305 limited (eg, follow-up or limited study)	BR
93307 Echocardiography, real-time scan; complete	BR
93308 limited	BR

(For echocardiography as a radiologic procedure, see 76620-76628)

Cardiac Catheterization

Cardiac catheterization procedure includes placement of catheter(s), recording of intracardiac and intravascular pressure, obtaining blood samples for measurement of blood gases and/or dye (or other) dilution curves and cardiac output measurements (dye dilution, Fick or other method, with or without rest and exercise and/or other studies) with or without electrode catheter placement, final evaluation and report.

(For radiological procedures, see 75500-75755)

Listed values are for the physician's services only and include usual preassessment of cardiac problem and recording of intra-cardiac pressure. (For consultation services, see 90600-90630)

93500 Cardiac catheterization, including placement of catheter(s), recording of intracardiac and intravascular pressures, obtaining blood samples for measurement of blood gases and/or dye (or other) dilution curves and cardiac output measurements [dye dilution (Fick) or other method with or without rest and exercise or other studies], with or without chamber injection for angiocardiology, final evaluation and report;	350.0	5.0
right heart only	350.0	5.0
left, percutaneous	200.0	5.0
trans-septal	200.0	5.0
retrograde	200.0	5.0
combined left and right	450.0	5.0
93540 Injection procedure for selective coronary arteriography in conjunction with 93510, 93520 or 93525	150.0	7.0

(For injection procedure for selective coronary arteriography performed independently, see 36230))

	Unit Value	Basic Anes@
<u>93501</u> Right heart catheterization; only	350.0	5.0
(For bundle of His recording, see 93600)		
<u>93503</u> placement of flow directed catheter (e.g., Swan-Ganz), with or without balloon tip, when placed for monitoring purposes, collection of blood, and/or angiography		
(For subsequent monitoring, see 99150, 99151)		
<u>93505</u> Endocardial biopsy	200.0	5.0
<u>93510</u> Left heart catheterization, retrograde, from the brachial artery, axillary artery or femoral artery; percutaneous	200.0	5.0
<u>93511</u> by cutdown	200.0	5.0
<u>93514</u> by left ventricular puncture	200.0	5.0
<u>93515</u> by transeptal venous catheterization	200.0	5.0
<u>93524</u> Combined transeptal and retrograde left heart catheterization	400.0	5.0
<u>93526</u> Combined right heart catheterization and retrograde left heart catheterization	450.0	5.0
<u>93527</u> Combined right heart catheterization and transeptal left heart catheterization (with or without retrograde left heart catheterization)	400.0	5.0
<u>93528</u> Combined right heart catheterization with left ventricular puncture (with or without retrograde left heart catheterization)	400.0	5.0
Injection procedures performed in conjunction with cardiac catheterization. These include placement or repositioning of catheters and use of automatic power injectors. The technical details of angiography, supervision of filming and processing, interpretation and report are not included. For radiological services, see appropriate section.		
<u>93541</u> Injection procedure during cardiac catheterization; for pulmonary angiography	290.0	
<u>93542</u> for selective right ventricular or right atrial angiography	290.0	
<u>93543</u> for selective left ventricular or left atrial angiography	290.0	
(For radiological procedures, see 75500-75509)		
<u>93544</u> for aortography	290.0	
(For radiological procedures, see 75600-75628)		
<u>93545</u> for selective coronary angiography (injection of radiopaque material may be by hand)	290.0	
(For radiological procedures, see 75750-75755)		
<u>93546</u> Combined left heart catheterization and left ventricular angiography	290.0	
<u>93547</u> Combined left heart catheterization, selective coronary angiography and selective left ventricular angiography (this code number is to be used when procedure 93510 is combined with procedures 93543 and 93545)	350.0	
<u>93548</u> Combined left heart catheterization, selective coronary angiography, selective left ventriculography, and aortic root aortography	300.0	
<u>93549</u> Combined right and left heart catheterization, selective coronary angiography, and selective left ventricular angiography (this code number is to be used when procedure 93547 is combined with right heart catheterization)	400.0	
(For radiographic procedures, see ((75500-75890) 75741-75748)		
((93550) Independent evaluation of cardiac catheterization data and report	50.0	

	Unit Value	Basic Anes@
93560 Dye dilution studies, indicator dye curves, including arterial cannulization (independent procedure)	30.0	
93565 with cardiac output measurement, initial (independent procedure)	50.0	
93566 subsequent, same study period, each	20.0	
<u>93561</u> Indicator dilution studies such as dye or thermal dilution, including arterial and/or venous catheterization; with cardiac output measurement (separate procedure)	50.0	
<u>93562</u> subsequent measurement of cardiac output	20.0	
(For unlisted cardiac catheterization procedure, see 93799)		

INTRACARDIAC ELECTROPHYSIOLOGICAL PROCEDURES

<u>93600</u> Bundle of His recording	200.0	
<u>93602</u> Intra-atrial recording	BR	
<u>93604</u> Intraventricular recording	BR	
<u>93606</u> Combined intracardiac recording	BR	
<u>93610</u> Intra-atrial pacing	BR	
<u>93612</u> Intraventricular pacing	BR	
<u>93614</u> Bundle of His pacing	BR	

(For intracardiac phonocardiogram, see 93210)
 (For radio-isotope methods, see ((70+90) 78470)

Other Vascular Studies
 (For arterial cannulization and recording of direct arterial pressure, see 36620)
 (For radiographic injection procedures, see 36000-((36250) 36299)
 (For vascular cannulization for hemodialysis, see 36800-36820)
 (For ultrasound vascular procedures, including Doppler, see 76550, 76900-76925)
 (For chemotherapy for malignant disease, see ((96030-96050) 90790-90796)

<u>93700</u> Peripheral vascular disease studies	BR+	
<u>93720</u> Plethysmography, total body	BR+	
<u>93725</u> regional	BR+	
<u>93730</u> Phleboreography	BR	
<u>93740</u> Temperature gradient studies	BR+	
<u>93760</u> Thermogram, cephalic	BR+	
<u>93762</u> peripheral	38.0	
<u>93770</u> Venous pressure determination	10.0	

(For central venous cannulization and pressure measurements, see 36480-36500)

<u>93780</u> Circulation time, one test	10.0	
<u>93781</u> two or more test materials	20.0	
<u>93795</u> Electronic analysis of internal pacemaker system; to include analysis of pulse, amplitude, duration, configuration of wave form, and testing of sensing function of pacemaker	50.0	
<u>93796</u> telephonic analysis of rate	15.0	

OTHER PROCEDURES

<u>93799</u> Unlisted cardiovascular service or procedure	BR	
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AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-21-070 PULMONARY. Values for items 94010-((94770)94799 include laboratory procedure(s), interpretation and physician's services (except surgical and anesthesia services as listed in the section on Surgery), unless otherwise stated.

	Unit Value
<u>94010</u> Spirometry, complete, including graphic record, total and timed vital capacity ((and maximal	

	Unit Value		Unit Value
breathing capacity, with written report)) expiratory flow rate measurement(s), and/or maximal voluntary ventilation	30.0	94700	Arterial blood gas study (((including cannulization of artery, measurement of arterial)) oxygen saturation, PO ₂ , PCO ₂ , CO ₂ ((content and)) pH), rest only
(94030) Bronchspirometry: measurement of differential ventilation and oxygen consumption (independent procedure)	50.0)	94705	rest and exercise (including cannulization of artery)
((For insertion of tube, see 31700))			
94060		94710	complete, ((#)) 3 or more (e.g., O ₂ administration, IPPB, exercise, etc.)
94070	50.0	94715	Hemoglobin-oxygen affinity (pO ₂ for 50% hemoglobin saturation with oxygen)
94150	6.0		(For values for blood gas determination, see 82800 et seq.)
94160	10.0		(For single arterial puncture, see 36600)
94200	20.0	94720	Carbon monoxide diffusing capacity, any method
(94210) Maximal expiratory flow rate measurement or equivalent (independent procedure)	10.0)	94725	Membrane diffusion capacity
94240		94750	Pulmonary compliance study any method
((Residual air (helium method) including equilibration time)) Functional residual capacity or residual volume; helium method, nitrogen open circuit method, or other method (specify)	25.0	94770	Carbon dioxide, expired gas determination by infrared analyzer
94250	10.0		(For bronchoscopy, see 31620-31659)
94260	20.0		(For placement of flow directed catheter, see 93503)
(94280) Residual air (open circuit method) including alveolar nitrogen	60.0)		(For venipuncture, see 36410)
94350	BR+		(For central venous catheter placement, see 36480-36485)
((Nitrogen washout curve (continuous)) Determination of maldistribution of inspired gas; multiple breath nitrogen washout curve including alveolar nitrogen or helium equilibration time			
(For plethysmography, see 93720, 93725)			
94360	BR		(For arterial puncture, see 36600)
94370	25.0		(For arterial catheterization, see 36620)
94375	20.0		(For thoracentesis, see 32000)
94400	20.0		(For phlebotomy, therapeutic, see 99195)
94450	20.0		(For lung biopsy, needle, see 32405)
94620	40.0		(For intubation, orotracheal or nasotracheal, see 31500)
94650	40.0	94799	Unlisted pulmonary service or procedure
94651	20.0		BR
94652	50.0	AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)	
94656	40.0	WAC 296-21-075 ALLERGY ((TESTING)) AND CLINICAL IMMUNOLOGY.	
94657	15.0	NOTES	
94660	40.0	ALLERGY SENSITIVITY TESTS: The performance and evaluation of selective cutaneous and mucous membrane tests in correlation with the history, physical examination, and other observations of the patient. The number of tests performed should be judicious and dependent upon the history, physical findings, and clinical judgment. All patients should not necessarily receive the same tests nor the same number of sensitivity tests.	
94662	40.0	IMMUNOTHERAPY (DESENSITIZATION, HYPOSENSITIZATION): The parenteral administration of allergenic extracts as antigens at periodic intervals, usually on an increasing dosage scale to a dosage which is maintained as maintenance therapy. Indications for immunotherapy are determined by appropriate diagnostic procedures coordinated with clinical judgment and knowledge of the natural history of allergic diseases.	
94664	30.0	OTHER THERAPY: For medical conferences on the use of mechanical and electronic devices (precipitators, air conditioners, air filters, humidifiers, dehumidifiers), climatotherapy, physical therapy, occupational and recreational therapy, see 95105.	
94665	15.0	(For definitions of LEVELS OF SERVICE, see the Introduction)	
94667	40.0	(For medical service procedures, see 90000-90699)	
94668	15.0	(For skin testing of bacterial, viral, fungal extracts, etc., see 86450-86585)	
94680	50.0	((The following values are based on allergy testing performed under the direct supervision of a physician, and must include physician observation and interpretation of their significance in relation to the history and physical examination. Listed values may be added to other significant services rendered at the same visit.))	
94681	100.0		
94690	16.0		

SPECIAL DIAGNOSTIC PROCEDURES (ALLERGY TESTING)

Unit Value

	Unit Value
95000 ((Scratch or puncture test, one to ten tests)) Percutaneous tests (scratch, puncture, prick) with allergenic extracts; up to 30 tests	10.0
95001 ((each additional test)) 31-60 tests each test	1.0
95002 61-90 tests each test	1.5
95003 more than 90 tests each test	2.0
95005 Percutaneous tests (scratch, puncture, prick) with antibiotics, biologicals, stinging insects; 1-5 tests	10.0
95006 6-10 tests each test	1.0
95007 11-15 tests each test	1.5
95011 more than 15 tests each test	2.0
95014 Intracutaneous (intradermal) tests, with antibiotics, biologicals, stinging insects, immediate reaction 15-20 minutes; 1-5 tests	15.0
95016 6-10 tests each test	2.0
95017 11-15 tests each test	2.5
95018 more than 15 tests each test	3.0
95020 Intracutaneous (interdermal) tests with allergenic extracts, immediate reaction—15 to 20 minutes; up to 10 tests	15.0
95022 21-30 tests each test	2.0
95023 more than 30 tests each test	2.5
95030 Intracutaneous (intradermal) tests with allergenic extracts, delayed reaction—24 to 72 hours, including reading; 2 tests	20.0
95031 3-4 tests each test	2.0
95032 5-6 tests each test	2.5
95033 7-8 tests each test	3.0
95034 more than 8 tests each test	3.5
((95020) Intradermal test, one to ten tests	15.0
95021 each additional test	1.5)
95040 Patch test, one to ((five)) ten tests	10.0
95041 ((each additional test)) 11-20 tests each test	2.0
95042 21-30 tests each test	2.5
95043 more than 30 tests each test	3.0
95050 Photo-patch test, one to ((three)) ten tests	10.0
95051 ((each additional test)) more than 10 tests each test	4.0
95056 Photo test((, one to five tests))	10.0
((95057) each additional test	2.0))
95060 Mucous membrane test ((o)phthalmic((, sublingual and/or nasal), one or two tests))	10.0
95065 Direct nasal mucous membrane test	10.0
((95061) each additional test	4.0
95070 Direct bronchial mucosa (insufflation) testing	BR+)
95070 Inhalation bronchial challenge testing (not including necessary pulmonary function tests); with histamine, methacholine, or similar compounds	BR
95071 with antigens, specify	BR
(For pulmonary function tests, see 94060, 94070)	
95080 Passive transfer test ((including cost of recipient)) one to ten tests	100.0
95081 11-20 tests each ((additional)) test	2.0
((95090) Allergic conditions necessitating extensive testing	BR+))
95082 more than 20 tests each test	3.0
(For allergy laboratory tests, see 86000-86699)	
(For intravenous therapy for severe or intractable allergic disease, see 90799)	
(((For thermogram, see 93760)))	
(For preparation of antigens, materials supplied by physician, etc., see 99070)	
95105 Medical conference services (e.g., use of mechanical and electronic devices, climatotherapy, breathing exercises and/or postural drainage)	50.0

(For summary conference or for therapeutic conference by physician following completion of diagnostic workup, including discussion, avoidance, elimination, symptomatic treatment, and immunotherapy, see 90040-90070)

(For prolonged conference, see 99155-99156)

95120 Immunotherapy, in prescribing physician's office or institution, allergenic extract; single antigen	20.0
95125 multiple antigens	30.0
95130 stinging insect antigens	30.0
95135 Professional services performed in the supervision and provision of antigens for immunotherapy in other than the providing physician's office or institution; single antigen, single dose vial	20.0
95140 multiple antigens, single dose vials	30.0
95145 stinging insect antigens, single dose vials	30.0
95150 Professional services performed in the supervision and provision of antigens for immunotherapy in other than the providing physician's office or institution; single antigen, multiple dose vials	25.0
95155 multiple antigens, multiple dose vials	35.0
95160 stinging insect antigens, multiple dose vials	35.0
95180 Rapid desensitization procedure, each hour (e.g., insulin, penicillin, horse serum)	BR
95199 Unlisted allergy/clinical immunologic service or procedure	BR

(For skin testing of bacterial, viral, fungal extracts, see 95030-95034, 86450-86585)

(For special reports on allergy patients, see 99080)

(For testing procedures such as radioallergosorbent testing (RAST), rat mast cell technique (RMCT), mast cell degranulation test (MDT), lymphocytic transformation test (LTT), leukocyte histamine release (LHR), migration inhibitory factor test (MIF), transfer factor test (TFT), nitroblue tetrazolium dye test (NTD), see Immunology section in Pathology or use 95199)

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-21-080 ((MISCELLANEOUS)) NEUROLOGY AND NEUROMUSCULAR.

(((For skin testing of bacterial, viral, fungal extracts, etc., see 86450-86585)))

NOTES

Neurologic services are typically consultative, and any of the five levels of consultation (90600-90630) may be appropriate;

In addition, services and skills outlined under Medicine Levels of Service appropriate to neurologic illnesses should be coded similarly (90000 series).

	Unit Value
((95010) Exclusion tests for pheochromocytoma (e.g., regitine, benzodioxane, histamine, etc.)	30.0
95020 Electroencephalogram (EEG), awake, asleep (natural or induced) and activation	70.0
(For EEG monitoring during surgery, see 90930))	
95819 Electroencephalogram (EEG); standard or portable, same facility	70.0
95821 portable, to an alternate facility	80.0
95822 sleep	70.0
95823 physical or pharmacological activation	70.0
95824 cerebral death evaluation recording	70.0
95826 intracerebral (depth) EEG	70.0
95827 all night sleep recording	100.0
95828 Polysomnography (recording, analysis and interpretation of the multiple simultaneous physiological measurements of sleep)	100.0

	Unit Value
95829 <u>Electrocorticogram at surgery (separate procedure)</u>	BR
((95830)) 95831 <u>Muscle testing, manual, (separate procedure); per extremity (excluding hand) or trunk, with report</u>	16.0
95832 <u>hand (with or without comparison with normal side)</u>	10.0
95833 <u>total evaluation of body, excluding hands</u> ...	50.0
((95835)) 95834 <u>total evaluation of body including hands</u>	64.0
((95840)) 95842 <u>muscle testing electrodiagnosis (e.g., reaction of degeneration, ((chronaximetry, strength-duration curve or cathode/)) chronaxy, galvanic tetanus ratio), one or more extremity, ((any)) one or more method.</u>	24.0
((95841) <u>each additional method</u>	24.0))
95845 <u>Strength duration curve, each nerve</u>	10.0
((95850)) 95851 <u>Range of motion measurements and report, each extremity (independent procedure), excluding hand</u>	16.0
95852 <u>hand, with or without comparison with normal size</u>	10.0
95857 <u>Tensilon test for myasthenia gravis;</u>	10.0
95858 <u>with electromyographic recording</u>	20.0
95860 <u>Electromyography, one extremity and related paraspinal area</u>	80.0
95861 <u>two extremities and related paraspinal areas</u> ...	120.0
95863 <u>three extremities and related paraspinal areas</u>	160.0
((95862)) 95864 <u>four extremities and related paraspinal areas</u>	200.0
95867 <u>Electromyography, cranial nerve supplied muscles; unilateral</u>	100.0
95868 <u>bilateral</u>	150.0
95869 <u>Electromyography, limited study of specific muscles (e.g. external anal sphincter, thoracic spinal muscles)</u>	80.0
<u>(For eye muscles, see 92265)</u>	
95875 <u>Ischemic forearm exercise test</u>	20.0
95880 <u>Assessment of higher cerebral function with medical interpretation; aphasia testing</u>	50.0
95881 <u>developmental testing</u>	30.0
95882 <u>cognitive testing and others</u>	30.0
95900 <u>Nerve conduction velocity and/or latency study, motor ((or sensory;)) each nerve</u>	32.0
((95905) <u>contralateral nerve</u>	24.0)
95910 <u>motor and sensory, each nerve</u>	56.0
95915 <u>contralateral nerve</u>	48.0
95920 <u>additional ipsilateral or contralateral nerve; each</u>	32.0
95930 <u>Achilles reflex response, electrical recording (ART)</u>	10.0
95950 <u>Ultrasonography (echograms) "A" scan, brain</u> ...	BR+
95960 <u>other areas or organs</u>	BR+
95980 <u>"B" scan</u>	BR+)
95904 <u>sensory, each nerve</u>	24.0
95925 <u>Somatosensory testing (e.g., cerebral evoked potentials), one or more nerves</u>	BR
95933 <u>Orbicularis oculi (blink) reflex, by electrodiagnostic testing</u>	BR
95935 <u>"H" reflex, by electrodiagnostic testing</u>	BR
95937 <u>Neuromuscular junction testing (repetitive stimulation, paired stimuli), each nerve, any one method</u>	BR
95999 <u>Unlisted neurological or neuromuscular diagnostic procedure</u>	BR

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)
WAC 296-21-090 SPECIAL DERMATOLOGICAL PROCEDURES.

Unit
Value

(List in addition to office visit.)

Dermatologic services are typically consultative, and any of the five levels of consultation (90600-90630) may be appropriate;

In addition, services and skill outlined under Medicine Levels of Service appropriate to dermatologic illnesses should be coded similarly (90000 series).

(For intralesional injections, see 11900, 11901)

96900 <u>Actinotherapy (ultraviolet light)((local))</u>	((2.0))
	5.0
96910 <u>Photochemotherapy; tar and ultraviolet B</u>	5.0
((96905) <u>general</u>	5.0))
96912 <u>psoralens and ultraviolet A (PUVA)</u>	5.0
((96920) <u>Galvanic iontophoresis</u>	5.0))
96999 <u>Unlisted special dermatological service or procedure</u>	BR

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76)

WAC 296-21-095 PHYSICAL MEDICINE. The ((following values apply)) department of self-insurer will authorize and pay for the following physical medicine services only when ((these)) the services are under the ((continuous and)) direct, continuous supervision of a physician who is "Board Qualified" in the field of physical medicine and rehabilitation ((and are)), (except for (1) and (2) below). The services must be carried out by the physician or Registered Physical Therapist or a Physical Therapist Assistant serving under the direction of a Registered Physical Therapist, by whom he is employed ((by him; except as noted in 97070. Physiatrists prescribing and supervising physical therapy by a Registered Physical Therapist, on a referral basis, may be compensated on the basis of an initial office visit and followup visits not to exceed once weekly, in addition to the physical therapy)).

The department or self-insurer will allow other licensed physicians to provide physical medicine modalities in the following situations:

(1) The primary attending physician may direct Physical Therapist modalities as listed under 97000 and/or procedures as listed under 97100 in his office. No more than six such visits will be authorized and paid to the attending physician. If the injured worker requires treatment beyond six visits, he must be referred to a Registered Physical Therapist or a Physiatrist for such treatment. The attending physician can bill an office visit in addition to the physical therapy visit for the same day.

Procedure 97070 should be used to bill the Physical Therapy portion of the visit.

(2) In remote areas, where no Registered Physical Therapist or Physical Therapist Assistant is available, treatment by the attending physician with modalities listed under 97100 may be billed under 97070.

(For fabrication of splints, bracing and other supportive devices, see 99070)

(For muscle testing, range of joint motion, electromyography, etc., see ((95830-95930)) 95831 et seq.)

Unit
Value

Modalities

97000 <u>Office visit with one of the following modalities to one area</u>	12.0
(a) Hot or cold packs	
(b) Traction, mechanical	
(c) Electrical stimulation (unattended)	
(d) Vasopneumatic devices	
(e) Paraffin bath	
(f) Microwave	
(g) Whirlpool	
(h) Diathermy	

	Unit Value	Unit Value
(i) Infrared		
(j) Ultraviolet		
97050 Office visit with two or more modalities to same area	13.0	
97070 In remote isolated areas only, where there is no Registered Physical Therapist or Physical Therapist Assistant serving under the direction of a Registered Physical Therapist within reasonable distance, treatment by any of the following modalities given in a physician's office, hospital, nurse practitioner clinic, by other (than) than a Registered Physical Therapist, will be allowed	5.0	
Procedures		
(Physician or therapist is required to be in constant attendance)		
97100 Office visit with one of the following procedures to one area, initial 30 minutes	16.0	
(a) Therapeutic exercises		
(b) Neuromuscular re-education		
(c) Functional activities		
(d) Gait training		
(e) Electrical stimulation (manual)		
(f) Traction, manual		
(g) Massage		
(h) Contrast baths		
(i) Ultrasound		
97101 each additional 15 minutes	5.0	
97200 Office visit including combination of any modality(s) and procedure(s), initial 30 minutes	16.0	
97201 each additional 15 minutes	5.0	
97220 Hubbard tank, initial 30 minutes	24.0	
97221 each additional 15 minutes (maximum allowance, one hour)	5.0	
97240 Pool therapy or Hubbard tank with therapeutic exercises, initial 30 minutes	30.0	
97241 each additional 15 minutes (maximum allowance, one hour)	6.0	
97260 Manipulation (cervical, thoracic, lumbosacral, sacroiliac, hand, wrist, etc.), one area (independent procedure) performed by an osteopathic physician	16.0	
97261 each additional area	8.0	
(For manipulation under general anesthesia, see appropriate anatomic section in Musculoskeletal System)		
97500 Orthotics training (dynamic bracing, splinting, etc.) upper extremities, initial 30 minutes	24.0	
97501 each additional 15 minutes	12.0	
97520 Prosthetic training, initial 30 minutes	24.0	
97521 each additional 15 minutes	12.0	
97540 Activities of daily living (ADL) and diversional activities, initial 30 minutes	24.0	
97541 each additional 15 minutes	12.0	
Tests and Measurements		
(For muscle testing, manual or electrical, joint range of motion, electromyography or nerve velocity determination, see 95830-95930)		
	Unit Value	
97700 Office visit including one of the following tests or measurements, with report, initial 30 minutes	24.0	
(a) Orthotic "check-out"		
(b) Prosthetic "check-out"		
(c) Activities of daily living "check-out"		
97701 each additional 15 minutes	12.0	
97720 Extremity testing for strength, dexterity or stamina, initial 30 minutes	24.0	
97721 each additional 15 minutes	12.0	

97740 Kinetic activities to increase coordination, strength and/or range of motion, one area (i.e., any two extremities or trunk), initial 30 minutes	24.0
97741 each additional 15 minutes	12.0

Other Procedures

97799 Unlisted physical medicine service or procedure	BR
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AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-21-125 ANESTHESIA. (1) ~~(Values)~~ Codes for the listing of anesthesia services are ~~(listed)~~ the same as for ~~(each procedure in the)~~ surgical ~~(section)~~ procedures and ~~(for certain procedures in other)~~ are found in the surgery section(s). ~~(These values are to be used only when the anesthesia is personally administered by a licensed physician and surgeon who remains in constant contact attendance during the procedure for the sole purpose of rendering such anesthesia service)~~ Anesthesia services are reported by adding the modifier code '-30' (defined under "Anesthesia Modifiers" later in these Guidelines) to the surgical procedure code.

The reporting of anesthesia services is appropriate by or under the responsible supervision of a physician. These ~~(values)~~ services include usual pre- and post-operative visits, the administration of the anesthetic and the administration of fluids and/or blood incident to the anesthesia or surgery.

Items used by all physicians in reporting their services are presented in the INTRODUCTION. Some of the commonalities are repeated here for the convenience of those physicians referring to this section on ANESTHESIA. Other definitions and items unique to Anesthesia are also listed.

(2) **TIME REPORTING:** Anesthesia time begins when the anesthesiologist begins to prepare the patient for the induction of anesthesia in the operating room or in an equivalent area and ends when the anesthesiologist is no longer in personal attendance, that is, when the patient may be safely placed under postoperative supervision.

(3) **PHYSICIANS' SERVICES:** Rendered in the office, home, or hospital, consultations and other medical services are listed in the section entitled "MEDICINE" (90000 series) now found in the front of the book, beginning on page 1. "Special Services and Reporting" (99000 series) are also presented in the same section.

(4) **MATERIALS SUPPLIED BY PHYSICIAN:** Supplies and materials provided by the physician, e.g. sterile trays, drugs, etc., over and above those usually included with the office visit or other services rendered may be listed separately. List drugs, tray supplies, and materials provided. Identify as 99070.

(5) **SEPARATE OR MULTIPLE PROCEDURES:** It is appropriate to designate multiple procedures that are rendered on the same date by separate entries.

(6) **BY REPORT:** A service that is rarely provided, unusual, variable, or new may require a special report in determining medical appropriateness of the service. Pertinent information should include an adequate definition or description of the nature, extent, and need for the procedure; and the time, effort and equipment necessary to provide the service. Additional items which may be helpful might include: Findings, diagnostic and therapeutic procedures, concurrent problems, and follow-up care.

~~((2))~~ (7) **"STANDBY SERVICES":** When an anesthesiologist is required to participate in the general care of the patient during a surgical procedure, but does not administer anesthesia, these services may be charged on the basis of detention or on the basis of the indicated anesthesia value in accordance with the extent of the services rendered.

~~((3))~~ (8) In procedures where no value is listed, the basic portion of the calculated value will be the same as listed for a comparable procedure.

~~((4))~~ (9) Where unusual detention with the patient is essential for the safety and welfare of such patient, see 99038, 99040.

~~((5))~~ (10) Local infiltration, digital block or topical anesthesia administered by the operating surgeon is included in the unit value for the original surgical procedure.

~~((6))~~ (11) **SUPPLEMENTAL SKILLS:** When warranted by the necessity of supplemental skills, values for the services of the two or more physicians will be allowed.

~~((7))~~ (12) Adjunctive services provided during anesthesia and certain other circumstances may warrant an additional charge.

((ANESTHESIA MODIFIERS

Unit Value

Since the values of anesthesia services are related to the procedure for which the anesthesia was performed, the anesthesia service is billed under the code number of the procedure. Add appropriate anesthesia modifier -40 to -49 to the procedure number to indicate that billing is for anesthesia service and not the medical or surgical procedure.

Listed values for most procedures may be modified under certain circumstances. When applicable, the modifying circumstances should be identified by the addition of the appropriate "modifier code number" (including hyphen) after the usual procedure number. The value should be listed as a single modified total for the procedure. (When multiple modifiers are applicable to a single procedure, see modifier code -49.)

-40 ANESTHESIA SERVICE: Add this modifier (-40) to the usual procedure number and use value listed in "Anes." column for normal, uncomplicated anesthesia:

(For therapeutic hypothermia, see 96250, 96255)

-47 ANESTHESIA BY SURGEON: When regional or general anesthesia is provided by the surgeon use the "Basic" anesthesia value without the added value for time. (Note: Surgical units and anesthesia units are not the same dollar value.) List separately from the surgical service provided and identify by adding this modifier (-47) to the usual procedure number.

(For local infiltration, digital block or topical anesthesia, see WAC 296-21-125, item 5.)

-49 MULTIPLE ANESTHESIA MODIFIERS: Two or more modifiers may be necessary to identify the anesthesia service (e.g., anesthesia performed on a critically ill patient under hypothermic technique). Identify by adding this modifier (-49) to the usual procedure number and briefly indicate the modifying circumstances BR+)

-47 ANESTHESIA BY SURGEON: When regional or general anesthesia is provided by the surgeon use the "Basic" anesthesia value without the added value for time. List separately from surgical service provided and identify by adding this modifier '-47' to the usual procedure number. This does not include local anesthesia.

(For local infiltration, digital block or topical anesthesia, see WAC 296-21-125, item 10.)

-52 REDUCED SERVICES: Under certain circumstances a service or procedure is partially reduced or eliminated at the physician's election. Under these circumstances the service provided can be identified by its usual procedure number and the addition of the modifier '-52', signifying that the service is reduced. This provides a means of reporting reduced services without disturbing the identification of the basic service.

-75 CONCURRENT CARE, SERVICES RENDERED BY MORE THAN ONE PHYSICIAN: When the patient's condition requires the additional services of more than one physician, each physician may identify his or her services by adding the modifier '-75' to the basic service performed.

-99 MULTIPLE ANESTHESIA MODIFIERS: Under certain circumstances two or more modifiers may be necessary to identify the anesthesia service. In such cases modifier '-99' should be added to the usual procedure number and other applicable modifiers may be listed as a part of the description of the service BR+

NEW SECTION

WAC 296-21-12501 ANESTHESIA MODIFIERS. Since the values of anesthesia services are related to the procedure for which the anesthesia was performed, the anesthesia service is billed under the code number of the procedure. Add appropriate anesthesia modifier to the procedure number to indicate that a billing is for anesthesia service and not the medical or surgical procedure.

Listed services and procedures may be modified under certain circumstances. When applicable, the modifying circumstances should be identified by the addition of the appropriate "modifier code number" which is a two digit number placed after the usual procedure number (from which it is separated by a hyphen). If more than one modifier is used the "multiple modifiers" code placed after the procedure number indicates that one or more additional modifier codes will follow.

All modifiers and their respective codes are listed in Appendix A. Modifiers commonly used in ANESTHESIA are as follows:

Unit Value

-22 UNUSUAL SERVICES: When the service(s) provided is greater than that usually required for the listed procedure, it may be identified by adding modifier '-22' to the usual procedure number. A report may also be appropriate.

-23 UNUSUAL ANESTHESIA: Periodically, a procedure which usually requires either no anesthesia or local anesthesia, because of unusual circumstances must be done under general anesthesia. This circumstance may be reported by adding the modifier '-23' to the procedure code of the basic service.

-30 ANESTHESIA SERVICE: May be identified by adding this modifier to the usual procedure number of the basic service. Use value listed in "Anes." column for normal, uncomplicated anesthesia.

NEW SECTION

WAC 296-21-12502 MISCELLANEOUS. (1) Local infiltration, digital block, or topical anesthesia administered by the operating surgeon are included in the surgical services as listed.

(2) Adjunctive services provided during anesthesia and certain other circumstances may warrant an additional listing. This may be done by "Special Report."

- (3) Commonly referenced sections are as follows: Consultation, see 90600-90630 Electric shock treatment, see 90870-90872 Hyperbaric oxygen pressurization, see 99180-99182 Inhalation therapy, see 94650-94668 Pulmonary function tests, see 94010-94620, 94680-94770 Services provided on emergency basis, see 99062-99065 Therapeutic nerve block procedures, see 64400-64640 Identifying qualifying circumstances, see 99100-99135

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-21-128 SPECIAL SERVICES AND BILLING PROCEDURES—ANESTHESIA.

Unit Value

(ANESTHESIA)

Table with 2 columns: Code and Description/Unit Value. Includes rows for 99100 Anesthesia for patient under one year or over 70 years (3.0), 99105 Anesthesia risk as when patient has incapacitating systemic disease (2.0), 99110 Anesthesia complicated by prone position (1.0), 99115 Anesthesia complicated by total body hypothermia (5.0), 99120 below 30°C (10.0), 99125 Anesthesia complicated by extracorporeal circulation (10.0)

	Unit Value
99130 Anesthesia complicated by hyperbaric or compression chamber pressurization	BR+
99135 Anesthesia employed in controlled hypotension.	

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/75)

WAC 296-21-130 CALCULATION OF TOTAL ANESTHESIA VALUES. The total anesthesia value is calculated by adding the listed basic value and time units.

A basic value is listed for most procedures. This includes the value of all anesthesia services except the value of the actual time spent administering the anesthesia or in unusual detention with the patient.

The time units are computed by allowing one unit for each 12 minutes of anesthesia time. Anesthesia time begins when the anesthesiologist starts physically to prepare the patient for the induction of anesthesia in the operating room area (or its equivalent) and ends when the anesthesiologist is no longer in constant attendance (when the patient may be safely placed under post-operative supervision).

For example, in a procedure with a basic value of 5.0 units requiring two hours and forty-five minutes of anesthesia time, the time units total 14.0 and are added to the basic value of 5.0, resulting in a value of 19.0 units for this anesthesia service.

When multiple surgical procedures are performed during the same period of anesthesia, only the greater basic value of the various surgical procedures will be used. For example, when a "D & C" with a basic value of 3.0 units is followed by a hysterectomy with a basic value of 5.0 units during the same period of anesthesia, the basic value to be used is 5.0 units. To this value are added the time units applicable for the entire period of anesthesia time for the multiple procedures performed.

When anesthesia is administered by a nurse anesthesiologist under the supervision of a physician anesthesiologist, the supervising physician anesthesiologist must bill the basic unit value rate only for his/her services. The time units rate will be paid to the nurse anesthesiologist or the hospital, whichever case is appropriate. The modifier code -52 should be used to identify this service.

Basic value (as listed or modified) + time units =
TOTAL ANESTHESIA VALUE.

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 296-21-085 SPECIFIC THERAPEUTIC PROCEDURES—MISCELLANEOUS.

AMENDATORY SECTION (AMENDING ORDER 74-7, FILED 1/30/74)

WAC 296-22-010 GENERAL INFORMATION AND INSTRUCTIONS. Rules and billing procedures pertaining to all practitioners rendering services to injured workers are presented in the General Information Section beginning with WAC 296-20-010. Some commonalities are repeated here for the convenience of those doctors referring to the Surgery Section. Definitions and rules unique to Surgery are also included here. Doctor's services rendered for office, home, hospital, consultations and other services are listed in the Medicine Section.

(1) Listed values for all surgical procedures include the surgery, local infiltration, digital block or topical anesthesia when used and the normal uncomplicated follow-up care for the period indicated in days in the column headed "Follow-up Days".

(2) Follow-up care for diagnostic procedures (e.g., endoscopy, injection procedures for radiography, etc.) includes only that care related to recovery from the diagnostic procedure itself. Care of the condition for which the diagnostic procedure was performed or other concomitant conditions is not included and may be charged for in accordance with the services rendered.

(3) Follow-up care for therapeutic surgical procedures includes only that care usually a part of the surgical service. Complications, exacerbations, recurrence or the presence of other diseases or injuries requiring additional services concurrent with the procedure(s) or during the listed period of normal follow-up care may warrant additional charges. (See modifier -68).

When an additional surgical procedure(s) is carried out within the listed period of follow-up care for a previous surgery, the follow-up periods will continue concurrently to their normal terminations.

(4) **PRE-OPERATIVE VISITS AND SERVICES:** Under most circumstances the immediate pre-operative visit in the hospital or elsewhere necessary to examine the patient, complete the hospital records, and initiate the treatment program is included in the listed value for the surgical procedure.

Additional charges may be warranted for pre-operative services under the following circumstances:

(a) When the pre-operative visit is the initial visit (e.g., an emergency, etc.) and prolonged detention or evaluation is required to prepare the patient or to establish the need for and type of surgical procedure.

(b) When the pre-operative visit is a consultation as defined in WAC 296-21-030.

(c) When procedures not usually part of the basic surgical procedure (e.g., ((bronchoscopy)) bronchoscopy prior to chest surgery, etc.) are provided during the immediate pre-operative period.

(5) **CONCURRENT SERVICES BY MORE THAN ONE PHYSICIAN:** Charges for concurrent services of two or more physicians may be warranted under the following circumstances:

(a) Medical services provided during the surgical procedure or in the post-operative period (e.g., diabetic management, operative monitoring of cardiac or brain conditions, management of post-operative electrolyte imbalance, etc.).

(b) **TWO SURGEONS:** Under certain circumstances the skills of two surgeons (e.g., a urologist and a general surgeon in the creation of an ileal conduit, etc.). By prior agreement, the total value may be apportioned in relation to the responsibility of work done. The total value may be increased by 25% in lieu of the assistant's charge. (See modifier -62).

(c) **CO-SURGEONS:** Under certain circumstances, two surgeons (usually with similar skills) may function simultaneously as primary surgeons performing distinct parts of a total surgical service (e.g., two surgeons simultaneously applying skin grafts to different parts of the body of the same patient). By prior agreement, the total value may be apportioned in relation to the responsibility and work done. The total value may be increased by an appropriate amount in lieu of the usual assistant's charge. (See modifier -64).

(d) **SURGICAL TEAM:** Under some circumstances highly complex procedures requiring the concomitant services of several physicians, often of different specialties, plus other highly skilled, specially trained personnel and various types of complex equipment are carried out under the surgical team concept with a single, global fee for the total service. The services included in the "global" charge vary widely and no single value can be listed. The value should be supported by a report to include itemization of the physician(s) services, paramedical personnel and equipment included in the "global" charge. (See modifier -66).

(6) **ASTERISK (*) PROCEDURES OR ITEMS:** Certain relatively small surgical services involve a readily identifiable surgical procedure but include variable pre-operative and post-operative services (e.g., incision and drainage of an abscess, injection of a tendon sheath, manipulation of a joint under anesthesia, dilation of the urethra, etc.). Because of the indefinite pre- and post-operative services the usual "package" concept for surgical services (see above) cannot be applied. Such procedures are identified by an asterisk (*) following the procedure code number.

Where an asterisk (*) precedes a procedure number and its value, the following rules apply:

(a) The services as listed ((value is for)) includes the surgical procedure only. Associated pre- and post-operative services are not included.

(b) Pre-operative services are considered as one of the following:

(i) When the asterisk (*) procedure is carried out at the time of an initial visit (new patient) and this procedure constitutes the major service at that visit, procedure number 99025 is listed in lieu of the usual initial visit as an additional service.

(ii) When the asterisk (*) procedure is carried out at the time of an initial or other visit involving significant identifiable services (e.g., removal of a small skin lesion at the time of a comprehensive history and physical examination), the appropriate visit is listed in addition to the asterisk (*) procedure and its follow-up care.

(iii) When the asterisk (*) procedure is carried out at the time of a follow-up (established patient) visit and this procedure constitutes the major service at that visit, no visit service is usually added.

(iv) When the asterisk (*) procedure requires hospitalization, an appropriate hospital visit is listed in addition to the asterisk (*) procedure and its follow-up care.

~~((b))~~ (c) All post-operative care is to be added on a ((fee-for-service)) service-by-service basis (e.g., office or hospital visit, cast change, etc.).

~~((c))~~ When the asterisk (*) procedure is carried out at the time of the initial office visit and this procedure constitutes the major service provided, add 0.24 surgical units in lieu of the usual initial visit (e.g., 90000 or 90010).

(d) When the asterisk (*) procedure is carried out as part of an office, hospital or other visit involving significant identifiable, additional services (e.g., removal of a minor skin lesion at the time of a comprehensive history and physical examination, etc.), list the appropriate visit and listed value for that visit in addition to listing the asterisk procedure and its value.

(e) The emergency room will be considered the office for those physicians providing regular emergency room care to the hospital and fees will be allowed on this basis.)

(d) Complications are added on a service-by-service basis (as with all surgical procedures).

(7) MULTIPLE OR BILATERAL SURGICAL PROCEDURES:

(a) When multiple or bilateral surgical procedures which add significant time or complexity to patient care are performed at the same operative session (See modifier -50).

(b) Incidental procedures (e.g., incidental appendectomy, incidental scar incision, puncture of ovarian cysts, simple lysis of adhesions, simple repair of hiatal hernia, etc.) do not warrant an additional charge. (See modifier -52). THESE PROCEDURES MUST BE AUTHORIZED IN ADVANCE.

(8) SURGERY AND FOLLOW-UP CARE PROVIDED BY DIFFERENT PHYSICIANS: When one physician performs the surgical procedure itself and another provides the follow-up care, the value may be apportioned between them by agreement along with notification to the department of the fee distribution. (See modifier -54 or -55).

(9) **ANESTHESIA BY SURGEON:** When regional or general anesthesia is provided by the surgeon, value as "Basic" value for anesthesia procedure without added value for time. (See modifier -47) (For local infiltration, digital block or topical anesthesia, see WAC 296-22-010, item 1).

(10) In cases where the claimant does not survive, the percentage of the flat fee paid the physician shall be commensurate with the services rendered.

(11) The emergency room will be considered the office for those physicians providing regular emergency room care to the hospital and fees will be allowed on this basis.

(12) Materials supplied by physician: Supplies and materials provided by the physician, e.g., sterile trays/drugs, over and above those usually included with the office visit or other services rendered may be listed separately. List drugs, trays, supplies, and materials provided. Identify as 99070.

(13) Separate or multiple procedures: It is appropriate to designate multiple procedures that are rendered on the same date by separate entries. (See Modifier -50 below).

(14) Special report: A service that is rarely provided, unusual, variable, or new may require a special report in determining medical appropriateness of the service. Pertinent information should include an adequate definition or description of the nature, extent, and need for the procedure, and the time, effort, and equipment necessary to provide the service. Additional items which may be included are: Complexity of symptoms, final diagnosis, pertinent physical findings (such as size, location, and number of lesion(s), if appropriate), diagnostic and therapeutic procedures (including major and supplementary surgical procedures, if appropriate), concurrent problems, and follow-up care. See WAC 296-20-01002 for "BR" By Report instructions.

(15) Surgery modifiers: (For other modifiers, see appropriate sections.)

Listed values ((for most)) and procedures may be modified under certain circumstance ((as listed below)). When applicable, the modifying circumstance should be identified by the addition of the appropriate "modifier code number" ((including the hyphen)) which is a two digit number placed after the usual procedure number ((e.g., repair of small laceration—procedure number 12000—performed on a new patient would be billed as 12000-58)) from which it is separated by a hyphen. ((The value should be listed as a single, modified total for the procedure. When)) If more than one modifier is used, the "multiple

modifiers" ((are applicable, use modifier code -99:)) placed first after the procedure code indicates one or more additional modifier codes will follow. All modifiers and their respective codes are listed in Appendix A. Modifiers commonly used in surgery are as follows:

Unit Value

-22 UNUSUAL SERVICES: When the service(s) provided ((are)) is greater than ((those)) that usually required for the listed procedure, ((identify)) it may be identified by adding ((this)) modifier ~~((-22))~~ '-22' to the usual procedure number. List modified value. ((May require)) A report may be required.

-23 UNUSUAL ANESTHESIA: Periodically, a procedure, which usually requires either no anesthesia or local anesthesia, because of unusual circumstances must be done under general anesthesia. This circumstance may be reported by adding the modifier '-23' to the procedure code of the basic service. BR

-26 PROFESSIONAL COMPONENT: Certain procedures (e.g., laboratory, radiology, electrocardiogram, specific diagnostic services) are a combination of a physician component and a technical component. When the physician component is reported separately, the service may be identified by adding the modifier '-26' to the usual procedure number. BR

-47 ANESTHESIA BY SURGEON: When regional or general anesthesia is provided by the surgeon, it may be reported by adding to modifier '-47' to the basic service. (This does not include local anesthesia.)

Use the "basic" anesthesia value ((without the added value for time)) only. (Note: Surgical units and anesthesia units are not of the same dollar values.) List separately from the surgical service provided and identify by adding this modifier ~~((-47))~~ '-47' to the usual procedure number. (For local infiltration, digital block or topical anesthesia, see WAC 296-21-125, item 5.)

-50 MULTIPLE OR BILATERAL PROCEDURES: When multiple or bilateral procedures which add significant time or complexity to patient care are provided at the same operative session, identify and value the first or major procedure as listed. Identify secondary or lesser procedure(s) by ~~((adding this modifier (-50)))~~ '-50' to the usual procedure number(s) and value at 50% of the listed value(s) unless otherwise indicated.

-52 REDUCED VALUES: Under certain circumstances, the listed value for a procedure is reduced or eliminated ((because of ground rules, common practice, or)) at the physician's election. ((For instance:)) Under these circumstances, the service provided can be identified by it's usual procedure number and the addition of modifier '-52', signifying that the service is reduced. For example:

(a) Incidental procedures (e.g., incidental appendectomies, incidental scar excisions, puncture of ovarian cysts, simple lysis of adhesions, simple repair of a hiatal hernia, etc.) do not warrant an additional charge.

(b) When the listed value is reduced in conformity with a ground rule (e.g., rereduction of a fracture).

(c) When charges for multiple procedures (e.g., multiple lacerations, etc.) are reduced at the physician's election to achieve an appropriate total charge.

((Under any of these or similar circumstances, the services provided can be identified by their usual procedure numbers and the use of a reduced value

	Unit Value		Unit Value
		indicated by adding this modifier (-52) to the procedure number. (Use of this modifier provides a means of reporting services at reduced charge without disturbing usual relative values.))	
-54		<u>SURGICAL PROCEDURE ONLY:</u> When one physician performs the surgical procedure ((itself)) and another provides the ((follow-up care; the)) pre- and/or post-operative management surgical services may be identified by adding the modifier '-54' to the usual procedure number. Value may be apportioned between them by agreement. ((Identify the surgeon's services by adding this modifier (-54) to the usual procedure number.))	-66
-55		<u>((FOLLOW-UP CARE)) POST-OPERATIVE MANAGEMENT ONLY:</u> When one physician performs the post-operative management and another has performed the surgical procedure ((itself and another provides the follow-up care)), the post operative component may be identified by adding the modifier '-55' to the usual procedure number. Value may be apportioned between them by agreement. ((Identify the services of the physician providing follow-up care by adding this modifier (-55) to the usual procedure number.))	-68
-56		<u>PREOPERATIVE MANAGEMENT ONLY:</u> When one physician performs the preoperative care and evaluation and another physician performs the surgical procedure, the preoperative component may be identified by adding the modifier '-56' to the usual procedure number. Value is apportioned as per agreement between practitioners involved.	-75
(-58)		ASTERISK (*) PROCEDURE: When the asterisk (*) is carried out at the time of the initial office visit and this procedure constitutes the major service provided at that visit, identify by adding this modifier (-58) to the usual procedure number and, in lieu of the usual initial visit, add 0.24)	-76
-62		<u>TWO SURGEONS:</u> Under certain circumstances the skills of two surgeons (usually with different skills) may be required in the management of a specific surgical problem (e.g., a urologist and a general surgeon in the creation of an ileal conduit, etc.) By prior agreement, the total value may be apportioned in relation to the responsibility and work done. The total value may be increased by 25% in lieu of the assistant's charge. Under these circumstances the services of each surgeon should be identified by adding this modifier ((-62)) '-62' to the joint procedure number(s) and valued as agreed upon. (Usual charges for surgical assistance may also be warranted if still another physician is required as part of the surgical team.)	-77
-64		<u>CO-SURGEONS:</u> Under certain circumstances, two surgeons (usually with similar skills) may function simultaneously as primary surgeons performing distinct parts of a total surgical service (e.g., two surgeons simultaneously applying skin grafts to different parts of the body or two surgeons repairing different fractures in the same patient). By prior agreement, the total value may be apportioned in relation to the responsibility and work done. The total value may be increased by ((an appropriate amount)) 25% in lieu of the usual assistant's charge. Under these circumstances the services of each surgeon should be identified by adding this modifier ((-64)) '-64' to the joint procedure number(s) and valued as agreed upon.	-80
			OR
			-81
		<u>MINIMUM ASSISTANT SURGEON ALLOWANCE:</u> Identify by adding this modifier ((-81)) '-81' to the usual procedure number and value at..... 1.7	
			-90
		<u>REFERENCE (OUTSIDE) LABORATORY:</u> When laboratory procedures are performed by a party other than the treating or reporting physician, the procedure may be identified by adding the modifier '-90' to the usual procedure number.	
			-99
		<u>MULTIPLE MODIFIERS:</u> Under certain circumstances, ((multiple)) two or more modifiers may be ((applicable. One or more such modifiers may be taken from another section, as applicable)) necessary to completely delineate a service. ((For example, a physician might be called to the hospital emergency room (modifier -18, page 20) to perform a procedure preceded by an asterisk	

(modifier—58;)) In such situations, ((~~he should add this~~)) modifier ((~~(-99)~~)) '-99' should be added to the procedure number and ((~~briefly indicate the circumstances~~)) other applicable modifiers may be listed as part of the description of the service..... BR+

47999	Unlisted procedure, biliary tract
48999	Unlisted procedure, pancreas
49999	Unlisted procedure, abdomen, peritoneum and omentum
53899	Unlisted procedure, urinary system
55899	Unlisted procedure, male genital system
58999	Unlisted procedure, female genital system
59899	Unlisted procedure, maternity care and delivery
60699	Unlisted procedure, endocrine system
((64899)) 64999	Unlisted procedure, nervous system
66999	Unlisted procedure, anterior segment of eye
67299	Unlisted procedure, posterior segment
67399	Unlisted procedure, ocular muscle
67599	Unlisted procedure, orbit
67999	Unlisted procedure, eyelids
68399	Unlisted procedure, conjunctiva
68899	Unlisted procedure, lacrimal system
69399	Unlisted procedure, external ear
69799	Unlisted procedure, middle ear
69949	Unlisted procedure, inner ear
69979	Unlisted procedure, temporal bone, middle fossa approach
((68999))	Unlisted procedure, ophthalmological system
69989	Unlisted procedure, otological system
69999	Unlisted procedure, miscellaneous surgical))

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-016 FOOTNOTES.

- + BR: By Report; see WAC ((296-20-010, item 11;)) 296-20-01002 for detailed information.
- @ Listed units represent basic anesthesia value only; add value for time. See WAC 296-21-130 for calculating total anesthesia values.
- ((~~See WAC 296-22-010, item 6, before using.~~
- ~~See WAC 296-22-010, items 1, 2, 3, 4 for meaning.~~)
- & Sv: See WAC ((296-20-010, item 13;)) 296-20-01002 before using.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-22-017 UNLISTED SERVICE OR PROCEDURE.

A service or procedure may be provided that is not listed in this fee schedule. When reporting such a service, the appropriate "Unlisted Procedure" code may be used to indicate the service, identifying it by "Special Report" as discussed in WAC 296-22-01701 below. The "Unlisted Procedures" and accompanying codes for SURGERY are as follows:

17499	Unlisted procedure, integumentary system
19499	Unlisted procedure, breast
20999	Unlisted procedure, musculoskeletal system, general
21499	Unlisted procedure, head
21899	Unlisted procedure, neck or thorax
22899	Unlisted procedure, spine
22999	Unlisted procedure, abdomen
23929	Unlisted procedure, shoulder
24999	Unlisted procedure, humerus or elbow
25999	Unlisted procedure, forearm or wrist
26989	Unlisted procedure, hands or fingers
27299	Unlisted procedure, pelvis or hip joint
27599	Unlisted procedure, femur or knee
27899	Unlisted procedure, leg or ankle
28899	Unlisted procedure, foot or toes
29799	Unlisted procedure, ((musculoskeletal system)) <u>casting or strapping</u>
30999	Unlisted procedure, nose
31299	Unlisted procedure, accessory sinuses
31599	Unlisted procedure, larynx
31899	Unlisted procedure, trachea, bronchi
32999	Unlisted procedure, ((respiratory system)) <u>lungs and pleura</u>
33999	Unlisted procedure, cardiac surgery
36299	Unlisted procedure, vascular injection
37799	Unlisted procedure, ((cardiovascular system)) <u>vascular surgery</u>
38999	Unlisted procedure, hemic or lymphatic system
39499	Unlisted procedure, mediastinum
39599	Unlisted procedure, diaphragm
40799	Unlisted procedure, lips
40899	Unlisted procedure, vestibule of mouth
41599	Unlisted procedure, tongue, floor of mouth
41899	Unlisted procedure, dentoalveolar structures
42299	Unlisted procedure, palate, uvula
42699	Unlisted procedure, salivary glands or ducts
42999	Unlisted procedure, pharynx, adenoids, or tonsils
43499	Unlisted procedure, esophagus
43999	Unlisted procedure, stomach
44799	Unlisted procedure, intestine
44899	Unlisted procedure, Meckel's diverticulum and the mesentary
45999	Unlisted procedure, rectum
46999	Unlisted procedure, ((digestive system)) <u>anus</u>
47399	Unlisted procedure, liver

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-020 SKIN, ((~~MUCOUS MEMBRANE;~~)) SUBCUTANEOUS AND AREOLAR TISSUES.

		Unit Value	Follow-up Days=	Basic Anes@
INCISION				
*10000	Incision and drainage of infected or noninfected subcutaneous cyst(;;); one lesion	*0.4	0	3.0
10001	second lesion	0.2		
10002	((over two, each additional lesion)) more than two lesions ..	0.1		
10003*	Incision and drainage of infected or noninfected epithelial inclusion cyst ("sebaceous cyst") with complete removal of sac and treatment of cavity8	0	3.0
	(For excision, see 11400, et seq.)			
*10020	Incision and drainage of furuncle	*0.4	0	3.0
*10040	Acne surgery: (eg, marsupialization, opening, or removal of multiple milia, comedones, cysts, pustules((-etc;)))	*0.3	0	3.0
*10060	Incision and drainage of abscess (e.g., carbuncle, suppurative hidradenitis, and other cutaneous or subcutaneous abscesses)((;); simple	0.4	0	3.0
10061	complicated	BR+		3.0
*10080	Incision and drainage of pilonidal cyst(;;); simple	*0.4	0	3.0
10081	complicated	BR+		3.0
	(For excision of pilonidal cyst, see 11770-11772)			
*10100	Incision and drainage of onychia or paronychia, single or simple ..	*0.4	0	3.0
10101	multiple or complicated	BR+		3.0
*10120	Incision and removal of foreign body, subcutaneous tissues(;;); simple	*0.4	0	3.0
10121	complicated	BR+		3.0
*10140	Incision and drainage of hematoma, simple	*0.4	0	3.0
10141	complicated	BR+		3.0

	Unit Value	Follow-up Days=	Basic Anes@
*10160 Puncture aspiration of abscess ((or), hematoma, bulla, or cyst)	*0.3	0	3.0

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-021 EXCISION-DEBRIDEMENT.

DEBRIDEMENT

(For dermabrasions, see 15780-15800)			
(For nail debridement, see 11700-11711)			
(For burn(s), see 16000-16030)			
*11000 Debridement of extensive((ty)) eczematous or infected skin; up to 10% of ((the)) body surface...	*0.4	0	3.0
11001 ((for)) each additional 10% of the body surface	0.2		3.0
11040 Debridement of abrasions	BR+		3.0

PARING OR CURETTMENT

11050* Paring or curettment of benign lesion with or without chemical cauterization (such as verrucae or clavi); single lesion	0.5	0	3.0
11051 two to four lesions	0.6		3.0
11052 more than four lesions	0.7		3.0

EXCISION AND SIMPLE CLOSURE

(Not reconstructive surgery; for reconstructive surgery see ((^))Repair-Complex((-^)))
 (For electro-surgical and other methods, see 17000 et seq.)

BIOPSY

11100 Biopsy((-Excision)) of skin, subcutaneous tissue and/or mucous membrane (including simple closure), unless otherwise listed (((independent)) separate procedure); one lesion	0.6	7	3.0
11101 each additional lesion	0.2	7	3.0

(For biopsy of conjunctiva, see 68100; eyelid, see 67810)

EXCISION-BENIGN LESIONS

Excision (including simple closure) of benign ((cicatricial, fibrous, inflammatory, congenital, cystic, etc.)) lesions of skin((;)) or subcutaneous ((tissue or mucous membrane (-))tissues (eg, cicatricial, fibrous, inflammatory, congenital, cystic lesions), including local anesthesia. See appropriate size and area below((;)).

(For electro((-))surgical and other methods see 17000 et seq.)

*11200 Excision, skin tags((-Excision of)), multiple fibrocuteaneous tags, any area((;)); up to 15	*0.4	0	3.0
11201 each additional 10 lesions	0.2		

(For electro((-))surgical destruction, see 17200, 17201)

((Other Benign Lesions (unless separately listed elsewhere), each lesion:))

(For multiple lesions see WAC 296-22-010, item 7)

((Trunk, arms or legs:))

11400 Excision, benign lesion, except skin tag (unless listed elsewhere), trunk, arms or legs; lesion diameter up to 0.5 cm . . .	0.6	15	3.0
11401 lesion diameter 0.5 to 1.0 cm . . .	0.8	15	3.0
11402 lesion diameter 1.0 to 2.0 cm . . .	1.0	15	3.0
11403 lesion diameter 2.0 to 3.0 cm . . .	1.2	15	3.0
11404 lesion diameter 3.0 to 4.0 cm . . .	1.4	15	3.0
11406 lesion diameter over 4.0 cm . . .	1.6	15	3.0

((Scalp, neck, hands, feet, genitalia:))

11420 Excision, benign lesion, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; lesion diameter up to 0.5 cm	0.8	15	3.0
11421 lesion diameter 0.5 to 1.0 cm . . .	1.0	15	3.0
11422 lesion diameter 1.0 to 2.0 cm . . .	1.2	15	3.0
11423 lesion diameter 2.0 to 3.0 cm . . .	1.4	15	3.0
11424 lesion diameter 3.0 to 4.0 cm . . .	1.6	15	3.0
11426 lesion diameter over 4.0 cm . . .	1.8	15	3.0

((Face, ears, eyelids, nose, lips, mucous membrane:))

11440 Excision, other benign lesion (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; lesion diameter up to 0.5 cm	1.0	15	3.0
11441 lesion diameter 0.5 to 1.0 cm . . .	1.2	15	3.0
11442 lesion diameter 1.0 to 2.0 cm . . .	1.4	15	3.0
((11460 Lesion, diameter more than 2.0 cm, or complicated, any area . . . BR+ ----- 3.0))			
11443 lesion diameter 2.0 to 3.0 cm . . .	1.6	15	3.0
11444 lesion diameter 3.0 to 4.0 cm . . .	1.8	15	3.0
11446 lesion diameter over 4.0 cm . . .	2.0	15	3.0

(For eyelids involving more than skin, see also 67800 et seq.)

EXCISION-MALIGNANT LESIONS

Excision (including simple closure) or treatment by any other method (except radiation or chemosurgery) of malignant lesion of skin ((or mucous membrane, to include)), including local anesthesia, each lesion:

((For multiple lesions, see WAC 296-22-010, item 7))

((Trunk, arms or legs:))

11600 Excision, malignant; lesion, trunk, arms, or legs; lesion diameter up to 0.5 cm	1.2	90	3.0
11601 lesion diameter 0.5 to 1.0 cm . . .	1.6	90	3.0
11602 lesion diameter 1.0 to 2.0 cm . . .	2.0	90	3.0
11603 lesion diameter 2.0 to 3.0 cm . . .	2.4	90	3.0
11604 lesion diameter 3.0 to 4.0 cm . . .	2.8	90	3.0
11606 lesion diameter over 4.0 cm . . .	3.2	90	3.0

Unit Follow-up Basic Value Days= Anes@

Unit Follow-up Basic Value Days= Anes@

((Scalp, neck, hands, feet, genitalia:))

((Hidradenitis (see 10060, 11400-11422, 13000-15730)))

((Lipoma (see 11400-11460, 13000-15730)))

((Lymph node dissection (see 38700-38780)))

((Ulcer—Vascular or inflammatory (see 11400-11460, 13100-15730)))

(For hemangioma, see 11400-11446, 13100-15730)

(For hidradenitis, see 10060-10061, 11400-11446, 13100-15730)

(For lipoma, see 11400-11446, 13100-15730)

(For lymph node dissection, see 38700-38780)

(For ulcer, vascular or inflammatory, see 11400-11446, 13100-15730)

((Face, ears, eyelids, nose, lips, mucous membrane:))

Table with 4 columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Rows include 11620, 11621, 11622, 11623, 11624, 11626.

Table with 4 columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Rows include 11640, 11641, 11642, 11643, 11644, 11646.

(For eyelids involving more than skin, see also 67800 et seq.)

NAILS

(For drainage of paronychia or onychia, see 10100, 10101)

Table with 4 columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Rows include 11700, 11701, 11710, 11711, 11730, 11731, 11732, 11740, 11750.

(For skin graft, if used, see 15050)

Table with 4 columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Rows include 11760, 11762.

MISCELLANEOUS

(For incision of pilonidal cyst, see 10080, 10081)

Table with 4 columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Rows include 11770, 11771, 11772.

((Miscellaneous Lesions (use appropriate procedure number and state diagnosis)))

((Hemangioma (see 11400-11460, 13000-15730)))

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-022 INTRODUCTION.

Unit Follow-up Basic Value Days= Anes@

Table with 4 columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Rows include 11900, 11901, 11920, 11921, 11922, 11950, 11951, 11952, 11954.

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-023 REPAIR((=SIMPLE)). The repair of wounds may be classified as Simple, Intermediate or Complex.

SIMPLE REPAIR is used when the wound is superficial; ie, involving skin and/or subcutaneous tissues, without significant involvement of deeper structures, and which requires simple suturing. For closure with adhesive strips, list appropriate visit only.

INTERMEDIATE REPAIR includes the repair of wounds that, in addition to the above, require layer closure. Such wounds usually involve deeper layers such as fascia or muscle, to the extent that at least one of deeper layers requires separate closure.

COMPLEX REPAIR includes the repairs of wounds requiring reconstructive surgery, complicated wound closures, skin grafts or unusual and time consuming techniques of repair to obtain the maximum functional and cosmetic result. It may include creation of the defect and necessary preparation for repairs or the debridement and repair of complicated lacerations or avulsions.

Instructions for listing services at time of wound repair.

- 1. The repaired wound(s) should be measured and recorded in centimeters, whether curved, angular or stellate.
2. When multiple wounds are repaired, add together the lengths of those in the same classification (see above) and report as a single item.

When more than one classification of wounds is repaired, list the more complicated as the primary procedure and the less complicated as the secondary procedure, using modifier '-50'.

3. Decontamination and/or debridement: Only when gross contamination requires prolonged cleansing is this to be considered a separate procedure. Debridement is considered a separate procedure only when appreciable amounts of devitalized or contaminated tissue are removed.

4. Involvement of nerves, blood vessels and tendons: Report under appropriate system (Nervous, Cardiovascular, Musculoskeletal) for repair of these structures. The repair of the associated wound is included in the primary procedure unless it qualifies as a complex wound, in which case modifier '-50' applies.

Simple ligation of vessels in an open wound is considered as part of any wound closure.

Simple "exploration" of nerves, blood vessels or tendons exposed in an open wound is also considered part of the essential treatment of the wound and is not a separate procedure unless appreciable dissection is required.

Unit Follow-up Basic Value Days= Anes@

((Repair recent wound resulting in a linear repair:)) REPAIR-SIMPLE

Table listing repair codes (e.g., *12000, *12020) and descriptions (e.g., up to 2.5 cm, trunk, extremity, scalp or neck) with associated Unit Value, Follow-up Days, and Basic Anes@.

(Sum of lengths of repairs)

Table listing simple repair codes (e.g., 12001*, 12002*) and descriptions (e.g., Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities) with associated Unit Value, Follow-up Days, and Basic Anes@.

REPAIR - INTERMEDIATE

Table listing intermediate repair codes (e.g., 12031*, 12032*) and descriptions (e.g., Layer closure of wounds of scalp, axillae, trunk and/or extremities) with associated Unit Value, Follow-up Days, and Basic Anes@.

Table listing repair codes (e.g., 12037, 12041*) and descriptions (e.g., over 30.0 cm, Layer closure of wounds of neck, hands, feet and/or external genitalia) with associated Unit Value, Follow-up Days, and Basic Anes@.

((For multiple wounds, see WAC 296-22-010, item 7 and modifier -52))

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-024 REPAIR-COMPLEX. ((Repair, complex)) (Reconstructive (surgery)) procedures, complicated wound closure, skin grafts, ((etc.)) pedicle flaps)

((Values for the following procedures (13000-15730) are to be applied in situations requiring unusual and time-consuming techniques of repair to obtain the maximum functional and cosmetic result. Unless otherwise noted, the stated values include the creation of the defect and necessary preparation for repair, or the debridement and repair of complicated lacerations:))

(For full thickness repair of lip or eyelid, see respective anatomical subsections)

Table listing complex repair codes (e.g., 13100, 13101, 13120) and descriptions (e.g., Repair, complex, trunk; 1.0 cm to 2.5 cm) with associated Unit Value, Follow-up Days, and Basic Anes@.

((Direct Closure - Linear Repair

	Unit Value	Follow-up Days=	Basic Anes@
Excision and/or repair by direct closure of lesion or laceration resulting in a linear repair:			
13000 1.0 cm, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and feet	1.2	30	3.0
13020 eyelids, nose, ears and lips (see also 14800-14860, 40500-40530)	2.0	30	3.0
(for trunk and other areas see 11400-11660, 12000-12300)			
13100 1.0 cm to 2.5 cm, trunk	1.2	30	3.0
13120 scalp, arms and legs	1.8	30	3.0
13140 forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and feet	2.4	30	3.0
13160 eyelids, nose, ears and lips (see also 14800-14860, 40500-40530)	3.0	30	3.0
13200 2.5 cm to 7.5 cm, trunk	3.0	30	3.0
13220 scalp, arms and legs	4.0	30	3.0
13240 forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and feet	6.0	30	3.0
13260 eyelids, nose, ears and lips (see also 14800-14860, 40500-40530)	8.0	30	3.0
13300 unusual, complicated or over 7.5 cm linear repair, any area	BR+		3.0))

ADJACENT TISSUE TRANSFER OR REARRANGEMENT

(For full thickness repair of lip or eyelid, see respective anatomical subsections)

Excision and/or repair by adjacent tissue transfer or rearrangement ((c.g.) eg, Z-plasty, W-plasty, V-Y plasty, rotation flap, (advanced) advancement flap, double pedicle flap)(:)). When applied in repairing lacerations, the procedures listed must be developed by the surgeon to accomplish the repair. They do not apply when direct closure or rearrangement of traumatic wounds incidentally result in these configurations.

((For skin graft or other procedure necessary to close secondary defect in procedures 14000-14860, see WAC 296-22-010, item 7))

14000 for defect up to 6 sq cm, trunk	4.0	60	3.0
14020 scalp, arms and legs	6.0	60	3.0
14040 forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and feet	8.0	60	3.0
14060 eyelids, nose, ears and lips	10.0	60	3.0
14100 defect size between 6 and 20 cm, trunk	6.0	60	3.0
14120 scalp, arms and legs	8.0	60	3.0
14140 forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and feet	10.0	60	3.0
14160 eyelids, nose, ears and lips	14.0	60	3.0

14300 more than 20 sq cm, unusual or complicated, any area BR+ 3.0))

(Skin graft necessary to close secondary defect considered an additional procedure)

14000 Adjacent tissue transfer or rearrangement, trunk; defect up to 10 sq cm	4.0	60	3.0
14001 defect 10 sq cm to 30 sq cm	6.0	60	3.0
14020 Adjacent tissue transfer or rearrangement, scalp, arms and/or legs; defect up to 10 sq cm	6.0	60	3.0
14021 defect 10 sq cm to 30 sq cm	8.0	60	3.0
14040 Adjacent tissue transfer or rearrangement, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and/or feet; defect up to 10 sq cm	8.0	60	3.0
14041 defect 10 sq cm to 30 sq cm	10.0	60	3.0
14060 Adjacent tissue transfer or rearrangement, eyelids, nose, ears and/or lips; defect up to 10 sq cm	10.0	60	3.0
14061 defect 10 sq cm to 30 sq cm	14.0	60	3.0

(For eyelid, full thickness, see 67952 et seq.)

14300 Adjacent tissue transfer or rearrangement, more than 30 sq cm, unusual or complicated, any area	BR		3.0
14350 Filleted finger or toe flap, including preparation of recipient site	BR		3.0

((Eyelid, Full Thickness

Eyelid, full thickness, excision and repair:

14800 by advancement flaps, up to 1/4 eyelid margin	10.0	60	3.0
14810 over 1/4 eyelid margin	12.0	60	3.0
14840 by transfer of tarso-conjunctival flaps from opposing eyelid, up to 2/3 of eyelid, one stage	12.0	60	3.0
14845 two stages	14.0	60	3.0
14850 total eyelid, one stage, lower lid	15.0	60	3.0
14855 upper lid	18.0	60	3.0
14860 second stage, upper or lower lid	2.0	60	3.0))

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-025 FREE SKIN GRAFTS.

((Values of free skin grafts are determined)) Identify by the size and location of the defect (recipient area) and the type of graft((-These values include)); includes simple debridement of granulations or recent avulsion.

When a primary procedure such as orbitectomy, radical mastectomy or deep tumor removal requires skin graft for definitive closure, see appropriate anatomical subsection for primary procedure and this section for skin graft.

((For excision of lesion or excisional preparation of recipient site, see 15000))

((For)) Repair of ((the)) donor site requiring skin graft or local flaps((- see WAC 296-22-010, item 7)) to be added as additional procedure)

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
15000				<u>hands and/or feet; up to 20 sq cm</u>	8.0	45	3.0
				<u>(For finger tip graft, see 15050)</u>			
				<u>(For repair of syndactyly, fingers, see 26560-26562)</u>			
	*3.6		3.0	15241 each additional 20 sq cm...	4.0		
				15260 Full thickness graft, free, including direct closure of donor site, nose, ears, eyelids, ((nose; ears)) and/or lips; up to 20 cm	10.0	45	3.0
				<u>each additional 20 sq cm...</u>	5.0		
				<u>(For eyelids, see also 67952 et seq.)</u>			
				<u>(((For)) Repair of donor site requiring skin graft or local flaps, ((see WAC 296-22-010, item 7 and unit value modifier -50)) to be added as additional separate procedure)</u>			
				15350 Homograft, skin	5.0	45	3.0
				15400 Heterograft, skin	6.0	45	3.0
				15410 Free transplantation of skin flap by microsurgical technique, including microvascular anastomosis; up to 100 sq cm	5.0	45	3.0
				15412 between 101 and 160 sq cm	6.0	45	3.0
				15414 between 161 and 230 sq cm	7.0	45	3.0
				15416 over 230 sq cm	BR		
*15050				PEDICLE FLAPS (SKIN AND DEEP TISSUES)			
				Regions listed refer to the recipient area (not donor site) when flap is being attached in transfer or to ((the)) final site.			
				Regions listed refer to donor site when tube is formed for later transfer or when "delay" of flap is prior to transfer.			
				<u>((Values for following items)) Procedures 15500-15730 do not include extensive immobilization((-for values for)), eg, large plaster casts((-see 29000 et seq)) and other immobilizing devices are considered additional separate procedures.</u>			
				<u>(((For)) Repair of donor site requiring skin graft or local flaps((-see WAC 296-22-010, item 7 and modifier -50)) is considered an additional separate procedure)</u>			
15100	*1.2	0	3.0	15500 ((Form)) Formation of tube pedicle without transfer, or major "delay" of large flap without transfer((-)); on trunk	7.0	45	3.0
				<u>up to defect size 2 cm diameter . . .</u>			
				<u>split graft, ((up to 100 sq cm (except 15050)), trunk, scalp, arms, legs, hands and/or feet (except multiple digits); up to 100 sq cm or each one percent of body area of infants and children (except 15050) . . .</u>			
				<u>each additional 100 sq cm, or each one percent of body area of infants and children, or part thereof . . .</u>			
15101	6.0	45	3.0	15505 on scalp, arms ((and)) or legs	7.0	45	3.0
				<u>Split graft, face, eyelids, mouth, neck, ears, orbits, genitalia, and/or multiple digits; up to 100 sq cm, or each one percent of body area of infants and children (except 15050)</u>			
				<u>on forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands ((and)) or feet . . .</u>	7.0	45	3.0
				<u>on eyelids, nose, ears ((and)) or lips . . .</u>	7.0	45	3.0
15121	2.0			15540 Primary attachment of open or tubed pedicle flap to recipient site requiring minimal preparation((-)); to trunk	9.0	45	3.0
				<u>((each additional)) 100 sq cm, or each one percent of body area of infants and children, or part thereof . . .</u>			
				<u>to scalp, arms and legs . . .</u>	9.0	45	3.0
				<u>to forehead, cheeks, chin, mouth, neck, axillae, genitalia, or hands (except 15580), feet</u>	9.0	45	3.0
				<u>(For cross finger pedicle flap, see 15580)</u>			
15200	4.0	45	3.0	15555 to eyelids, nose, ears and lips . . .	9.0	45	3.0
				<u>Full thickness graft, free, ((up to 20 sq cm)) including direct closure of donor site, trunk; up to 20 sq cm</u>			
				<u>cross finger pedicle flap, including free graft to donor site</u>	9.0	45	3.0
15201	2.0						
				<u>each additional 20 sq cm . . .</u>			
15220	6.0	45	3.0				
				<u>Full thickness graft, free, including direct closure of donor site, scalp, arms and/or legs; up to 20 sq cm</u>			
15221	3.0						
				<u>each additional 20 sq cm . . .</u>			
15240							
				<u>Full thickness graft, free, including direct closure of donor site, forehead, cheeks, chin, mouth, neck, axillae, genitalia,</u>			

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
(For major debridement or excisional preparation of recipient area at the time of attachment of pedicle flap, see 15700-15730)				15790	Superficial chemo((-)surgery (acid peel)((:)) total face and neck	BR+	3.0
15600 Intermediate "delay" of any flap, primary "delay" of small flap, or sectioning ((of)) pedicle of tubed or direct flap((:)); at trunk	4.0	45	3.0	15791	regional, face, neck, or elsewhere	BR+	3.0
15610 at scalp, arms and legs	5.0	45	3.0	15800	((Combined)) Abrasion of skin, total face, with combined superficial chemo((-)surgery (acid peel) of remaining face (eyelids, neck, shoulders((-etc:)))		3.0
15620 at forehead, cheeks, chin, ((mouth,)) neck, axillae, genitalia, hands ((and)) (except 15625), or feet	6.0	45	3.0	15810	Salabrasion; up to 20 sq cm		
15625 section pedicle of cross finger flap				15811	20 sq cm and over		
15630 at eyelids, nose, ears and lips	6.0	45	3.0	15820	Blepharoplasty, lower eyelids; ...	12.0	30
15650 ((Intermediate transfer)) Transfer, intermediate, of any pedicle flap ((e.g.:)) eg, abdomen to wrist, "Walking" tube((-etc:)), any location	BR+		3.0	15821	with extensive herniated fat pads	14.0	30
15700 Excision of lesion and/or excisional preparation of recipient site and attachment of direct or tubed pedicle flap((:)); trunk	9.0	45	3.0		(See also 67916, 67917, 67923, 67924)		
15710 scalp, arms and legs	11.0	45	3.0	15820	Rhytidectomy, lower eyelids	12.0	30
15720 forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands ((and)) or feet	16.0	45	3.0	15822	Rhytidectomy; upper eyelids	8.0	30
15730 eyelids, nose, ears ((and)) or lips	16.0	45	3.0	15823	with excessive skin weighting down lids	12.0	30
(For eyelids, nose, ears, or lips, see also anatomical area)				15824	Rhytidectomy; forehead	10.0	30
(For revision, defatting or rearranging of transferred pedicle flap or skin graft, see ((+3000)) 13100-14300)				15826	glabellar frown	8.0	30
OTHER GRAFTS				15827	submetal fat pad	8.0	30
15740 Graft, island pedicle flap((: scalp))	12.0	90	3.0	15828	cheeks, chin and neck	30.0	45
15750 neurovascular pedicle flap((: hand))	10.0	90	3.0	(+5830)	abdomen, legs, hips or buttocks (including lipectomy)	30.0	45
15760 composite ((graft)) (full thickness of external ear or nasal ala), including primary closure, donor area	10.0	45	3.0	15831	Excision, excessive skin and subcutaneous tissue (including lipectomy); abdomen	30.0	45
15770 derma-fat-fascia((-graft))	12.0	60	3.0	15832	thighs	25.0	45
((For breast, see 19320))				15833	legs	30.0	45
15775 Punch graft for hair transplant((:)); 1 to 15((-each)) punch grafts	0.5	90	3.0	15834	hips	30.0	45
15776 more than 15 punch grafts	BR+		3.0	15835	buttocks	30.0	45
(For strip transplant, 15220)				15836	arms	25.0	45
MISCELLANEOUS PROCEDURES				15837	forearms	25.0	45
15780 Abrasion of skin((-total face,)) for removal of scars, tattoos, actinic changes (keratoses), ((etc:)) primary or secondary; total face	12.0	90	3.0	15840	Graft for facial nerve paralysis((-:)); free fascia graft((s)), (including obtaining fascia)	30.0	90
15785 regional (1/4 face, cheeks, chin, forehead or elsewhere) ((primary or secondary))	4.0	90	3.0	15841	free muscle graft (including obtaining graft)	35.0	45
15786* Abrasion; single lesion (eg, keratosis, scar)	0.5	0	3.0	15842	free muscle graft by microsurgical technique	35.0	45
15787 each additional four lesions or less	0.3			15845	re((-)animation, muscle transfers	BR+	3.0
					(For nerve transfers, decompression, or ((sutures,)) repair, see ((64755, 64945, 69720, 69740)) 64830-64876, 64905-64907, 69720-69725, 69740-69745, 69955)		
				DECUBITUS ULCERS (PRESSURE SORES)			
				15920	Coccygectomy; primary suture	BR	
				15922	with flap closure	BR	
				15930	Excision, sacral decubitus ulcer; with skin flap closure	BR	
				15932	with ostectomy	BR	
				15933	with ostectomy and primary suture	BR	
				15940	Excision, ischial decubitus ulcer; direct suture	BR	
				15941	with ostectomy (ischietomy)	BR	
				15942	skin and muscle flap closure	BR	
				15943	skin and muscle flap closure, with ostectomy	BR	
				15950	Excision, trochanteric decubitus ulcer; direct suture	BR	
				15951	with ostectomy	BR	
				15952	skin flap closure	BR	
				15953	skin flap closure, with ostectomy	BR	

(For free skin graft to close ulcer or donor site, see 15000 et seq.)

	Unit Value	Follow-up Days=	Basic Anes@
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AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-026 BURNS, LOCAL TREATMENT.

((Items)) Procedures 16000-16030 refer to local treatment of burned surface only.

List percentage of body surface involved and depth of burn.

(For necessary related medical services ((e.g.)) eg, hospital visits, detention((-etc.)) in ((the)) management of burned patients, see appropriate services in Medicine Section.)

	Unit Value	Follow-up Days=	Basic Anes@
(For skin graft, see 15100-15730)			
*16000 Initial treatment, first degree burn, ((where)) when no more than local treatment ((necessary)) is required.....	*0.3	0	
*16010 Dressings and/or debridement, initial or subsequent((-)); under anesthesia, small	*0.8	0	3.0
*16015 under anesthesia, medium or large, or with major debridement((-, per one-half hour))	*2.0	0	3.0
*16020 without anesthesia, office or hospital, small	*0.4	0	
*16025 without anesthesia, medium ((whole face or whole extremity, etc.)) eg, whole face or whole extremity) ...	*0.6	0	
*16030 without anesthesia, large ((more than one extremity, etc.)) eg, more than one extremity)	*0.8	0	
16035 Escharotomy	BR		

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-027 DESTRUCTION.

	Unit Value	Follow-up Days=	Basic Anes@
(For electro((-))surgical destruction of malignant skin lesions, see 11600-((-11660))11646)			
(For condylomata, see 46900-((-46930))46933, 54050-54065, 56500-56515)			
*17000 ((Electro-surgical)) Destruction by any method, with or without surgical curettement, ((of "active" leukoplakia, "active" actinic or senile keratoses, keratoacanthomas or facial nevi, to include)) all facial lesions or premalignant lesions in any location, including local anesthesia((-)); one lesion	*0.6	0	3.0
((For other methods or lesions, see 17100-17201))			
((For multiple fibrocuteaneous tags, see 17200, 17201))			

	Unit Value	Follow-up Days=	Basic Anes@
17001 second and third lesions, each	0.3		
17002 over 3 lesions, each additional lesion	0.15		
17010 complicated lesion(s)	BR+		3.0
*17100 ((Electro-surgical destruction (except 17000-17010) or chemo-cautery (mono-, bi-, trichloroacetic acid, phenol, etc.) or cryo-cautery (liquid N ₂ , CO ₂ , etc.) of other BENIGN or "quiescent" PRE-MALIGNANT lesions of skin or mucous membrane (except 17200, 17201), with or without curettement.)) Destruction by any method of benign skin lesions on any area other than the face, including local anesthesia; one lesion	*0.4	0	3.0
((For multiple fibrocuteaneous tags, see 17200, 17201))			
17101 second lesion	0.2		
17102 over two lesions, each additional lesion up to 15 lesions ..	0.1		
17104 15 or more lesions	0.1		
((17103))17105 complicated lesion((-))s((-)) ..	BR+		3.0
*17110 Destruction by any method of flat (plane, juvenile) warts or molluscum contagiosum, milia, up to 15 lesions	*0.4	0	3.0
(Retreatment same as office visit)			
*17200 ((Electro-surgical)) Electrosurgical destruction of multiple tags; up to 15 lesions ..	*0.4	0	3.0
((17200) Electrosurgical destruction of multiple fibrocuteaneous tags; up to 15 lesions	0.4	0	3.0
17201 each additional 10 lesions	0.2		
(For excision of fibrocuteaneous tags, see 11200, 11201)			
*17250 Chemical cauterization of a wound	BR		
17300 Chemosurgery (Mohs type technique), malignancies of skin, ((includes)) including removal of lesion and microscopic delineation of margins and base((-)); first stage—fulguration and application of chemicals	5.0	30	3.0
17301 ((each)) subsequent treatment, up to five microscopic sections	1.6	30	3.0
17302 ((each)) subsequent treatment, over five additional microscopic ((section over five)) sections	0.2		
(For initiation or follow-up care of topical chemotherapy ((e.g.)) eg, 5-((-FU))FU or similar agents), see appropriate office visits)			
*17340 Cryotherapy (CO ₂ slush, liquid N ₂ ((1))	*0.3	0	
*17360 Chemical exfoliation for acne (eg, acne paste, acid((-etc.)) ..	*0.3	0	

	Unit Value	Follow-up Days=	Basic Anes@
*17380 Electrolysis epilation, each 1/2 hour	*0.6	0	
(For actinotherapy ((and galvanic iontophoresis)), see 96900(=96920)))			
17999 Unlisted procedure, skin, mucous membrane and subcutaneous tissue			BR

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-030 BREAST((=INCISION)).

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
*19000 Puncture aspiration of cyst;	*0.4	0	
19001 each additional cyst	0.1	0	
19020 Mastotomy with exploration or drainage of abscess, deep	2.6	14	3.0

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-031 BREAST((=EXCISION)).

	Unit Value	Follow-up Days=	Basic Anes@
EXCISION			
*19100 Biopsy of breast, needle (((independent))) separate procedure	*0.6	0	
19101 incisional	3.6	30	3.0
19120 Excision of cyst, fibro((-)adenoma or other benign tumor, aberrant breast tissue, duct lesion or nipple lesion (except 19140-19161), male or female, one or more lesions; unilateral	5.0	30	3.0
19121 bilateral	6.0	30	3.0
19140 Mastectomy for gynecomastia through circumareolar or other incision, unilateral	8.0	60	3.0
19141 bilateral	10.0	60	3.0
19160 ((Partial)) Mastectomy, partial (quadrectomy or more)((:)); unilateral	6.0	60	3.0
19161 bilateral	8.0	60	3.0
19180 ((Simple)) Mastectomy, simple complete((:)); unilateral	8.0	45	3.0
19181 bilateral	11.0	45	4.0
(For gynecomastia, see 19140, 19141)			
19182 Mastectomy, subcutaneous((:)); unilateral	10.0	60	3.0
19183 bilateral	15.0	60	3.0
19184 Mastectomy, subcutaneous, with immediate prosthetic implant; unilateral	14.0	90	3.0
19185 bilateral	18.0	90	3.0
(For supplemental skills of two surgeons, see WAC 296-22-010 item 5 and modifier -62)			
(For supply of prosthetic implant, see 99070)			
19186 Mastectomy, subcutaneous, with delayed prosthetic implant((:)); unilateral	12.0	90	3.0

	Unit Value	Follow-up Days=	Basic Anes@
19187 bilateral	16.0	90	3.0
19200 Mastectomy, radical, including breast, pectoral muscles, axillary lymph nodes; unilateral	18.0	60	3.0
19205 bilateral	25.0	60	3.0
((+9200))19211 ((Radical)) Mastectomy, radical, including breast, pectoral muscles ((and)), axillary lymph nodes, with immediate prosthetic implant; unilateral	21.0	60	3.0
19212 bilateral	27.0	60	3.0
19215 Mastectomy, radical, including breast, pectoral muscles, axillary lymph nodes, with delayed prosthetic implant; unilateral	21.0	60	3.0
19216 bilateral	24.0	60	3.0
19220 Mastectomy, radical, including breast, pectoral muscles, axillary and internal mammary lymph nodes (Urban type operation); unilateral	26.0	60	11.0
19221 bilateral	30.0	60	11.0
19224 Mastectomy, radical, including breast, pectoral muscles, axillary and internal mammary lymph nodes (Urban type operation), with immediate prosthetic implant; unilateral	28.0	60	11.0
19225 bilateral	32.0	60	11.0
19228 Mastectomy, radical, including breast, pectoral muscles, axillary and internal mammary lymph nodes (Urban type operation), with delayed prosthetic implant; unilateral	30.0	60	11.0
19229 bilateral	34.0	60	11.0
((+9210) including internal mammary lymph nodes (Urban type procedure)	26.0	60	11.0
(For supply of prosthetic implant, see 99070)			
19240 Mastectomy, modified radical ((mastectomy)), with modified axillary dissection but leaving pectoral muscles((:)); unilateral	16.0	60	3.0
19245 bilateral	20.0	60	3.0
19250 Mastectomy, modified radical, with modified axillary dissection but leaving pectoral muscles, with immediate prosthetic implant; unilateral	24.0	60	3.0
19251 bilateral	28.0	60	3.0
19254 Mastectomy, modified radical, with modified axillary dissection but leaving pectoral muscles, with delayed prosthetic implant; unilateral	26.0	60	3.0
19255 bilateral	30.0	60	3.0
(For supply of prosthetic implant, see 99070)			
19260 Excision of chest wall tumor ((involving)) including ribs	BR+		9.0
((+9270))19271 Excision of chest wall tumor involving ribs ((plus)), with plastic reconstruction((:)); ((with-or)) without			

		Unit Value	Follow-up Days=	Basic Anes@
	mediastinal lymphadenectomy	BR+		9.0
19272	with mediastinal lymphadenectomy	BR		9.0
Repair				
19300	Mammoplasty, ((plastic operation on breasts;) reduction or repositioning((-, bilateral, one stage))one stage operation; unilateral		90	3.0
			35.0	
			40.0	
19301	one stage operation, bilateral .		90	3.0
((19301))19303	two stage operation, unilateral ...	BR+		3.0
19304	two stage operation, bilateral .	BR		3.0
19310	Mammoplasty, augmentation, prosthetic (((except 19184-19187)) not including implants)(:); unilateral		18.0	90 3.0
	bilateral		30.0	90 3.0
19311	derma-fat fascia, unilateral		20.0	90 3.0
((19320	at		20.0	90 3.0
(For supply of implants, see 99070)				
(For mastectomy with prosthetic implant, immediate or delayed, see 19184-19187, 19211-19216, 19224-19229, 19250-19255)				
19330	Removal of mammary implant material; unilateral	BR	30	3.0
19331	bilateral	BR	30	3.0
19350	Reconstruction of nipple and/or areola, including labial or other grafts; unilateral	BR	30	3.0
19351	bilateral	BR	30	3.0
19499	Unlisted procedure, breast	BR		

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-035 ((GENERAL INFORMATION))
MUSKULOSKELETAL SYSTEM.

NOTES

General: Certain procedures (e.g., incision of soft tissue abscess, drainage of infected bursa, biopsy, arthrocentesis, insertion of wires or pins, etc.) are common to all anatomic areas and are listed below under "General." Specific procedures are listed under the appropriate anatomic areas. Casts and strapping are listed at the end of the section.

Listed values include the application and removal of the first cast or traction device only. Subsequent replacement of cast and/or traction device during the listed period of follow-up care warrants additional charges.

Re-reduction of a fracture and/or dislocation, performed by the primary physician, may ((warrant a reduction in the value of the service. Indicate that the value has been reduced by adding modifier -52)) be identified by the addition of modifier '-76' to the usual procedure number and value as appropriate(:) to indicate "Repeat Procedure by Same Physician" (See Guidelines.)

Bone, cartilage and fascial grafts: Listed values for most graft procedures include obtaining of the graft. When a second surgeon obtains the graft, the value of the total procedure may be apportioned between the surgeons. Modifier -62 and procedures 20900-20922 are not to be used in conjunction with procedures which include a graft as part of the descriptor. Procedures 20900-20922 can be used in those unusual circumstances when a graft is used that is not included in the descriptor.

When an alloplastic implant or non-autogenous graft is used in a procedure which "includes obtaining graft," the value is to be reduced by

an appropriate amount. Identify this circumstance by adding modifier -52 to the procedure number.

Plastic and metallic implant or non-autogenous graft materials are to be valued at the cost to the physician including an appropriate handling or shaping charge where applicable. See procedure 99070.

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-036 GENERAL((INCISION)).

INCISION

		Unit Value	Follow-up Days=	Basic Anes@
*20000	Incision of ((superficial)) soft tissue abscess, secondary to osteomyelitis; superficial	*0.4	0	3.0
20005	deep or complicated	BR+		3.0
20010	with suction irrigation	BR		3.0
*20040	Drainage of infected bursa	*0.6	0	3.0

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-037 ((GENERAL))EXCISION.

		Unit Value	Follow-up Days=	Basic Anes@
(For aspiration of bone marrow ((aspiration)), see ((85110)) 85095)				
20200	Biopsy, muscle(:); superficial ..	1.2	7	3.0
20205	deep	2.4	15	3.0
(For excision of muscle tumor, deep, see specific anatomic section)				
20220	Biopsy, bone, ((trochar;)) trocar or needle; superficial (((e.g.)) eg, ilium, sternum, spinous process, ribs((-etc.)))	1.2	7	3.0
20225	deep (((e.g.)) vertebral body, femur((-etc.))) ...	4.0	15	3.0
20240	Biopsy, excisional(:); superficial (((e.g.)) eg, ilium, sternum, spinous process, ribs, ((etc.))) trochanter of femur	3.0	21	3.0
20245	deep (((e.g.)) eg, humerus, ischium, femur((-etc.)))	5.0	30	3.0
20250	Biopsy, vertebral body, open; thoracic	BR+		BR+
((20290	Sequestrectomy for osteomyelitis or bone abscess	BR+		3.0
20251	lumbar or cervical	BR		

(For sequestrectomy, osteomyelitis or drainage of bone abscess, see anatomical area)

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-038 INTRODUCTION OR REMOVAL.

		Unit Value	Follow-up Days=	Basic Anes@
(For injection procedure for arthrography, see ((23350; 27370)) anatomical area)				
20500	Injection of sinus tract(:); therapeutic (((independent)) separate procedure)	0.4	0	
20501*	diagnostic (sinogram) (separate procedure)	1.0	0	

	Unit Value	Follow-up Days=	Basic Anes@
((For injection procedure of sinus tract and X-rays, see 76080))			
*20520 Removal of foreign body in muscle(;;); simple	*1.2	0	3.0
20525 deep or complicated	BR+		3.0
*20550 Injection, tendon sheath, ligament or trigger points	*0.4	0	
*20600 Arthrocentesis, aspiration and/or injection(;;); small joint or bursa ((e.g.) eg, fingers, toes(;; etc.))	*0.3	0	
*20605 intermediate joint or bursa ((e.g.) eg, temporomandibular, acromioclavicular, wrist, elbow or ankle (joint); olecranon bursa(;;etc.))	*0.4	0	
*20610 major joint or bursa ((e.g.) eg, shoulder, hip, knee joint, subacromial bursa(;;etc.)) ..	*0.6	0	
*20650 Insertion of wire or pin for skeletal traction, including removal ((independent) separate procedure)	*1.2	0	3.0
20660 Application of ((caliper or) tongs or caliper, including removal ((independent) separate procedure)	3.0	0	3.0
20661 Application of halo; cranial	3.0	0	3.0
20662 pelvic	3.0	0	3.0
20663 femoral	3.0	0	3.0
20665 Removal of ((caliper or) tongs or halo applied by another physician	0.3	0	
*20670 Removal of implant; superficial, (e.g., buried wire, pin(;; screw, metal band;) or rod(;; nail or plate, superficial)) ((independent) separate procedure)	*0.6	0	3.0
20680 deep (eg, buried wire, pin, screw, metal band, nail, rod or plate)	3.6	21	3.0

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-039 ((REPAIR, REVISION OR RECONSTRUCTION)) REIMPLANTATION.

	Unit Value	Follow-up Days=	Basic Anes@
((For secondary wound closure or repair, see repair, simple; 12000-12300))			
((20800 Repair of deep wound involving muscle, tendon and/or nerve (except hand or foot)	BR+		3.0))
REIMPLANTATION			
20802 Reimplantation, arm; complete ..	BR		
20804 incomplete (nonviable extremity with soft tissue pedicle) ..	BR		
20808 Reimplantation, hand; complete ..	BR		
20812 incomplete (nonviable extremity with soft tissue pedicle) ..	BR		
20816 Reimplantation, digit; complete ..	BR		
20820 incomplete (nonviable extremity with soft tissue pedicle) ..	BR		

((For tendon repair of hand, see 26400-26424; for foot, see 28200-28214; for nerve repairs;

see 64700-64740))

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-040 GRAFTS (OR IMPLANTS).

((Values)) Codes for obtaining autogenous bone, cartilage ((or)), tendon, fascia lata grafts, or other tissues, the rough separate incisions are to be used only when graft is not already listed as part of basic procedure. Listed value applies and WAC 296-22-010, item 7 is not to be applied to procedures 20900-20922.

(For alloplastic or heterologous grafts, see instructions, WAC 296-22-035)

	Unit Value	Follow-up Days=	Basic Anes@
20900 Bone graft, any donor area; minor or small ((graft)) ((e.g.) eg, dowel or button)((;any donor area))	2.4	0	3.0
20902 major or large	4.8	0	3.0
20910 Cartilage graft, costochondral ..	4.8	0	3.0
20920 Fascia lata graft; by stripper ...	2.0	0	3.0
20922 by incision and area exposure, complex or sheet	4.0	0	3.0
20924 Tendon graft, from a distance (eg, palmaris, toe extensor, plantaris)	BR		
20926 Tissue grafts, other (eg, paratenon, fat, dermis, etc)	BR		

MISCELLANEOUS

20950 Monitoring of interstitial fluid pressure (eg, wick catheter technique, needle manometer technique) in detection of muscle compartment syndrome	BR		
20955 Fibula graft with microvascular anastomosis	BR		3.0
20960 Rib graft with microvascular anastomosis	BR		3.0
20970 Osteocutaneous graft (iliac crest and inguinal groin flap) with microvascular anastomosis	BR		3.0
20999 Unlisted procedure, musculoskeletal system, general	BR		

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-042 HEAD.

	Unit Value	Follow-up Days=	Basic Anes@
(Skull, facial bones and temporomandibular joint)			
INCISION			
(For drainage of superficial abscess and hematoma, see 20000)			
(For removal of embedded foreign body from dentoalveolar structure, see 418105, 41806)			
((Excision))			
21010 Arthrotomy, temporomandibular joint; unilateral	BR		
21011 bilateral	BR		
EXCISION			

(For biopsy, see 20220, 20240)

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
21020	BR+		8.0				
Craniectomy or sequestrectomy for osteomyelitis							
(For other craniectomies, see ((61300)) 61304 et seq.)				21254	BR		
				21260	BR		
21030	BR+		5.0	type operation); without bone graft			
Excision of benign tumor or cyst of facial bone other than mandible				with bone graft			
21034	BR		5.0	Orbital hypertelorism correction (periobital) osteotomies, bilateral, with bone grafts; extracranial approach			
Excision of malignant tumor of facial bone other than mandible				21261	BR		
				combined intra- and extracranial approach			
21040	BR		5.0	with forehead advancement			
Excision of benign cyst or tumor of mandible(:); simple				21263	BR		
21041	BR+	90	5.0	Orbital repositioning, periobital osteotomies, unilateral, with bone grafts; extracranial approach			
complex				21267	BR		
21044	BR		5.0	21268 combined intra- and extracranial approach			
Excision of malignant tumor of mandible;				21270	BR		
21045	BR		5.0	21270 Reconstruction for Treacher Collins syndrome (periobital and zygomatic reconstruction with multiple bone grafts)			
radical resection				21275	BR		
(For bone graft, see 21215)				Secondary revision for orbitocraniofacial reconstruction			
21050	18.0	90	5.0				
Arthroctomy, temporo((-))mandibular joint(:); unilateral							
21051	20.0	90	5.0				
bilateral							
21060	18.0	90	5.0				
Meniscectomy, temporo((-))mandibular joint; unilateral							
21061	20.0	90	5.0				
bilateral							
21070	18.0	90	5.0				
Coronoidectomy (separate procedure); unilateral							
21071	20.0	90	5.0				
bilateral							
INTRODUCTION OR REMOVAL							
(For application or removal of caliper or tongs, see 20660, 20665)							
*21100							
Application of halo type appliance for maxillo((-))facial fixation, ((etc.)) includes removal (((independent)) separate procedure) (((Sec also 29000)))				*2.0	0	3.0	
21110	8.0	90	3.0				
Application of interdental fixation device for conditions other than fracture or dislocation							
REPAIR, REVISION OR RECONSTRUCTION							
(For cranioplasty, see 62140((-62144)) -62145)							
21200	30.0	90	5.0				
Osteoplasty of mandible for prognathism ((or)) micrognathism							
21202	BR	90	5.0				
mandible, segmental							
21204	BR	90	5.0				
maxilla, total							
21206	BR	90	5.0				
maxilla, segmental							
21210	20.0	120	5.0				
((Bone graft;)) Graft, bone; nasal, maxillary and malar areas (includes obtaining graft)							
(For cleft palate repair, see 42200-42225)							
21215	20.0	120	5.0				
mandible (includes obtaining graft)							
21230	18.0	120	5.0				
((Cartilage)) Graft(:); rib cartilage, autogenous, to face, chin, nose or ear (includes obtaining graft)							
21235	12.0	60	5.0				
ear cartilage to nose or ear (includes obtaining graft)							
21239	BR						
Implant, chin, homologous, heterologous, or alloplastic							
21240	BR+		5.0				
Arthroplasty, temporo((-))mandibular joint(:); unilateral							
21241	BR		5.0				
bilateral							
21250							
Osteoplasty of maxilla and/or other facial bones for midface hypoplasia or retrusion (LeFort							
				21254	BR		
				21260	BR		
				21261	BR		
				21263	BR		
				21267	BR		
				21268	BR		
				21270	BR		
				21275	BR		
FRACTURE AND/OR DISLOCATION							
21300							
((Skull)) Treatment of closed skull fracture((-nonoperative)) without operation				Sv. &			
(For operative repair, see 62000-62010)							
21310							
((Nasal fracture;)) Treatment of closed or open(:) nasal fracture without ((reduction)) manipulation				Sv. &			
*21315							
((closed reduction)) Manipulation, digital, uncomplicated ((digit)) nasal fracture				*1.1	0	3.0	
21320							
((complicated(-)) Manipulation, instrumental(:)) ₂ complicated nasal fracture				3.0	90	3.0	
21325							
Open ((reduction;)) treatment of nasal fracture; uncomplicated				4.0	90	3.0	
21330							
complicated, with internal and/or external skeletal fixation				9.5	90	3.0	
21335							
with concomitant open ((reduction)) of fractured septum				17.0	90	3.0	
21340							
Treatment of closed or open nasoethmoid complex fracture, with splint, wire or headcap fixation, including repair of canthal ligaments and/or the nasolacrimal apparatus				BR			
21345							
Treatment of nasomaxillary complex fracture (LeFort II type), with interdental wire fixation or fixation of denture or splint				BR			
21346							
Open treatment of nasomaxillary complex fracture (LeFort II type); with wiring and/or local fixation				BR			
21347							
with multiple approaches				BR			
21350							
((Malar area fracture (e.g., zygomatic arch, etc.)) closed or open without reduction)) Treatment of closed or open fracture of malar area, including zygomatic arch and malar tripod without manipulation				Sv. &			

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
*21355				21435			
((closed reduction, zygomatic arch (e.g., towel clip technique))) Manipulative treatment of closed or open fracture of malar area, including zygomatic arch and malar tripod, towel clip technique				complicated, ((open reduction;)) fixation by head cap, halo device, multiple surgical approaches, internal fixation, and/or wiring teeth((-etc:)) . .	BR+		5.0
21360	*1.0	2	3.0	((For antral approach, see 31020, 31021))			
Open treatment of closed or open depressed malar fracture, including zygomatic arch and malar tripod	7.0	90	3.0	(For removal of internal or external fixation device, see 20670)			
21365				21440			
((complicated, open reduction)) Open treatment of closed or open complicated (eg, multiple fractures) of malar area, including zygomatic arch and malar tripod, with internal skeletal fixation and multiple surgical approaches	13.0	90	3.0	Manipulative treatment of alveolar ridge fracture (separate procedure)	BR		
21380				21445			
Treatment of orbital floor ((fracture -)) "blow-out" ((type); closed or open;) fracture without ((reduction)) manipulation	Sv.&			Open treatment of alveolar ridge fracture (separate procedure) . .	BR		
21385				21450			
Open ((reduction;)) treatment of orbital floor "blowout" fracture; transantral approach (Caldwell-Luc (-) approach) type operation)	12.0	90	3.0	((Mandibular fracture;)) Treatment of closed or open((-);) mandibular fracture without ((reduction)) manipulation	Sv.&		
21386	13.0	90	3.0	21455			
21387	15.0	90	3.0	Closed ((reduction and)) manipulative treatment by interdental fixation of closed or open mandibular fracture	8.0	90	5.0
21390				((21460))21461			
peri((-)orbital approach, with alloplastic or other implant	14.0	90	3.0	Open ((reduction)) treatment of closed or open mandibular fracture; with or without interdental fixation	16.0	90	5.0
21395				21462			
periobital approach with bone graft (includes obtaining graft)	18.0	90	3.0	with interdental fixation	16.0	90	5.0
21400				21470			
Treatment of fracture of orbit, except "blowout"; without manipulation	SV			((complicated, open reduction; multiple surgical approaches, internal fixation, interdental fixation, etc:)) Open reduction of complicated closed or open mandibular fracture by multiple surgical approaches including internal fixation, interdental fixation, and/or wiring of dentures or splints	BR+		5.0
21401	6.0	90	3.0	21480			
21406				((Temporo-mandibular)) Uncomplicated treatment of temporomandibular dislocation, ((with uncomplicated closed reduction;)) initial or subsequent	Sv.&		3.0
21407	7.0	90	3.0	21485			
with implant	8.0	90	3.0	Complicated((-closed reduction)) manipulate treatment of temporomandibular dislocation, initial or subsequent	BR+		3.0
21420				21490			
Treatment of closed or open maxillary fracture without manipulation				Open ((reduction)) treatment of temporomandibular dislocation	BR+		3.0
21421				(For interdental wire fixation, see 21462)			
Treatment of palatal or alveolar ridge fractures (LeFort I type); closed manipulation with interdental wire fixation or fixation of denture or splint	7.0	90	3.0	21493			
21422	12.0	90	3.0	Treatment of closed or open hyoid fracture; without manipulation	SV		
21431				with manipulation	7.0	90	3.0
Treatment of craniofacial separation (LeFort III type) using interdental wire fixation of denture or splint	8.0	90	4.0	21495			
21432				Open treatment of closed or open hyoid fracture	8.0	90	3.0
Open treatment of craniofacial separation (LeFort III type); with wiring and/or local fixation	BR		4.0	(For treatment of fracture of larynx, see 31584-31586)			
21433				21497			
complicated (eg, multiple approaches)	BR		5.0	Interdental wiring, for condition other than fracture	BR		
((21429) Maxillary fracture, closed or open without reduction	Sv.&			21499			
21425				Unlisted procedure, head	BR		
closed reduction, with wiring of maxillary teeth	7.0	90	3.0				
(For interdental wiring, see 21455)							
21430							
open reduction, with wiring and/or local fixation	12.0	90	3.0))				

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-051 NECK (SOFT TISSUES) AND THORAX.

	Unit Value	Follow-up Days=	Basic Anes@
(For cervical spine, see 22100, et seq.)			
(For injection of fracture site or trigger point, see 20550)			
(For abdominal fascial transplant, see 22910)			
((For repair of diaphragm, see 39500-39540))			

INCISION

	Unit Value	Follow-up Days=	Basic Anes@
((For simple incision and drainage, see 10060))			
(For incision and drainage of abscess or hematoma, superficial, see 10060)			
21501 Incision and drainage, deep abscess or hematoma;	5.0	30	3.0
((21500))21502 ((Incision and drainage of deep abscess requiring)) with partial rib osteotomy ((of rib))	6.0	30	3.0
21510 Incision, deep, with opening of bone cortex for osteomyelitis or bone abscess;	7.0	30	3.0
21511 with suction irrigation	8.0	30	3.0

EXCISION

	Unit Value	Follow-up Days=	Basic Anes@
21550 Excisional biopsy, soft tissues . . .	7.0	30	3.0
21555 Excision benign tumor; subcutaneous	7.0	30	3.0
21556 deep, subfascial, intramuscular	8.0	30	3.0
((For biopsy, see 20200; 20240))			
(For excision of chest wall tumor involving ribs, e.g., radical excision, see 19260, 19270)			
21600 Excision of rib, partial((-for benign tumor))	6.0	60	5.0
21610 Costotransversectomy (separate procedure)	BR+		5.0
21615 Excision first and/or cervical rib for outlet compression syndrome or other cause;	BR		BR
21616 with sympathectomy	BR		BR
21620 ((Partial)) Osteotomy of sternum, partial	BR+		5.0
((21625 Partial excision of bone (craterization or saucerization) for osteomyelitis	BR+		5.0))
21630 Radical resection of sternum for tumor;	BR+		5.0
21632 with mediastinal lymphadenectomy	BR		5.0

REPAIR, REVISION OR RECONSTRUCTION

(For repair of deep wounds, see 20800)			
(For superficial wound, see General Section under Repair-Simple)			
21700 Division of scalenus anticus((-)); without resection of cervical rib	10.0	60	3.0

21705 with resection of cervical rib	12.0	60	5.0
21720 Division of sternocleidomastoid for torticollis, open operation; without cast application	8.0	60	3.0
21725 with cast application	9.0	60	3.0
21740 Reconstructive repair of pectus excavatum or carinatum((-plastic repair))	26.0	120	11.0
21741 Xiphoid resection pectus excavatum	BR		

FRACTURE AND/OR DISLOCATION

21800 ((Rib, fracture(s))) Treatment of rib fracture; closed, uncomplicated, each	Sv.& BR+		5.0
21805 open or complicated, each	BR+		5.0
21810 closed or open requiring external fixation ("flail chest")	BR+		5.0
21820 Treatment of sternum((-)) fracture((-)); closed ((simple))	Sv.& BR+		5.0
21825 open ((or complex))	BR+		5.0
(For sternoclavicular dislocation, see 23520-((23530)) 23532)			

MISCELLANEOUS

21899 Unlisted procedure, neck or thorax	BR		
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AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-053 SPINE (VERTEBRAL COLUMN).

	Unit Value	Follow-up Days=	Basic Anes@
(Cervical, thoracic (dorsal), and lumbar spine)			
(For injection procedure for myelography, see 63510-63520)			
(For injection procedure for discography, see 63530-63535)			
EXCISION			
22010 Biopsy, soft tissues; superficial	1.2	7	3.0
22011 deep	2.4	15	3.0
22030 Excision, benign tumor, subcutaneous	3.0	15	3.0
22031 Excision, benign tumor, deep, subfascial, intramuscular; cervical	4.0	15	3.0
22032 thoracic	3.0	15	3.0
22033 lumbar	3.0	15	3.0
((For biopsy, see 20220-20250))			
(For discectomy without arthrodesis (excision of intervertebral disc), see 63400-63415)			
(For laminectomy, Gill procedure, see 63010)			
22100 Partial resection of vertebral component, spinous processes ((e.g.) eg, "kissing" spines); cervical	8.0	90	8.0
			((Cervical))
			((Other))
			((7.0))
22101 thoracic	8.0	90	7.0
22102 lumbar	8.0	90	7.0

	Unit Value	Follow-up Days=	Basic Anes@
22105 Partial resection of vertebral component for tumor ((e.g.) eg. partial facetectomy without primary grafting); cervical	12.0	90	8.0 ((Cervical)) ((Other)) ((7-0))
22106 thoracic	12.0	90	7.0
22107 lumbar	12.0	90	7.0
22110 Partial excision of ((bone)) vertebrae (craterization ((σ)), saucerization((:)) for osteomyelitis, cervical;	BR+		8.0 ((Cervical)) ((Other)) ((7-0))
22111 with suction irrigation	BR		8.0
22112 Partial excision of vertebrae (craterization, saucerization) for osteomyelitis, thoracic;	BR		7.0
22113 with suction irrigation	BR		7.0
22114 Partial excision of vertebrae (craterization, saucerization) for osteomyelitis, lumbar;	BR		7.0
22115 with suction irrigation	BR		7.0
22120 Radical resection of vertebral body or component with primary grafting, includes obtaining graft((:)); cervical	BR+		8.0
((22125 thoracic or lumbar	BR+		7.0)
22121 thoracic	BR		7.0
22122 lumbar	BR		7.0

((Repair, Revision or Reconstruction))

(For repair of pseudarthrosis, see 22600-22735)

INTRODUCTION

(For injection procedure for myelography, see 62284)

(For injection procedure for diskography, see 62290, 62291)

(For injection procedure, chemo-nucleolysis, single or multiple levels, see 62292-62293)

REPAIR, REVISION, RECONSTRUCTION

22200 Osteotomy of spine for correction fixed deformity (not scoliosis); anterior OR posterior, lumbar	32.0	180	7.0
22201 thoracic or cervical	40.0	180	7.0
22202 Osteotomy of spine for correction fixed deformity (not scoliosis); anterior AND posterior, lumbar	40.0	180	7.0
22203 cervical	46.0	180	7.0
22206 Osteotomy of spine for correction fixed deformity, single or multiple (including vertebral body resection), for scoliosis with or without internal fixation; transthoracic	32.0	180	7.0
22207 transabdominal or retroperitoneal	40.0	180	7.0

(For primary arthrodesis without osteotomy in scoliosis, see 22800-22840)

((22200 Osteotomy of lumbar spine for correction of fixed deformity; posterior approach	32.0	180	7.0)
((22205 anterior approach	40.0	180	7.0)

FRACTURE AND/OR DISLOCATION

22305 Treatment of vertebral process((:)) fracture, ((one or more)) each	Sv.&		
22310 Treatment of vertebral body fracture and/or dislocation(;; one or more;); without reduction ((or with treatment by traction; any level)); each	Sv.&		
22315 ((manipulative reduction)) with or without anesthesia by manipulation or traction, each	7.0	180	3.0
22325 Open ((reduction)) treatment of vertebral body fracture and/or dislocation; lumbar, each	24.0	180	7.0
22326 cervical, each	24.0	180	8.0
22327 thoracic, each	24.0	180	7.0

((Values for procedures)) Procedural codes 22330-((22370))22371 are for a SINGLE level procedure; for additional levels, see 22730((:))-22735((:))

22330 Open treatment and fusion, cervical spine(;; open reduction and fusion;); posterior approach, with local bone graft and/or internal fixation for fracture	28.0	180	8.0
22335 posterior approach, with iliac or other autogenous bone graft (includes obtaining graft), for fracture	31.0	180	8.0
22345 anterior approach, with iliac or other autogenous bone graft (includes obtaining graft) for fracture	30.0	180	7.0

(For cervicocranial fusion, see 22620)

22355 ((thoracic or lumbar spine;)) Open ((reduction)) treatment and fusion, posterior approach, with local bone graft and/or internal fixation for fracture; lumbar	26.0	180	7.0
22356 thoracic	26.0	180	7.0
22360 Open treatment and fusion, posterior approach, with iliac or other autogenous bone graft (includes obtaining graft), for fracture; lumbar	30.0	180	7.0
22361 thoracic	30.0	180	7.0
22370 Open treatment and fusion, posterolateral or anterolateral approach, with iliac or other autogenous bone graft (includes obtaining graft) for fracture, lumbar	BR+		7.0
22371 thoracic	BR		7.0

MANIPULATION

22500 Manipulation of the spine, any region(;; including office visit);	0.3	0	
*22505 requiring anesthesia	*1.4	0	3.0

ARTHRODESIS WITH DISKECTOMY (Intervertebral disk excision, laminotomy or laminectomy and fusion)

((Arthrodesis with Discectomy (intervertebral disc excision, laminotomy or laminectomy and fusion):

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
<p>Values for procedures) Procedural codes 22550-22565 are for ((α)) SINGLE level procedure; for additional levels, see 22730(;)–22735.</p> <p>(For ((discectomy)) discectomy without arthrodesis, see ((63400–63415)) 63020–63076)</p>							
22550	28.0	180	8.0	22655	32.0	180	7.0
22552	32.0	180	8.0	22670	32.0	180	7.0
22555	28.0	180	7.0	22680	BR+		11.0
22560	26.0	180	7.0	22700	24.0	180	7.0
22561	30.0	180	7.0	(For supplemental skills of two surgeons, see WAC 296-22-010, item 5b and modifier -62.)			
22565	24.0	180	7.0	22720	30.0	180	7.0
(For supplemental skills of two surgeons, see WAC 296-22-010, item 5b and modifier -62.)				22730	6.0		
ARTHRODESIS, PRIMARY OR REPAIR OF PSEUDARTHROSIS				22735	BR+		
<p>((Values for procedures)) Procedural codes 22600-22720 are for SINGLE level procedures; for additional levels, see 22730(;)–22735.</p>				22800	29.0	180	7.0
22600	24.0	180	8.0	22805	BR+		7.0
22605	28.0	180	8.0	(For single or multiple osteotomy type of scoliosis correction, see 22206, 22207)			
22615	28.0	180	7.0	22800	29.0	180	7.0
22617	29.0	180	8.0	22801	30.0	180	7.0
22620	30.0	180	8.0	22802	BR		7.0
22640	24.0	180	7.0	22803	BR		7.0
22645	28.0	180	7.0	22840	50.0	180	7.0
				22845	BR		
				22850	BR		
				22855	BR		
				(For presurgical braces, Milwaukee or other, casts of any type, see section on application of casts or strapping)			
				MISCELLANEOUS			

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
22899			BR	23065			3.0
<u>Unlisted procedure, spine</u>				23066			3.0
				23075			3.0
AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)				23076			3.0
<u>WAC 296-22-061 ABDOMEN.</u>				((For sequestrectomy for osteomyelitis or bone abscess, see 20290))			
	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
((Repair, Revision or Reconstruction))				23100			3.0
EXCISION				23101			4.0
22900	10.0	90	5.0	23105	BR+		3.0
22910	20.0	90	5.0	23106	BR		3.0
<u>Excision, abdominal wall tumor, subfascial (eg, desmoid)</u>				23110			3.0
<u>Abdominal fascial transplants, bilateral (Lowman type procedure) (includes obtaining fascia)</u>				23120			3.0
MISCELLANEOUS				23125			3.0
22999			BR	23130			3.0
<u>Unlisted procedure, abdomen</u>				23140			3.0
AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)				23145			3.0
<u>WAC 296-22-063 SHOULDER.</u>				23146			3.0
	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
(Clavicle, scapula, ((humerat)) humerus head and neck, sternoclavicular joint, acromioclavicular joint and shoulder joint(:))				23150			3.0
INCISION				23155			3.0
23000	6.0	60	3.0	23156			3.0
<u>Removal of sub(=)deltoid (or intratendinous) calcareous deposits</u>				23170			3.0
(For excision of sub(=)deltoid bursa, see 23110)				23171			BR
23020	11.0	60	3.0	23172			BR
<u>Capsular contracture release (Sever(=) type procedure) for Erb's palsy</u>				23173			BR
(For incision and drainage procedures, superficial, see 10000-10160)				23174			BR
23030	BR			23175			BR
23031	BR			23180			3.0
23035	BR			23181			4.0
23036	BR			23182			4.0
23040	11.0	60	3.0	23183			4.0
<u>Arthrotomy ((capsulotomy)) with exploration, drainage, or removal of foreign body, glenohumeral joint</u>				23184			4.0
(For incision and drainage procedures, superficial, see 10000-10160)				23185			4.0
23042	12.0	60	3.0	23190			3.0
23044	10.0	60	3.0	23195			BR
<u>Arthrotomy with exploration, drainage or removal of foreign body, acromioclavicular, sternoclavicular joint</u>				((For biopsy, see 20200-20245))			
EXCISION				<u>Biopsy, soft tissues; superficial</u>			
				<u>deep</u>			
				<u>Excision, benign tumor; subcutaneous</u>			
				<u>deep, subfascial or intramuscular</u>			
				Arthrotomy ((capsulotomy)) for biopsy, glenohumeral joint			
				Arthrotomy for biopsy or for excision of torn cartilage, acromioclavicular, sternoclavicular joint			
				Arthrotomy for synovectomy, glenohumeral joint			
				acromioclavicular, sternoclavicular joint			
				Excision, subacromial ((subdeltoid)) subdeltoid bursa excision			
				Claviclectomy(:); partial ((e.g., Mumford type procedure))			
				total			
				Acromiectomy, partial or total			
				Excision or curettage of bone cyst or benign tumor of clavicle or scapula;			
				with primary autogenous graft (includes obtaining graft)			
				with homogenous or other nonautogenous graft			
				Excision or curettage of bone cyst or benign tumor of proximal humerus;			
				with primary autogenous graft (includes obtaining graft)			
				with homogenous or other nonautogenous graft			
				Sequestrectomy for osteomyelitis or bone abscess, clavicle;			
				with suction irrigation			
				Sequestrectomy for osteomyelitis or bone abscess, scapula;			
				with suction irrigation			
				Sequestrectomy for osteomyelitis or bone abscess, humeral head to surgical neck;			
				with suction irrigation			
				Partial excision of bone (craterization, saucerization or diaphysectomy) for osteomyelitis, clavicle			
				with suction irrigation			
				Partial excision of bone (craterization, saucerization, or diaphysectomy) for osteomyelitis, scapula;			
				with suction irrigation			
				Partial excision of bone (craterization, saucerization, or diaphysectomy) for osteomyelitis, proximal humerus;			
				with suction irrigation			
				Osteotomy of scapula, partial ((e.g.) eg, superior medial angle)			
				Resection humeral head			
				(For replacement with implant, see 23470)			

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
23200	BR+		3.0	23455			
23210	BR+		3.0	23460		90	3.0
23220	BR			23462		120	3.0
23221	BR			23465			
23222	BR					90	3.0
INTRODUCTION OR REMOVAL							
(For arthrocentesis or needling of bursa, see 20610)							
(For K wire or pin insertion or removal, see 20650, 20670, 20680.)							
(23300)	11.0	60	3.0	23470			
23330	8.0	60	3.0	23472		120	3.0
23331	11.0	60	3.0				
23350	0.6	0	3.0				
(For shoulder arthrography, see 73040)							
REPAIR, REVISION OR RECONSTRUCTION				FRACTURE AND/OR DISLOCATION			
(For neurorrhaphy or neuroplasty, 64700 et seq.)							
(For repair of deep wound, see 20800)							
(For sternoclavicular reconstruction, see 23530)							
(For acromioclavicular joint reconstruction, see 23550)							
23395	20.0	90	4.0	23500			
23397	BR			23505		90	3.0
23400	22.0	90	3.0	23510			
23405	7.0	60	4.0	23515		90	3.0
23406	13.0	60	4.0				
23410	14.0	120	3.0	23520		90	3.0
23412	16.0	120	4.0	23525			
23415				23530		90	3.0
23420	18.0	120	3.0	23532		90	5.0
23430	12.0	90	3.0	23540		90	5.0
23440	12.0	90	3.0				
23450	17.0	90	3.0				

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
(For muscle or bone biopsy, see 20200-20245)				24155	Resection of elbow joint (arthrectomy)		BR
24065 Biopsy, soft tissues; superficial . . .	2.0	7	3.0	INTRODUCTION OR REMOVAL			
24066 deep	3.0	15	3.0		(For K wire or pin insertion or removal, see 20650, 20670, 20680)		
24075 Excision, benign tumor; subcutaneous	4.0	15	3.0		(For arthrocentesis or needling of bursa or joint, see 20605)		
24076 deep, subfascial or intramuscular	4.5	15	3.0	24160	Implant removal; elbow joint	6.0	60
24100 Arthrotomy ((capsulotomy)), elbow, for synovial biopsy only	10.0	60	3.0	24164	radial head	4.8	60
24101 with joint exploration, with or without biopsy, with or without removal of foreign body				24200	Removal of foreign body; subcutaneous		BR
24102 for synovectomy	14.0	90	3.0	24201	deep		BR
24105 ((Olecranon bursa excision)) Excision, olecranon bursa	4.8	60	3.0	24220	Injection procedure for elbow arthrography		BR
24110 Excision or curettage of bone cyst or benign tumor, humerus;	9.5	60	3.0		(For elbow arthrography, see 73085)		
24115 with primary autogenous graft (includes obtaining graft)	12.5	120	3.0		(For injection of tennis elbow, see 20550)		
24116 with homogenous or other nonautogenous graft	13.0	120	3.0	REPAIR, REVISION, AND RECONSTRUCTION			
24120 Excision or curettage of bone cyst or bone tumor of head or neck of radius or olecranon process	8.0	60	3.0		(For neuroorrhaphy or neuroplasty, arm, see 64700 et seq.)		
24125 with primary autogenous graft (includes obtaining graft)	10.0	120	3.0		(For repair of deep wound, see 20800)		
24126 with homogenous or other nonautogenous graft	11.0	120	3.0	24301	Muscle or tendon transfer, any type, ((for paralysis of upper arm or shoulder)) single (excluding 24330)	BR+	3.0
24130 ((Radial head excision)) Excision, radial head	8.0	60	3.0				
(For replacement with implant, see 24366)				24305	Tendon lengthening; single, each	BR	3.0
24134 Sequestrectomy for osteomyelitis or bone abscess, shaft or distal humerus;	BR			24310	Tenotomy, open, elbow to shoulder, single, each	5.0	30
24135 with suction irrigation	BR			24320	Tenoplasty, ((transplantation or free graft)) with muscle transfer, with or without free graft, elbow to shoulder, single (Seddon-Brookes type procedure)	BR+	3.0
24136 Sequestrectomy for osteomyelitis or bone abscess, radial head or neck;	BR			24330	Flexor-plasty, elbow ((e.g.) eg. Steindler type advancement);	8.0	90
24137 with suction irrigation	BR			24331	with extensor advancement	8.0	90
24138 Sequestrectomy for osteomyelitis or bone abscess, olecranon process;	BR			24340	Tenodesis for rupture of biceps tendon at elbow	14.0	90
24139 with suction irrigation	BR			24342	Reinsertion of ruptured biceps tendon, distal, with or without tendon graft (includes obtaining graft)	14.0	90
24140 Partial excision of bone (craterization, saucerization or diaphysectomy), for osteomyelitis, humerus, ((head or neck of radius or olecranon process))	7.0	60	3.0	24350	Fasciotomy, lateral or medial (e.g., "tennis elbow" or epicondylitis);	6.0	30
24144 with suction irrigation	8.0	60	3.0	24351	with extensor origin detachment	5.0	30
24145 Partial excision of bone (craterization, saucerization or diaphysectomy,) for osteomyelitis, radial head or neck;	7.0	6.0	3.0	24352	with annular ligament resection	60	30
24146 with suction irrigation	8.0	6.0	3.0	24354	with stripping	BR	3.0
24147 Partial excision of bone (craterization, saucerization or diaphysectomy) for osteomyelitis, olecranon process;	7.0	60	3.0	24356	with partial ostectomy	BR	
24148 with suction irrigation	8.0	60	3.0	24360	Arthroplasty, elbow, with ((or without prosthesis)) membrane	BR+	
24150 Radical resection for tumor, shaft or distal ((part of)) humerus;	BR+		3.0	24361	with distal humeral prosthetic replacement	BR	
24151 with autogenous bone graft (includes obtaining graft)	BR			24362	with implant and fascia lata ligament reconstruction	BR	
24152 Radical resection for tumor, radial head or neck;	BR			24363	with distal humerus and proximal ulnar prosthetic replacement ("total elbow")	BR	
24153 with autogenous bone graft (includes obtaining graft)	BR			24365	Arthroplasty, radial head;	10.0	120
				24366	with implant	BR	3.0

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
24400							
Osteotomy, humerus, with or without internal fixation	12.0	90	3.0				
24410							
Multiple osteotomies with realignment on intramedullary rod (Sofield type procedure)	14.0	90	3.0	24575	6.0	90	3.0
24420							
Osteoplasty, humerus((;)) (eg, shortening or lengthening)	BR+		3.0				
24430							
Repair of non((-)union or malunion, humerus((;)); without graft ((((-g:)) eg, compression technique, etc.)	17.0	90	3.0	24576	9.0	90	3.0
24435							
with iliac or other autogenous bone graft (includes obtaining graft)	20.0	120	3.0	24577	SV	90	3.0
(For proximal radius and/or ulna, see 25400-25420)				24578	4.0	90	3.0
24470							
((Hemi-epiphyseal)) Hemiepiphyseal arrest ((((-g:)) eg, for cubitus varus or valgus, distal humerus)	7.0	120	3.0	24579	5.0	90	3.0
24495							
Decompression fasciotomy, forearm, with brachial artery exploration	BR			24580	7.0	90	3.0
FRACTURE AND/OR DISLOCATION							
24500							
((Humeral shaft fracture, closed without reduction)) Treatment of closed humeral shaft fracture; without manipulation	Sv.&			24581	SV	90	3.0
24505							
((closed manipulative reduction)) with manipulation . . .	5.0	90	3.0	24583	8.0	90	3.0
24510							
((open)) Treatment of open humeral shaft fracture, with uncomplicated soft tissue closure((; manipulative reduction))	7.0	90	3.0	24585	9.0	90	3.0
24515							
Open treatment of closed or open((-open reduction)) humeral shaft fracture, with or without internal or external skeletal fixation	11.0	90	3.0	24586	12.0	90	3.0
24530							
Treatment of closed supracondylar or transcondylar fracture, ((closed;)) without ((reduction)) manipulation	Sv.&			24587	BR	90	3.0
24531							
with traction (pin or skin)							
24535							
((closed manipulative reduction)) Treatment of closed supracondylar or transcondylar fracture, with manipulation	5.0	90	3.0	24588	BR	90	3.0
24536							
with traction (pin or skin)	9.0	90	3.0				
24538							
with percutaneous skeletal fixation	10.0	90	3.0				
24540							
((open, with uncomplicated soft tissue closure, manipulative reduction)) Treatment of open supracondylar or transcondylar fracture, with uncomplicated soft tissue closure;	7.0	90	3.0				
24542							
with traction (pin or skin) . . .	11.0	90	3.0				
24545							
Open treatment of closed or open supracondylar or transcondylar fracture, ((open reduction;)) with or without internal or external skeletal fixation	10.0	90	3.0	24600	Sv.&	0	3.0
24560							
Treatment of closed epicondylar fracture, medial or lateral ((condyle, closed;)); without ((reduction)) manipulation	Sv.&			*24605	*1.0	0	3.0
24565							
((closed manipulative reduction)) with manipulation . . .	4.0	90	3.0	24610	6.0	45	3.0
24570							
((open, with uncomplicated soft tissue closure, manipulative reduction)) Treatment of open				24615	12.0	90	3.0
epicondylar fracture, medial or lateral with uncomplicated soft tissue closure				24620	4.0	90	3.0
24575							
24576							
24577							
24578							
24579							
24580							
24581							
24583							
24585							
24586							
24587							
24588							
24600							
*24605							
24610							
24615							
24620							
24625							
24635							

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
25111	3.0	30	3.0	(For implant replacement, distal ulna, see 25442)			
				(For obtaining fascia for interposition, see 20920, 20922)			
25112	5.0	30	3.0	INTRODUCTION OR REMOVAL			
	4.0	30	3.0	(For K wire, pin, or rod insertion or removal, see 20650, 20670, 20680)			
				25246 Injection procedure for wrist arthrography	BR		
25115				(For wrist arthrography, see 73115)			
25116	10.0	60	3.0	(For foreign body removal, superficial see 20520)			
	10.0	60	3.0	25248 Exploration for removal of deep foreign body	BR		
				REPAIR, REVISION OR RECONSTRUCTION			
25118	10.0	60	3.0	(For repair of deep wounds, see 20800)			
25119	11.0	60	3.0	(For neurorrhaphy or neuroplasty, see 64700 et seq.)			
25120				(For tenotomy or tenoplasty, see 24310, 24320)			
	7.0	60	3.0	25260 Repair, tendon or muscle, flexor; primary, single, each tendon or muscle	7.0	90	3.0
25125	10.0	120	3.0	25263 secondary, single, each tendon or muscle	1.5	90	3.0
25126	10.0	120	3.0	25265 secondary, with free graft (includes obtaining graft), each tendon or muscle	3.0	90	3.0
25130	5.0	60	3.0	25270 Repair, tendon or muscle, extensor; primary, single, each tendon or muscle	5.0	90	3.0
25135	7.0	120	3.0	25272 secondary, single, each tendon or muscle	1.5	90	3.0
25136	7.0	120	3.0	25274 Repair, tendon or muscle, extensor, secondary, with tendon graft (includes obtaining graft), each tendon	8.0	90	3.0
25145	BR			25280 Lengthening or shortening of flexor or extensor tendon, single, each tendon	7.0	90	3.0
25146	BR			25290 Tenotomy, open, single, flexor or extensor tendon, each tendon	4.0	90	3.0
25150	5.0	60	3.0	25295 Tenolysis, single flexor or extensor tendon, each tendon	1.0	90	3.0
25151	5.0	60	3.0	25300 Tenodesis, wrist; flexors of fingers	8.0	90	3.0
25153	5.5	60	3.0	25301 extensors of fingers	6.0	90	3.0
				25310 Tendon transplantation or transfer, ((single)) flexor or extensor, single, each tendon	9.5	90	3.0
25170	BR+		3.0	((25311 multiple	12.0	90	3.0
25210	7.0	60	3.0	25312 with tendon graft(s) (includes obtaining graft), each tendon	8.0	90	3.0
				25315 Flexor origin slide for cerebral palsy;	8.0	90	3.0
				25316 with tendon(s) transfer	9.0	90	3.0
25215	10.0	60	3.0	25317 Flexor origin slide for Volkmann contracture;	12.0	120	3.0
25230	5.0	60	3.0	25318 with tendon(s) transfer	13.0	120	3.0
25240	6.0	60	3.0	25320 Capsulorrhaphy(;) or reconstruction, capsulectomy, wrist (includes synovectomy, resection of capsule, tendon insertions(; etc:))	BR+		3.0

		Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@	
25330	Arthroplasty, wrist	8.0	120	3.0	25505	((closed manipulative reduction)) with manipulation	4.2	90	3.0
25331	with implant	BR			25510	Treatment of open radial shaft fracture, with uncomplicated soft tissue closure((- manipulative reduction))	5.0	90	3.0
25332	pseudarthrosis type with internal fixation	BR			25515	((closed or open, open reduction)) Open treatment of closed or open radial shaft fracture, with or without internal or external skeletal fixation	8.0	90	3.0
	(For obtaining fascia for interposition, see 20920-20922)				25530	Treatment of closed ulnar shaft fracture((-closed-); without ((reduction)) manipulation	Sv.&		
25335	Transposition and realignment of hand over ulna with or without removal of bone or bones, and with or without tendon transfer or advancement (Riordon type operation)	BR			25535	((closed manipulative reduction)) with manipulation	4.0	90	3.0
25350	Osteotomy, radius, distal third	10.0	90	3.0	25540	Treatment of open((;)) ulnar shaft fracture with uncomplicated soft tissue closure((- manipulative reduction))	5.0	90	3.0
25355	middle or proximal third	12.0	90	3.0	25545	((closed or open, open reduction, with or without internal or external skeletal fixation)) Open treatment of closed or open ulnar shaft fracture, with or without internal or external skeletal fixation	8.0	90	3.0
25360	Osteotomy, ulna	10.0	90	3.0	25560	((Radial and ulnar shaft fractures, closed, without reduction)) Treatment of closed radial and ulnar shaft fractures; without manipulation	Sv.&		
25365	radius and ulna	14.0	90	3.0	25565	((closed manipulative reduction)) with manipulation	5.4	90	3.0
25370	Multiple osteotomies, with realignment on intramedullary rod (Sofield type procedure), radius OR ulna	12.0	90	3.0	25570	((open, with uncomplicated soft tissue closure, manipulative reduction)) Treatment of open radial and ulnar shaft fractures, with uncomplicated soft tissue closure	6.0	90	3.0
25375	radius AND ulna	18.0	90	3.0	25575	((closed or open, open reduction, with or without internal or external skeletal fixation)) Open treatment of closed or open radial and ulnar shaft fractures, with or without internal or external skeletal fixation	12.0	90	3.0
(25380)25390	Osteoplasty, radius OR ulna((;)); shortening ((or lengthening))	BR+		3.0	25600	((Distal radial fracture (e.g., Colles type) with or without fracture of ulnar styloid, closed, without reduction)) Treatment of closed distal radial fracture (eg, Colles or Smith type) or epiphyseal separation, with or without fracture of ulnar styloid, without manipulation	Sv.&		
25391	lengthening with autogenous bone graft	BR		3.0	25605	((closed manipulative reduction)) with manipulation	4.0	90	3.0
25392	Osteoplasty, radius AND ulna; shortening	BR		3.0	25610	((closed, complex, requiring manipulative reduction, with or without internal or external skeletal fixation)) Treatment of closed, complex, distal radial fracture (eg, Colles or Smith type) or epiphyseal separation, with or without fracture of ulnar styloid, requiring manipulation; without external skeletal fixation or percutaneous pinning	6.0	90	3.0
25393	lengthening with autogenous bone graft	BR		3.0	25611	with external skeletal fixation or percutaneous pinning	8.0	120	3.0
25400	Repair of nonunion or malunion, radius OR ulna((;)); without graft (((-g-)) eg, compression technique, etc.)	14.0	90	3.0	25615	((open)) Treatment of open			
25405	with iliac or other autogenous bone graft (includes obtaining graft)	17.0	120	3.0					
25415	Repair of nonunion or malunion, radius AND ulna((; with or)); without graft (((-g-)) eg, compression technique, etc.)	20.0	90	3.0					
25420	with iliac or other autogenous bone graft (includes obtaining graft)	23.0	120	3.0					
25425	Repair of defect with autogenous bone graft; radius OR ulna	14.0	120	3.0					
25426	radius AND ulna	20.0	120	3.0					
25440	Repair of nonunion, scaphoid (navicular) bone, with or without radial styloidectomy (includes obtaining graft and necessary fixation)	14.0	120	3.0					
25441	Arthroplasty with prosthetic replacement; distal radius	12.0	120	3.0					
25442	distal ulna	8.0	120	3.0					
25443	scaphoid (navicular)	8.0	120	3.0					
25444	lunate	8.0	120	3.0					
25445	trapezium	8.0	120	3.0					
25446	distal radius and partial or entire carpus ("total wrist")	18.0	120	3.0					
25449	Arthroplasty with removal of implant	BR	120	3.0					
25450	Epiphyseal arrest by epiphysodesis or stapling((;)); distal radius OR ulna	6.0	120	3.0					
25455	distal radius AND ulna	8.0	120	3.0					
FRACTURE AND/OR DISLOCATION									
25500	Treatment of closed radial shaft fracture((-closed-); without ((reduction)) manipulation	Sv.&							

	Unit Value	Follow- up Days=	Basic Anes@		Unit Value	Follow- up Days=	Basic Anes@	
25620	5.0	90	3.0	manipulative reduction)) Treatment of closed trans-scaphoperilunar type of fracture dislocation, with manipulation				
				25685	6.0	45	3.0	
				25690	12.0	90	3.0	
				25695	4.0	90	3.0	
					8.0	90	3.0	
MANIPULATION								
25622	8.0	90	3.0	*25700	Manipulation of wrist ((joint)) joint under general anesthesia ..	*1.0	0	3.0
ARTHRODESIS								
25624	SV 4.0	90	3.0	25800	((Fusion of wrist)) Arthrodesis, wrist joint, without bone graft ..	12.0	120	3.0
25626				25805	with sliding graft ..	14.0	120	3.0
	5.0	90	3.0	25810	with iliac or other autogenous bone graft (includes obtaining graft) ..	16.0	120	3.0
25628	8.0	90	3.0	AMPUTATION				
				25900	Amputation, forearm, through radius and ulna((closed)) ..	9.0	90	3.0
25630				25905	open((;)) flap or circular (guil- lotine) ..	8.0	90	3.0
				25907	secondary((;)) closure or scar revision ..	3.0	30	3.0
				25909	reamputation ..	9.0	90	3.0
25635	Sv. &			25915	Krukenberg procedure ..	9.0	90	3.0
	4.0	90	3.0	25920	Disarticulation through wrist ...	8.0	90	3.0
25640				25922	secondary closure or scar revision ..	3.0	90	3.0
				25924	reamputation ..	9.0	90	3.0
				25927	Transmetacarpal amputation; ...	10.0	90	3.0
				25929	secondary closure or scar revision ..	3.0	90	3.0
25645	5.0	90	3.0	25931	reamputation ..	10.0	90	3.0
*25660	6.0	90	3.0	MISCELLANEOUS				
				25999	Unlisted procedure, forearm or wrist ..	BR		
AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)								
<u>WAC 296-22-073 HAND AND FINGERS.</u>								
					Unit Value	Follow- up Days=	Basic Anes@	
25665	*1.2	0	3.0	INCISION				
				(For drainage of paronychia, see 10100, 10101)				
25670	4.0	45	3.0	*26010	Drainage of finger tip abscess((;)); simple ..	*0.72	0	3.0
				26011	complicated (((e-g:)) eg, felon, etc)((, requiring general or regional anesthesia)) ..	BR+		3.0
25675	3.2	60	3.0	26020	Drainage of tendon sheath, ((acute suppurative tenosynovitis;)) one digit and/or palm ..	4.0	30	3.0
25676	6.0	90	3.0	(For drainage of simple abscess, see 10020, 10060)				
25680				26025	((single)) Drainage of palmar bursa((;)); single, ulnar or radial ..	5.0	30	3.0

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
26030	BR+		3.0	26135			
26032	5.0	30	3.0				
26034	4.0	30	3.0				
26035	BR			26140	5.0	90	3.0
26040	3.6	60	3.0				
26045	5.0	60	3.0	26145	10.0	90	3.0
26055	2.0	30	3.0				
*26060	*1.2	0	3.0				
((*26061	*0.4	0	3.0))				
26070	5.0	60	3.0				
26075	5.0	60	3.0				
26080	4.0	60	3.0				
EXCISION							
26100	5.0	60	3.0				
26105	5.0	60	3.0				
26110	4.0	60	3.0				
26115	4.0	15	3.0				
26116	4.0	30	3.0				
26120	6.0	60	3.0				
26122	10.0	60	3.0				
((26125	14.0	90	3.0)				
26126	18.0	90	3.0))				
26124	14.0	90	3.0				
26126	18.0	90	3.0				
26128	BR						
26130	10.0	90	3.0				

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@	
(For K wire or pin insertion or removal, see 20650, 20670, 20680)				<u>26426</u>	<u>Extensor tendon repair, central slip repair, secondary (boutonniere deformity); using local tissues</u>	<u>4.0</u>	<u>120</u>	<u>3.0</u>
<u>26320</u> Removal of implant from finger or hand	<u>BR</u>			<u>26428</u>	<u>with free graft (includes obtaining graft)</u>	<u>BR</u>		
REPAIR, REVISION OR RECONSTRUCTION				<u>26432</u>	<u>Extensor tendon repair, distal insertion ("mallet finger"), closed, splinting with or without percutaneous pinning</u>	<u>5.0</u>	<u>120</u>	<u>3.0</u>
(For neurorrhaphy, neuroplasty or neurolysis, see 64700 et seq.)				<u>26433</u>	<u>Extensor tendon repair, open, primary or secondary repair; without graft</u>	<u>6.0</u>	<u>120</u>	<u>3.0</u>
<u>26350</u> Flexor tendon repair or advancement, single, not in "no man's land"; primary or secondary without free graft, each tendon	<u>7.0</u>	<u>120</u>	<u>3.0</u>	<u>26434</u>	<u>with free graft (includes obtaining graft)</u>	<u>BR</u>		
((26400) Flexor tendon repair or advancement, single, primary	7.0	120	3.0)	(For tenovagotomy for trigger finger, see 26055)				
((26402)) <u>26352</u> secondary with ((or without)) free ((tendon)) graft (includes obtaining graft), each tendon	<u>BR+</u>		<u>3.0</u>	<u>26440</u>	<u>Tenolysis, simple, flexor tendon, palm, ((single)) OR finger, single, each tendon</u>	<u>5.0</u>	<u>60</u>	<u>3.0</u>
<u>26356</u> Flexor tendon repair or advancement, single, in "no man's land"; primary, each tendon	<u>7.0</u>	<u>120</u>	<u>3.0</u>	<u>26442</u>	<u>palm AND finger, each tendon</u>	<u>6.0</u>	<u>60</u>	<u>3.0</u>
<u>26358</u> secondary with free graft (includes obtaining graft), each tendon	<u>BR</u>		<u>3.0</u>	((26441) multiple, through same incision	6.0	60	3.0)	
<u>26370</u> Profundus tendon repair or advancement, with intact sublimis; primary	<u>BR</u>		<u>3.0</u>	<u>26445</u>	<u>((finger, single)) Tenolysis, extensor tendon, dorsum of hand or finger; each tendon</u>	<u>6.0</u>	<u>60</u>	<u>3.0</u>
<u>26372</u> secondary with free graft (includes obtaining graft)	<u>BR</u>		<u>3.0</u>	((26446) multiple	BR+		3.0)	
<u>26373</u> secondary without free graft	<u>BR</u>		<u>3.0</u>	<u>26449</u>	<u>Tenolysis, complex, extensor tendon, dorsum of hand or finger, including hand and forearm</u>	<u>BR</u>		<u>3.0</u>
<u>26390</u> Flexor tendon excision, implantation of plastic tube or rod for delayed tendon graft	<u>BR</u>		<u>3.0</u>	(For fascia or other implant, see 20920, 20922)				
<u>26392</u> Removal of tube or rod and insertion of tendon graft (includes obtaining graft)	<u>BR</u>		<u>3.0</u>	<u>26450</u>	<u>Tenotomy, flexor, ((open)) single, palm, ((single)) open each</u>	<u>4.0</u>	<u>30</u>	<u>3.0</u>
<u>26410</u> Extensor tendon repair, dorsum of hand, single, primary or secondary; without free graft, each tendon	<u>3.0</u>	<u>120</u>	<u>3.0</u>	((26451) multiple, through same incision	6.0	30	3.0)	
((26404) each additional tendon	1.8			<u>26455</u>	<u>((finger, single)) Tenotomy, flexor, single, finger, open, each</u>	<u>5.0</u>	<u>30</u>	<u>3.0</u>
<u>26406</u> secondary, with or without free graft (includes obtaining graft)	<u>BR+</u>		<u>3.0</u>	((26456) multiple	BR+		3.0)	
<u>26410</u> extensor, dorsum of hand, single, primary	<u>3.0</u>	<u>120</u>	<u>3.0)</u>	<u>26460</u>	<u>Tenotomy, extensor, hand or finger, single, each</u>	<u>BR+</u>		<u>3.0</u>
<u>26412</u> ((secondary;)) with ((or without)) free graft (includes obtaining graft); each tendon	<u>BR+</u>		<u>3.0</u>	((26470)) <u>26471</u>	<u>Tenodesis; for proximal interphalangeal joint stabilization ((metacarpo-phalangeal joint))</u>	<u>8.0</u>	<u>120</u>	<u>3.0</u>
((26414) each additional tendon	1.0			((26475)) <u>26474</u>	<u>((interphalangeal)) for distal joint stabilization</u>	<u>7.0</u>	<u>120</u>	<u>3.0</u>
<u>26416</u> secondary, with or without free graft (includes obtaining graft)	<u>BR+</u>		<u>3.0)</u>	<u>26476</u>	<u>Tendon lengthening, extensor, single, each</u>	<u>8.0</u>	<u>120</u>	<u>3.0</u>
<u>26418</u> Extensor tendon repair, dorsum of finger, single, primary or secondary; without free graft, each tendon	<u>4.0</u>	<u>120</u>	<u>3.0</u>	<u>26477</u>	<u>Tendon shortening, extensor, single, each</u>	<u>8.0</u>	<u>120</u>	<u>3.0</u>
<u>26420</u> ((secondary;)) with ((or without)) free graft (includes obtaining graft) each tendon	<u>BR+</u>		<u>3.0</u>	<u>26480</u>	<u>Tendon transfer or transplant, carpo((-)metacarpal area ((of)) or dorsum of hand, single; without free graft, each</u>	<u>8.0</u>	<u>90</u>	<u>3.0</u>
((26422) each additional tendon	1.2			((26481) multiple	10.0	90	3.0)	
<u>26424</u> secondary, with or without free graft (includes obtaining graft)	<u>BR+</u>		<u>3.0</u>	<u>26483</u>	<u>with free tendon graft (includes obtaining graft), each tendon</u>	<u>11.0</u>	<u>90</u>	<u>3.0</u>
<u>26430</u> Tenovagotomy, for trigger finger	<u>5.0</u>	<u>30</u>	<u>3.0)</u>	<u>26485</u>	<u>Tendon transfer or transplant, palmar, single, each tendon, without free tendon graft</u>	<u>10.0</u>	<u>90</u>	<u>3.0</u>
				((26487) multiple	12.0	90	3.0)	
				<u>26489</u>	<u>with free tendon graft (includes obtaining graft), each tendon</u>	<u>11.0</u>	<u>90</u>	<u>3.0</u>
				<u>26490</u>	<u>Opponens plasty, sublimis tendon transfer type ((e.g., Krukenberg, Roeren, Ney, Royle type procedures))</u>	<u>9.5</u>	<u>120</u>	<u>3.0</u>
				<u>26492</u>	<u>tendon transfer with graft ((e.g., Bunnell, Camitz type</u>			

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
26494	11.0	120	3.0	26561	12.5	45	3.0
				26562	BR+		3.0
26496	12.0	120	3.0	26565	8.0	90	3.0
	BR+		3.0	26567	5.0	90	3.0
				26570	10.0	120	3.0
26497	BR			26574	7.0	120	3.0
26498	BR			26580	BR		
26499	BR			26585	BR		
26500	6.0	90	3.0	26590	BR		
26502	8.0	90	3.0	FRACTURES AND/OR DISLOCATION			
26504	BR+		3.0	26600	Sv.&		
26508	8.0	90	3.0	26605	2.4	90	3.0
26510	BR+		3.0	26610	3.0	90	3.0
26512	BR+		3.0	26615	7.0	90	3.0
26516	6.0	90	3.0	26620	Sv.&		
26517	8.0	90	3.0	*26625	*3.0	90	3.0
26518	10.0	90	3.0	26630	3.6	90	3.0
26520	7.0	90	3.0	26635	BR+		3.0
26521	BR+		3.0	26640	BR+		3.0
26525	7.0	90	3.0	26641	Sv.&		
26526	BR+		3.0	26645	4.0	45	3.0
26530	7.0	90	3.0	26650	6.0	45	3.0
26531	9.0	90	3.0	26655	5.0	45	3.0
26533	BR+		3.0	26660	7.0	45	3.0
26535	8.0	90	3.0	26665			
26536	BR+		3.0				
26538	BR+		3.0				
26540	10.0	90	3.0				
26541	12.0	90	3.0				
26545	8.0	90	3.0				
26550	BR+		3.0				
26552	BR						
26555	BR+		3.0				
26557	BR						
26558	BR						
26559	BR						
26560	9.5	45	3.0				

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
*26670	10.0	90	3.0	shaft fracture, proximal or middle phalanx, finger or thumb, with or without internal or external skeletal fixation, each	4.0	60	3.0
				26740 Treatment of closed articular fracture, involving metacarpophalangeal or proximal interphalangeal joint; without manipulation, each	Sv. 2.0	60	3.0
26675	*0.72	0		26742 with manipulation, each	2.0	60	3.0
26680	2.0	45	3.0	26743 with manipulation requiring traction for fixation, each	4.0	60	3.0
				26744 Treatment of open articular fracture, involving metacarpophalangeal or proximal interphalangeal joint, with uncomplicated soft tissue closure, each	1.5	60	3.0
26685	3.0	45	3.0	26746 Open treatment of closed or open articular fracture, involving metacarpophalangeal or proximal interphalangeal joint, each	2.5	60	3.0
				26750 ((distal phalanx, finger or thumb, closed, without reduction)) Treatment of closed distal phalangeal fracture, finger or thumb; without manipulation, each	Sv. & *0.72	0	3.0
26686	6.0	90	3.0	(*)26755 ((closed manipulative reduction)) with manipulation, each	*0.72	0	3.0
*26700	BR			26760 ((open, with uncomplicated soft tissue closure, manipulative reduction)) Treatment of open distal phalangeal fracture, finger or thumb, with uncomplicated soft tissue closure, each	1.2	30	3.0
26705	*0.72	0		26765 ((closed or open, open reduction; with or without internal or external skeletal fixation)) Open treatment of closed or open distal phalangeal fracture, finger or thumb, each	2.4	45	3.0
26710	2.0	45	3.0	(*)26770 ((interphalangeal joint dislocation, single, closed, manipulative reduction without anesthesia)) Treatment of closed interphalangeal joint dislocation, single, with manipulation; without anesthesia requiring anesthesia	*0.72	0	3.0
				26775	1.2	45	3.0
26715	3.0	45	3.0	26780 ((open, with uncomplicated soft tissue closure, manipulative reduction)) Treatment of open interphalangeal joint dislocation, single, with uncomplicated soft tissue closure	1.6	45	3.0
				26785 ((closed or open, open reduction with or without internal or external skeletal fixation)) Open treatment of closed or open interphalangeal joint dislocation, single	2.4	60	3.0
26720	6.0	90	3.0				
26725	Sv. & 1.6	45	3.0	ARTHRODESIS			
96727	2.0	45	3.0	26820 Fusion in opposition, thumb, with autogenous graft (includes obtaining graft)	10.0	120	3.0
26730	2.2	45	3.0	((26840)26841 ((Carpometacarpal)) Arthrodesis, carpometacarpal joint, thumb, with or without internal fixation;	8.0	120	3.0
26735				26842 with autogenous graft (includes obtaining graft)	10.0	120	3.0

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
26843	8.0	120	3.0	26990	BR		3.0
26844	10.0	120	3.0	26991	BR		3.0
26850	7.0	120	3.0	26992	BR		3.0
26852	8.0	120	3.0	26995	BR		3.0
26860	5.0	120	3.0	*27000		*1.0	0
26861	4.0	120	3.0	27001		3.0	45
26862	6.0	120	3.0	27002		4.0	45
26863	5.0	120	3.0	27003		5.0	45
AMPUTATION				27004		6.0	45
(For hand through metacarpal bones, see 25927)				27005		6.0	45
((26900	10.0	90	3.0))	27006		6.0	60
26910	7.0	90	3.0	(For "hanging hip" procedure, see 27115)			
(For repositioning, see 26550-26555)				27010		6.0	45
((26950))				27015		8.0	90
26951	3.0	45	3.0	27025		10.0	90
26952	5.0	45	3.0	27026		12.0	90
((For skin grafts or flap closure, see 15050-15770))				27030		14.0	90
(For repair of soft tissue defect(s) requiring split(;) or full thickness(, neurovascular) graft or other pedicle grafts, see ((15100-15770)) 15050-15750)				27031		15.0	90
MISCELLANEOUS				27033		16.0	90
26989	BR			27035		17.0	60
AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)				((27036	22.0	60	3.0))
WAC 296-22-079 PELVIS AND HIP JOINT.(((INCLUDING HEAD AND NECK OF FEMUR)))				(For obturator neurectomy, see ((64080, 64085)) 64763-64768)			
(Including head and neck of femur)				EXCISION			
	Unit Value	Follow-up Days=	Basic Anes@	27040		1.2	7
				27041		2.4	15
				27047		3.0	7
				27048		4.0	15
				(((For biopsy, see 20200-20245)))			
				27050		6.0	90
				27052		14.0	90
				27054		20.0	90
				27060		5.0	60
				27062		4.0	60
				(For arthrocentesis or needling of bursa, see 20610)			
				27065			

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
wing ((or) of ilium, symphysis pubis or greater trochanter of femur)((;)) with or without autogenous bone ((chips) graft)	5.0	120	3.0	27110	Transfer iliopsoas to greater trochanter	18.0	120 3.0
27066 deep, with or without bone graft	9.5	120	3.0	27111	to femoral neck	15.0	120 3.0
27067 with bone graft requiring separate incision	10.0	120	3.0	27115	Muscle release, complete((;)) (hanging hip operation)	BR+	5.0
27070 Partial excision of bone (craterization, saucerization ((or diaphysectomy))), for osteomyelitis((;)); superficial ((e.g.) eg, wing of ilium, symphysis pubis or greater trochanter of femur)	6.0	60	3.0	27120	((Hip reconstruction)) Acetabuloplasty; (Whittman or ((Colona) Colonna type procedure)	24.0	120 6.0
27071 deep	12.0	60	3.0	27122	resection femoral head (Girdlestone ((type)) procedure)	20.0	120 7.0
27075 Radical resection for tumor or infection; wing of ilium; one pubic or ischial ramus or symphysis pubis	BR+		5.0	27125	Arthroplasty((-cup or)); prosthesis	28.0	180 7.0
27076 ilium, including acetabulum, both pubic rami, or ischium and acetabulum	BR		3.0	27126	cup	26.0	180 6.0
27077 innominate bone, total	BR		3.0	27127	cup with acetabuloplasty	34.0	180 7.0
27078 ischial tuberosity and greater trochanter of femur	BR		3.0	27130	Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip replacement); simple	40.0	180 7.0
27079 ischial tuberosity and greater trochanter of femur, with skin flaps	BR		3.0	27131	complex	BR	7.0
(For amputation, either interpelviabdominal or hip disarticulation type, see 27290, 27295)				27135	Secondary reconstruction or revision of arthroplasty, any type	BR+	7.0
27080 Coccygectomy primary	6.0	90	3.0	27140	Osteotomy and ((transference)) transfer of greater trochanter ((independent)) separate procedure	12.0	90 3.0
INTRODUCTION AND/OR REMOVAL				((27145))27146	Osteotomy, iliac ((or acetabular (Pemberton or Salter type procedure), under age 6 years)), acetabular or innominate bone;((+9.0))	24.0	120 4.0
((For arthrocentesis or needling of bursa, see 20610))				27147	with open reduction of hip	24.0	120 5.0
27086 Removal of foreign body; subcutaneous tissue	BR		3.0	((27146) age 6 or over	24.0	120 5.0	
27087 deep	BR		3.0	((27150))27151	with femoral osteotomy((, under age 6 years))((24.0))	27.0	120 4.0
27088 deep, complicated	BR		3.0	((27151) age 6 or over	27.0	120 5.0	
(For wire or pin insertion, see 20650)				((27155))27156	with femoral osteotomy and with open reduction of hip((, under age 6 years))((27.0))	30.0	120 4.0
27090 Removal of hip prosthesis; (((independent)) separate procedure)	14.0	90	3.0	27157	Acetabular augmentation (Wilson procedure)	BR	120 5.0
27091 complicated, including "total hip"	BR		7.0	27158	Osteotomy, pelvis, bilateral for congenital malformation	BR	5.0
27093 Injection procedure for hip arthrography; without anesthesia	BR		3.0	((27156) age 6 or over	30.0	120 5.0	
27095 with anesthesia	BR		3.0	((27160))27161	Osteotomy, femoral neck, ((under age 8 years)) (((independent)) separate procedure)((+4.0))	20.0	120 3.0
(For hip arthrography, see 73525)				((27161) age 8 or over	20.0	120 3.0	
REPAIR, REVISION OR RECONSTRUCTION				27165	Osteotomy, ((inter)) intertrochanteric or subtrochanteric including internal or external fixation and/or cast	24.0	120 5.0
(For abdominal fascial transplant, bilateral (Lowman type procedure), see 22910)				27170	Bone graft for nonunion, femoral head, neck, intertrochanteric or subtrochanteric area (includes obtaining bone graft)	24.0	120 6.0
(For repair of deep wound, see 20800)				27175	Treatment of slipped femoral epiphysis((, no reduction, treatment by traction)); by traction, without reduction	Sv.&	
27097 Hamstring recession, proximal	BR		3.0	27176	by single or multiple pinning, in situ	20.0	120 3.0
27098 Adductor transfer to ischium	BR		3.0				
27100 Transfer external oblique muscle to greater trochanter including fascial or tendon extension (graft)	15.0	120	5.0				
27105 Transfer paraspinal muscle to hip (includes fascial or tendon graft)	16.0	120	3.0				

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
27177				27225			
					<u>BR</u>		<u>5.0</u>
	22.0	120	5.0	27230			
27178	<u>21.0</u>	<u>120</u>	<u>5.0</u>				
27179	16.0	120	5.0	27232			
27181	24.0	120	5.0				
27185	5.0	120	3.0	27234		9.5	90
							3.0
FRACTURES AND/OR DISLOCATIONS							
27190						12.0	90
27191	<u>Sv.& BR</u>		3.0	27235			3.0
27192	<u>BR+</u>		3.0			20.0	180
27195				27236			4.0
27196	<u>Sv.&</u>					22.0	120
27200	<u>BR</u>		3.0	27238			6.0
27201	<u>Sv.&</u>						
27202	<u>BR</u>		3.0	27240			
27210						9.5	90
27211	<u>Sv.& BR</u>			27242			3.0
27212							
27214	<u>Sv.&</u>		3.0	27244		12.0	90
27220	<u>BR+</u>		4.0			20.0	120
27222	<u>Sv.&</u>			27246			6.0
27224	8.0	90	3.0	27248			
						7.0	90
				27250			5.0
				27252			
				27253		4.8	120
	22.0	90	5.0				3.0

	Unit Value	Follow-up Days=	Basic Anes@
27254 internal fixation	15.0	180	5.0
((closed or open, open reduction with or without internal or external skeletal fixation))			
Open treatment of closed or open hip dislocation, traumatic, with acetabular lip fixation, with or without internal or external skeletal fixation;	17.0	120	5.0
27255 complicated or late	22.0	180	5.0
27256 ((congenital, adduction splint or traction, in any form)) Treatment of congenital hip dislocation, by abduction, splint or traction; any method	Sv.&		3.0
27257 ((closed reduction requiring anesthesia)) with manipulation requiring anesthesia	4.5	45	3.0
27258 ((open reduction and replacement of femoral head in acetabulum (including tenotomy))) Open treatment of congenital hip dislocation; replacement of femoral head in acetabulum (including tenotomy, etc.)	17.0	120	5.0
27259 with femoral shaft shortening	BR	120	5.0

MANIPULATION

((27270 Sacro-iliac joint, without anesthesia, including office visit	0.3	0	
*27272 requiring general anesthesia	*1.2	0	3.0))
*27275 Manipulation, hip joint, requiring general anesthesia	*1.2	0	3.0

ARTHRODESIS

27280 ((Sacro-iliac)) Arthrodesis, sacro-iliac joint ((includes)) including obtaining graft; unilateral	14.0	120	5.0
27281 bilateral	20.0	120	5.0
27282 Arthrodesis, symphysis pubis ((includes)) including obtaining graft	BR+		4.0
27284 ((Fusion of)) Arthrodesis, hip joint ((includes)) including obtaining graft;	24.0	180	5.0
27286 with subtrochanteric osteotomy	26.0	180	5.0

AMPUTATION

27290 Interpelviabdominal amputation (hind quarter amputation)	29.0	120	11.0
27295 Disarticulation of hip	24.0	120	8.0

MISCELLANEOUS

27299 Unlisted procedure, pelvis or hip joint	BR		
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AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-082 FEMUR (THIGH REGION) AND KNEE JOINT ~~((INCLUDES TIBIAL PLATEAUS))~~.

(including tibial plateaus)

	Unit Value	Follow-up Days=	Basic Anes@
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INCISION

(For incision and drainage of abscess or hematoma, superficial, see 10000-10160)

	Unit Value	Follow-up Days=	Basic Anes@
((27300 Tenotomy, subcutaneous (closed), adductor or hamstring, single (independent procedure)	2.4	45	3.0))
27301 Incision and drainage of deep abscess, infected bursa, or hematoma	BR		
27303 Incision, deep, with opening of bone cortex for osteomyelitis or bone abscess;	BR		3.0
27304 with suction irrigation	BR		3.0
(For open tenotomy, see 27390, 27392)			
27305 ((Hio-tibial fasciotomy)) Fasciotomy, iliotibial (tenotomy), open	6.0	45	3.0
(For combined Ober-Yount fasciotomy, see 27025)			
27306 Tenotomy, subcutaneous, closed, adductor or hamstring, (separate procedure); single	1.2	60	3.0
27307 multiple	4.0	60	3.0
27310 Arthrotomy ((capsulotomy)) , knee, with exploration, drainage or removal of foreign body;	12.0	90	3.0
with suction irrigation	13.0	90	3.0
27311 ((Hamstring muscle neurectomy)) Neurectomy, hamstring muscle	11.0	30	3.0
27315 ((Popliteal (gastrocnemius) neurectomy)) Neurectomy, popliteal (gastrocnemius)	11.0	30	3.0

EXCISION

((For biopsy, see 20200-20245))			
27323 Biopsy, soft tissues; superficial	1.2	7	3.0
27324 deep	2.4	15	3.0
27327 Excision, benign tumor; subcutaneous	3.0	7	3.0
27328 deep, subfascial, or intramuscular	4.0	15	3.0
27330 Arthrotomy ((capsulotomy)) , knee; for synovial biopsy only	12.0	90	3.0
27331 with joint exploration, with or without biopsy, with or without removal of loose bodies	13.0	90	3.0
27332 Arthrotomy, knee, for excision of semilunar cartilage (meniscectomy); medial OR lateral	14.0	90	3.0
medial AND lateral	20.0	90	3.0
27334 Arthrotomy, knee, for synovectomy; anterior OR posterior	17.0	120	3.0
27335 anterior AND posterior including popliteal area	14.0	120	3.0
27340 Excision, prepatellar bursa	5.0	60	3.0
27345 Excision of synovial cyst of popliteal space (Baker's cyst)	8.0	60	3.0
27350 Patellectomy or hemipatellectomy	12.0	90	3.0
27355 Excision or curettage of bone cyst or benign tumor of femur	11.0	60	3.0
with homogenous graft	12.0	60	3.0
27356 with primary autogenous graft (includes obtaining graft)	14.0	120	3.0
27357 with internal fixation (list in addition to 27355, 27356, or 27357)	15.0	120	3.0
27360 ((Partial)) Excision of bone, partial (craterization, saucerization or diaphysectomy), for osteomyelitis, femur, proximal tibia and/or fibula;	10.0	60	3.0
27361 with suction irrigation	13.0	120	3.0

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
27365 Radical resection for tumor (bone or soft tissue)	BR+		3.0	((2743))27411	OR cruciate ligament	19.0	120 3.0
INTRODUCTION AND/OR REMOVAL					medial ligament and capsule ((Slocum type procedure))	19.0	120 3.0
(For arthrocentesis or needling of bursa or joint, see 20610)				((2744))27413	collateral ((and)) or cruciate ((ligaments)) ligament, with pes anserinus transfer or fascial or tendon graft	23.0	120 3.0
(For removal of Rush pin, intramedullary rod, etc., see 20680)				27414	Suture, secondary repair, torn, ruptured, or severed ligament with or without meniscectomy, knee, collateral AND cruciate ligaments	23.0	120 3.0
27370 Injection procedure for knee arthrography	0.6	0		27415	with pes anserinus transfer or fascial or tendon graft	20.0	120 3.0
(For knee arthrography, see 73580, 73581)				27416	Advancement, pes anserinus, Slocum type procedure, (separate procedure)	22.0	120 3.0
27372 Removal foreign body, deep	BR			27420	Reconstruction for recurrent dislocating patella; (Hauser type procedure)	15.0	120 3.0
27375 Arthroscopy of knee ((independent)) separate procedure ((with or without biopsy));	5.4			27422	with extensor realignment and/or muscle advancement or release (Campbell, Goldthwaite, etc., type procedure)	15.0	120 3.0
27376 with synovial biopsy	7.0	30	3.0	27424	with patellectomy	17.0	120 3.0
27377 with removal of loose body	12.0	90	3.0	27430	((Quadricepsplasty)) Quadriceps plasty (Bennett or Thompson type ((procedure)))	15.0	120 3.0
27378 with partial meniscectomy	10.0	90	3.0	27435	Capsulotomy, knee, posterior capsular release	14.0	90 3.0
(When knee arthroscopy is performed in conjunction with arthrotomy, see Modifier -50)				27437	Arthroplasty, patella; without prosthesis	22.0	120 3.0
REPAIR, REVISION OR RECONSTRUCTION				27438	with prosthesis	22.0	120 3.0
(For repair of deep wound, see 20800)				27440	Arthroplasty, knee, ((femoral condyle or)) tibial plateau;	20.0	120 3.0
27380 Suture of infrapatellar tendon; primary	11.0	90	3.0	27441	with debridement and partial synovectomy	BR	120 3.0
27381 secondary reconstruction, including fascial or tendon graft	BR			27442	Arthroplasty, knee, femoral condyles or tibial plateaus	24.0	120 3.0
27385 Suture of quadriceps or hamstring muscle rupture; primary	13.0	90	3.0	27443	with debridement and partial synovectomy	BR	
27386 secondary reconstruction, including fascial or tendon graft	15.0	90	3.0	27444	Arthroplasty, knee, total((:)); fascial ((or prosthetic, medial or lateral compartment))	28.0	120 3.0
27390 Tenotomy, open ((adductor or)), hamstring, knee to hip((:)); single	6.0	45	3.0	27445	prosthetic (eg, Walldius type)	28.0	120 3.0
((27392) adductor and hamstring(s)	8.0	45	3.0	27446	Arthroplasty, knee, total, condyle and plateau ("total knee" replacement); medial OR lateral compartment	BR	120 3.0
27391 multiple, one leg	6.0	90	3.0	27447	medial AND lateral compartments ("total knee")	40.0	120 3.0
27392 multiple, bilateral	8.0	45	3.0	27448	Osteotomy, femur, shaft or supracondylar, without fixation; unilateral	13.0	120 3.0
27393 Lengthening of hamstring tendon; single	8.0	90	3.0	27449	bilateral	15.0	120 3.0
27394 multiple, one leg	12.0	90	3.0	27450	Osteotomy, femur, shaft or supracondylar, with fixation; unilateral	19.0	90 3.0
27395 multiple, bilateral	16.0	120	3.0	27452	bilateral	24.0	120 3.0
(For subcutaneous tenotomy, see 27300, 27302)				((27452))27454	((multiple with realignment on intramedullary rod (Sofield type procedure))) Osteotomy, multiple, femoral shaft, with realignment on intramedullary rod		
((27395))27396 Transplant ((of)), hamstring tendon((:)) to patella; single	16.0	120	3.0				
27397 multiple	14.0	120	3.0				
27400 Tendon or muscle transfer, hamstrings to femur ((Egger)) Eggers type procedure)	16.0	120	3.0				
27405 Suture, primary, torn, ruptured or severed ligament, with or without meniscectomy, knee((:)); collateral	14.0	120	3.0				
27407 cruciate	16.0	120	3.0				
27408 collateral, with pes anserinus transfer	14.0	120	3.0				
27409 collateral and cruciate ligaments	18.0	120	3.0				
((27412))27410 Suture, secondary repair, torn, ruptured, or severed ligament, with or without meniscectomy, knee; collateral							

Table with columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Rows include procedures like Osteotomy, Osteoplasty, Epiphyseal arrest, and Fractures/Dislocation treatments.

				AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)				
				WAC 296-22-087 LEG (TIBIA AND FIBULA) AND ANKLE JOINT.				
	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@	
27540								
((closed or open, open reduction and internal fixation)) Open treatment of closed or open intercondylar spine(s) fractures(s), with internal fixation				14.0	90	3.0		
27550				INCISION				
((Knee dislocation, closed, closed manipulative reduction, without anesthesia)) Treatment of closed knee dislocation; without anesthesia				Sv.&				
27552				27600	Fasciotomy, leg, anterior compartment, for closed spaced decompression;	5.0	30	3.0
27554				27602	including posterior compartment decompression	7.0	30	3.0
requiring anesthesia				3.6	45	3.0		
((open, with uncomplicated soft tissue closure, manipulative reduction)) Treatment of open knee dislocation, with uncomplicated soft tissue closure				7.0	45	3.0		
27556				(For incision and drainage procedures, superficial, see 10000-10160)				
((closed or open, open reduction, with or without internal or external skeletal fixation)) Open treatment of closed or open knee dislocation, with or without internal or external skeletal fixation; without primary ligamentous repair				15.0	90	3.0		
27557				27603	Incision and drainage; deep abscess or hematoma	BR		
with primary ligamentous repair				BR	120	3.0		
27560				27604	infected bursa	SV		
((Patellar dislocation, closed, closed manipulative reduction, without anesthesia)) Treatment of closed patellar dislocation; without anesthesia				Sv.&				
27562				27605	Tenotomy, Achilles tendon, subcutaneous (((independent)) separate procedure); local anesthesia	1.0	0	3.0
27564				27606	general anesthesia	2.0	0	3.0
requiring anesthesia				3.6	45	3.0		
27566				27607	Incision, deep, with opening of bone cortex for osteomyelitis or bone abscess;	BR		3.0
((closed or open, open reduction with or without partial or total patellectomy)) Open treatment of closed or open patellar dislocation, with or without partial or total patellectomy				5.0	45	3.0		
(For recurrent dislocation, see 27420-27424)								
MANIPULATION				27608	with suction irrigation	BR		3.0
*27570				27610	Arthrotomy ((capsulotomy)), ankle, with exploration, drainage or removal of loose or foreign body;	9.0	60	3.0
Manipulation of knee joint under general anesthesia (includes application of traction or other fixation devices)				*1.2	0	3.0		
ARTHRODESIS				27611	with suction irrigation	10.0	120	3.0
27580				27612	Arthrotomy, ankle, posterior capsular release, with or without Achilles tendon lengthening (see also 27685)	10.0	60	3.0
Fusion of knee, any technique				20.0	120	3.0		
AMPUTATION				EXCISION				
27590				27613	Biopsy, soft tissues; superficial	1.2	7	3.0
Amputation, thigh, through femur, any level((closed));				14.5	120	4.0		
27591				27614	deep	2.4	15	3.0
immediate fitting technique including first cast				BR	30	3.0		
27592				27618	Excision, benign tumor; subcutaneous	3.0	7	3.0
open, flap or circular (guillotine)				14.0	120	4.0		
27594				27619	deep, subfascial or intramuscular	4.0	15	3.0
secondary closure or scar revision				Sv.&				
27596				(((For biopsy, see 20200-20245)))				
re((-)amputation				BR+				
27598				27620	Arthrotomy (capsulotomy), ankle, for biopsy	9.0	60	3.0
Disarticulation at knee				14.0	120	4.0		
MISCELLANEOUS				27625	Arthrotomy, ankle, for synovectomy;	12.0	90	3.0
27599				27626	including tenosynovectomy	14.0	90	3.0
Unlisted procedure, femur or knee				BR				
				27630	Excision of lesion of tendon, sheath or capsule (((e-g.)) eg, cyst or ganglion, etc.)	3.6	30	3.0
				27635	Excision, or curettage, of bone cyst or benign tumor, tibia or fibula;	10.0	60	3.0
				27637	with primary autogenous graft (includes obtaining graft)	13.0	120	3.0
				27638	with primary homogenous graft	14.0	120	3.0
				27640	((Partial excision of bone)) Excision of bone, partial, (craterization, saucerization or diaphysectomy) for osteomyelitis(;;); tibia ((and/or fibula))	12.0	60	3.0
				27641	fibula	10.0	60	3.0
				27645	((Radical resection for tumor)) Resection for tumor, radical; tibia	BR+		3.0
				27646	fibula	BR		
				27647	talus or calcaneus	BR		

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
INTRODUCTION ((AND/OR) OR REMOVAL				<u>(Toe extensors are considered as a group to be a single tendon when transplanted into midfoot)</u>			
(For arthrocentesis or needling of bursa or joint, see 20605)				27690	Transfer or transplant of single tendon (with muscle redirection or rerouting)((-single,); superficial (eg, anterior tibial extensors into midfoot)	8.0	120 3.0
(For removal of Rush pin, intramedullary rod, Lottes nail, etc., see 20680)				27691	anterior tibial or posterior tibial through interosseous space	10.0	120 3.0
27648	Injection procedure for ankle arthrography	BR		((27691))27692	each additional tendon	2.0	
(For ankle arthrography, see 73615)				((27693)	through interosseous space	10.0	120 3.0))
REPAIR, REVISION OR RECONSTRUCTION				27695	Suture, primary, torn, ruptured or severed ligament, ankle(;-); collateral	10.0	120 3.0
(For repair of deep wound, see 20800)				27696	both collateral ligaments	14.0	120 3.0
27650	Suture ((of)), primary, ruptured Achilles tendon	11.0	120 3.0	27698	((secondary repair, collateral ligament)) Suture, secondary repair, torn, ruptured or severed ligament; ankle, collateral (eg, Watson-Jones procedure)	14.0	120 3.0
27652	with graft (includes obtaining graft)	14.0	120 3.0	27700	Arthroplasty, ankle;	BR+	3.0
27654	Suture, secondary, ruptured Achilles tendon, with or without graft	14.0	120 3.0	27702	with implant ("total ankle")	BR	3.0
((27655))27656	Repair ((of)), fascial defect of leg	6.0	45 3.0	27704	Removal of ankle implant	BR	
((27660))27658	((Repair of suture of tendon, primary, leg; flexor, single)) Repair or suture of flexor tendon of leg; primary, without free graft, single, each	6.0	90 3.0	27705	Osteotomy(;-); tibia	12.0	90 3.0
((27662))27659	secondary with or without free graft, single tendon, each	8.0	90 3.0	27707	fibula	7.0	90 3.0
((27664) —	each additional tendon	1.0		27709	tibia and fibula	14.0	90 3.0
27666	secondary with or without free graft	2.0))		27712	multiple, with realignment on intramedullary rod (Sofield type procedure)	18.0	90 3.0
((27668))27664	((extensor, single)) Repair or suture of extensor tendon of leg; primary, without free graft, single, each	4.0	90 3.0	(For osteotomy to correct genu varus (bowleg) or genu valgus (knock-knee), see 27455-((2746+)) 27462)			
((27670))27665	secondary with or without free graft, single tendon, each	6.0	90 3.0	27715	Osteoplasty, tibia and fibula, lengthening	24.0	90 3.0
((27672) —	each additional tendon	1.0		27720	Repair of nonunion or malunion, tibia, without graft (((-g-)) eg, compression technic, etc.)	18.0	90 3.0
27674	secondary with or without free graft	2.0))		27722	with sliding graft((-local bone))	20.0	120 3.0
27675	Repair for dislocating peroneal tendons; without fibular osteotomy	5.0	90 3.0	27724	with iliac or other autogenous bone graft (includes obtaining graft)	22.0	120 3.0
27676	with fibular osteotomy	6.0	90 3.0	27725	by synostosis, with fibula, any method	BR	120 3.0
27680	Tenolysis, ((open-single)) including tibia, fibula and ankle flexor, single	5.0	60 3.0	27727	Repair of congenital pseudarthrosis, tibia	BR	120 3.0
27681	multiple (through same ((mc-)) incision), each	6.0	60 3.0	27730	((Epiphyseal)) Epiphyseal arrest by ((epiphyseodesis)) epiphyseodesis or stapling, distal tibia	12.0	120 3.0
27685	Lengthening or shortening of tendon (((-c.g., Achilles tendon) (see also 27605, 27612))); single (separate procedure)	7.0	90 3.0	27732	distal fibula	6.0	120 3.0
27686	multiple (through same incision), each	8.0	120 3.0	27734	distal tibia and fibula	14.0	120 3.0
27687	Gastrocnemius recession (eg, Strayer procedure)	7.0	120 3.0	27740	((combined, proximal and distal tibia and fibula)) Epiphyseal arrest by epiphyseodesis or stapling, combined, proximal and distal tibia and fibula;	18.0	120 3.0
				27742	and distal femur	22.0	120 3.0
				(For ((epiphyseal)) epiphyseal arrest of proximal tibia and fibula, see 27477((-27479)))			
				FRACTURES AND/OR DISLOCATIONS			
				27750	((Tibia, shaft, fracture, closed, without reduction)) Treatment of closed tibial shaft fracture; without manipulation	SV.&	

		Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
27752	((closed manipulative reduction)) with manipulation . . .	5.0	90	3.0				
27754	((open, with uncomplicated soft tissue closure, manipulative reduction)) Treatment of open tibial shaft fracture, with uncomplicated soft tissue closure	6.5	90	3.0	27802	Treatment of closed tibia and fibula fractures, shafts; without manipulation	Sv. &	
27756	((closed or open, open reduction; with internal or external skeletal fixation)) Open treatment of closed or open tibial shaft fracture, with internal or external skeletal fixation; simple	12.0	90	3.0	27804	((open, with uncomplicated soft tissue closure, manipulative reduction)) Treatment of open tibia and fibula fractures, shafts, with uncomplicated soft tissue closure (eg, "pins above and below")	6.5	90 3.0
27758	complicated	BR	90	3.0	27806	((closed or open, open reduction; with or without internal or external skeletal fixation)) Open treatment of closed or open tibia and fibula fractures, shafts, with or without internal or external skeletal fixation	8.0	90 3.0
27760	((distal extremity (medial malleolus) closed, without reduction)) Treatment of closed distal tibial fracture (medial malleolus); without manipulation	Sv. &			27808	((bimalleolar fracture, ankle (including Potts); closed, without reduction)) Treatment of closed bimalleolar ankle fracture, (including Potts); without manipulation	14.5	90 3.0
27762	((closed manipulative reduction)) with manipulation	3.0	90	3.0	27810	((closed manipulative reduction)) with manipulation	Sv. &	
27764	((open, with uncomplicated soft tissue closure, manipulative reduction)) Treatment of open distal tibial fracture (medial malleolus) with uncomplicated soft tissue closure	4.4	90	3.0	27812	((open, with uncomplicated soft tissue closure, manipulative reduction)) Treatment of open bimalleolar ankle fracture, with uncomplicated soft tissue closure	5.0	90 3.0
27766	((closed or open, open reduction and fixation)) Open treatment of closed or open distal tibial fracture (medial malleolus), with fixation	9.0	90	3.0	27814	((closed or open, open reduction; with or without internal or external skeletal fixation)) Open treatment of closed or open bimalleolar ankle fracture, with or without internal or external skeletal fixation	6.5	90 3.0
27780	((Fibula, fracture, proximal extremity or shaft, closed, without reduction)) Treatment of closed proximal fibula or shaft fracture; without manipulation	Sv. &			27816	((trimalleolar, closed, without reduction)) Treatment of closed trimalleolar ankle fracture; without manipulation	12.0	90 3.0
27781	with manipulation	3.0	90	3.0	27818	((closed manipulative reduction)) with manipulation	Sv. &	
27782	((open, with uncomplicated soft tissue closure, manipulative reduction)) Treatment of open proximal fibula or shaft fracture, with uncomplicated soft tissue closure	4.0	90	3.0	27820	((open, with uncomplicated soft tissue closure, manipulative reduction)) Treatment of open trimalleolar ankle fracture, with uncomplicated soft tissue closure	6.0	90 3.0
27784	((closed or open, open reduction, with or without internal or external skeletal fixation)) Open treatment of closed or open proximal fibula or shaft fracture, with or without internal or external skeletal fixation	8.0	90	3.0	27822	((closed or open, open reduction; with or without internal or external skeletal fixation)) Open treatment of closed or open trimalleolar ankle fracture, with or without internal or external skeletal fixation, medial and/or lateral malleolus; only	7.0	90 3.0
27786	((distal extremity (lateral malleolus) closed, without reduction)) Treatment of closed distal fibular fracture (lateral malleolus); without manipulation	Sv. &			27823	including internal skeletal fixation of posterior lip (malleolus)	14.5	90 3.0
27788	((closed manipulative reduction)) with manipulation	3.0	90	3.0	27830	((Proximal tibio-fibular joint dislocation, closed, manipulative reduction without anesthesia)) Treatment of proximal tibiofibular joint dislocation; without anesthesia	18.0	120 3.0
27790	((open, with uncomplicated soft tissue closure, manipulative reduction)) Treatment of open distal fibular fracture (lateral malleolus), with uncomplicated soft tissue closure	4.0	90	3.0	27831	requiring anesthesia	Sv. &	
27792	((closed or open, open reduction; with fixation)) Open treatment of closed or open distal fibular fracture (lateral malleolus), with fixation	9.0	90	3.0	27832	((open reduction and fixation or excision)) Open treatment of proximal tibiofibular joint dislocation with fixation or excision	BR	3.0
27800	((Fibia and fibula, fractures, shafts, closed, without reduction))						8.0	90 3.0

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
27840				((Ankle dislocation, closed; manipulative reduction without anesthesia)) Treatment of ankle dislocation; without anesthesia	Sv.&		
*27842	*2.0	45	3.0	requiring anesthesia			
27844				((open, with uncomplicated soft tissue closure, manipulative reduction)) Treatment of open ankle dislocation, with uncomplicated soft tissue closure	3.2	45	3.0
27846				((closed or open, open reduction)) Open treatment of closed or open ankle dislocation	12.0	90	3.0
27848				((Distal tibio-fibular joint dislocation (ankle mortise), closed or open, open reduction and)) with fixation	9.0	90	3.0
MANIPULATION							
*27860	*1.0	0	3.0	Manipulation of ankle under general anesthesia (includes application of traction or other fixation apparatus)			
ARTHRODESIS							
27870	17.0	120	3.0	((Fusion)) Arthrodesis, ankle any method			
27871	BR	120	3.0	Arthrodesis, tibiofibular joint, proximal or distal			
AMPUTATION							
27880	12.0	90	4.0	((Leg, through tibia and fibula, closed)) Amputation, leg, through tibia and fibula;			
27881	12.0	90	4.0	with immediate fitting technique including application of first cast			
27882	10.5	90	4.0	open, flap or circular (guillotine)			
*27884	*Sv.&		3.0	secondary closure or scar revision			
27886	BR+		4.0	((re-amputation)) reamputation			
27888	12.0	90	3.0	Amputation, ankle, through malleoli of tibia and fibula (Syme, Pirogoff type procedures), with plastic closure and resection of nerves			
27889	12.0	120	3.0	Ankle disarticulation			
MISCELLANEOUS							
27899	BR			Unlisted procedure, leg or ankle			
AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)							
WAC 296-22-091 FOOT.							
	Unit Value	Follow-up Days=	Basic Anes@				
INCISION							
				((For incision and drainage procedures, superficial, see 10000-10160))			
28001	SV			Incision and drainage, infected bursa			
28002	BR		3.0	Deep infection, below fascia, requiring deep dissection, with or without tendon sheath involvement; single bursal space, specify			
28003	BR		3.0	multiple areas			
28004	BR		3.0	multiple areas with suction irrigation			
28005	BR		3.0	Incision, deep, with opening of bone cortex for osteomyelitis or bone abscess;			
28006	BR		3.0	with suction irrigation			
((28008)) 28008	2.4	60	3.0	Fasciotomy, plantar and/or toe, subcutaneous (see also 28060, 28062, 28250)			
*28010	*0.8	0	3.0	Tenotomy, subcutaneous, toe((-)); single			
*28011	*1.2	0	3.0	multiple			
				(For open tenotomy, see 28230; 28234)			
28020	6.0	60	3.0	Arthrotomy ((capsulotomy)) , with exploration, drainage or removal of loose or foreign body((-)); intertarsal or tarsometatarsal joint			
28022	3.6	60	3.0	metatarsophalangeal joint			
28024	2.4	60	3.0	interphalangeal joint			
28030	BR+		3.0	Neurectomy of intrinsic musculature of foot			
28035	8.0	60	3.0	Tarsal tunnel release (posterior tibial nerve decompression)			
EXCISION							
				(For toenail, see 11730-11750)			
28043	3.0	7	3.0	Excision, benign tumor; subcutaneous			
28045	4.0	15	3.0	deep, subfascial, intramuscular			
				((For biopsy, see 20200-20240))			
28050	6.0	60	3.0	Arthrotomy for synovial biopsy((-)); intertarsal or tarsometatarsal joint			
28052	3.6	60	3.0	metatarsophalangeal joint			
28054	2.4	60	3.0	interphalangeal joint			
28060	6.0	60	3.0	Fasciotomy, excision of plantar fascia((-); partial ((independent)) separate procedure)			
28062	BR+		3.0	radical ((independent)) separate procedure)			
				(For plantar fasciotomy, see ((28060)) 28008, 28250)			
28070	6.0	90	3.0	Synovectomy, intertarsal or tarsometatarsal joint, each			
28072	3.6	90	3.0	metatarsophalangeal joint, each			
28080	3.6	30	3.0	Excision of Morton((-s)) neuroma, single, each			
28086	6.0	90	3.0	Synovectomy, tendon sheath; flexor			
28088	6.0	90	3.0	extensor			
28090	3.6	30	3.0	Excision of lesion of tendon or fibrous sheath or capsule (including synovectomy) (cyst or ganglion((- etc.-)); foot			
28092	2.4	30	3.0	toes			
28100	6.0	60	3.0	Excision or curettage of bone cyst or benign tumor, ((astragalus or os calcis)) talus or calcaneus;			
28102	7.0	120	3.0	with iliac or other autogenous bone graft (includes obtaining graft)			
28103	8.0	120	3.0	with homogenous bone graft			
28104	BR		3.0	((other tarsal or metatarsal bones)) Excision or curettage of bone cyst or benign tumor, tarsal or metatarsal bones, except talus			

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
28106	4.8	60	3.0	(For arthrocenteses (injections or aspiration), see 20600, 20605)			
				(For K wire or pin insertion or removal, see 20650, 20670)			
28107	5.6	120	3.0				
28108	6.6	120	3.0	28190 *Remove foreign body; subcutaneous	BR		3.0
				28192 deep	BR		3.0
28109	3.6	60	3.0	28193 complicated	BR		3.0
	4.6	60	3.0	REPAIR, REVISION OR RECONSTRUCTION			
				28200 ((Repair or suture of tendon, primary or secondary, foot, flexor, single)) Repair or suture of tendon, foot, flexor, single; primary or secondary, without free graft, each tendon	6.0	90	3.0
28110	2.4	60	3.0	28202 ((with free graft (includes obtaining graft)) secondary with free graft, each tendon (includes obtaining graft)	8.0	90	3.0
28111	7.0	90	3.0	28204 each additional tendon	1.0		
28112	4.0	60	3.0	28206 with free graft (includes obtaining graft)	2.0		
28113	1.0	90	3.0	28208 ((extensor, single)) Repair or suture of tendon, foot, flexor, single; primary or secondary, each tendon	2.8	90	3.0
28114	12.0	60	3.0	28210 ((with free graft (includes obtaining graft)) secondary with free graft, each tendon (includes obtaining graft)	4.4	90	3.0
28116	7.0	60	3.0	((28212 - each additional tendon	0.8		
28118	7.0	60	3.0	28214 with free graft (includes obtaining graft)	1.2		
28119	7.0	60	3.0	28220 Tenolysis, flexor, single	5.0	60	3.0
28120	6.0	60	3.0	28222 multiple (through same incision), each	6.0	60	3.0
28121	7.0	60	3.0	28225 Tenolysis, extensor((:)); single ..	2.8	60	3.0
28122	6.0	60	3.0	28226 multiple (through same incision), each	3.6	60	3.0
28123	4.8	60	3.0	28230 Tenotomy, open, flexor, foot, single or multiple (((independent)) separate procedure)	3.0	30	3.0
28124	5.0	60	3.0	28232 toe, single (((independent)) separate procedure)	1.4	30	3.0
28126	3.6	60	3.0	28234 Tenotomy, open, extensor, foot or toe	1.0	30	3.0
28130	8.0	60	3.0	28236 Transfer of tendon, anterior tibial into tarsal bone (eg, Lowman-Young type procedure)	5.0	120	3.0
28135	10.0	120	3.0	28238 Advancement of posterior tibial tendon with excision of accessory navicular bone (Kidner type procedure)	7.0	120	3.0
28140	6.0	60	3.0	(For subcutaneous tenotomy, see 28010, 28011)			
28150	3.6	30	3.0	(For transfer or transplant of tendon with muscle redirection or rerouting, see 27690-(27693) 27692)			
(28151)	4.8	30	3.0	(For extensor hallucis longus transfer, great toe, ((and)) IP fusion, see 28760)			
28153	6.0	30	3.0				
28160	3.0	30	3.0				
(28161)	4.2	30	3.0				
(28170)				28240 Tenotomy or release, abductor hallucis muscle (McCauley type procedure)	3.6	60	3.0
28173	BR+		3.0	28250 Division of plantar fascia and muscle ("Steindler stripping")			
28175	BR		3.0				
	BR		3.0				
(For talus or calcaneous, see 27647)							
INTRODUCTION AND/OR REMOVAL							

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@	
(separate procedure)	6.0	60	3.0	28309	<u>Osteotomy, metatarsals, multiple, for cavus foot (Swanson type procedure)</u>	BR	<u>120</u>	<u>3.0</u>
28260 Capsulotomy, midfoot ((<u>medial release</u>)); medial release only (separate procedure)	BR+		3.0	28310 ((proximal phalanx, first toe, for shortening, angular or rotational correction (independent procedure)) Osteotomy for shortening, angular or rotational correction; proximal phalanx, first toe (separate procedure)	2.8	90	3.0	
((28262) 28261 with tendon lengthening	BR+		3.0	28312 other phalanges, any toe	2.0	90	3.0	
28262 extensive, including posterior talotibial capsulotomy and tendon(s) lengthening as for resistant clubfoot deformity	BR			28315 Sesamoidectomy, first toe (separate procedure)	BR			
28264 ((mid-tarsal)) Capsulotomy, midtarsal (Heyman type procedure)	12.0	90	3.0	28320 Repair of nonunion or malunion; tarsal bones ((<u>os calcis</u>)) calcaneus, ((<u>astragalus</u>)) talus, etc.)	BR+		3.0	
28270 Capsulotomy for contracture, metatarsophalangeal joint, with or without tenorrhaphy ((<u>independent procedure</u>)), single, each joint (separate procedure)	3.0	60	3.0	28322 metatarsal, with or without bone graft (includes obtaining graft)	4.8	120	3.0	
28272 interphalangeal joint, ((<u>independent procedure</u>)) single, each joint (separate procedure)	1.4	60	3.0	FRACTURE AND/OR DISLOCATION				
28280 Webbing operation (create syndactylism of toes) for soft corn (Kelikian type procedure)	3.6	46	3.0	28400 ((<u>Os calcis, fracture, closed without reduction</u>)) Treatment of closed calcaneal fracture; without manipulation	Sv.&			
28285 Hammer toe operation, one toe ((e.g.) eg, interphalangeal fusion, filleting, phalangectomy) (separate procedure)	4.8	90	3.0	28405 ((closed manipulative reduction;)) with manipulation including Cotton or Bohler type reductions	BR+		3.0	
28286 for cock-up fifth toe with plastic skin closure, (Ruiz-Mora type procedure)	3.6	120	3.0	28406 with manipulation and skeletal fixation	BR	120	3.0	
28288 Osteotomy, partial, exostectomy or condylectomy, single, metatarsal head, second through fifth, each metatarsal head, (separate procedure)	7.0	120	3.0	28410 ((open, with uncomplicated soft tissue closure, manipulative reduction)) Treatment of open calcaneal fracture, with uncomplicated soft tissue closure	4.0	90	3.0	
28290 Hallux valgus(;) (bunion) correction ((by exostectomy (Silver type procedure)), with or without sesamoidectomy; simple exostectomy (Silver type procedure)	4.8	60	3.0	28415 ((closed or open, open reduction, with or without internal or external skeletal fixation)) Open treatment of closed or open calcaneal fracture, with or without internal or external skeletal fixation	10.0	90	3.0	
28292 ((f))Keller, McBride or Mayo type ((<u>procedure</u>)) procedure	7.0	90	3.0	28420 with primary iliac or other autogenous bone graft (includes obtaining graft)	14.5	90	3.0	
28293 resection of joint with implant	8.0	120	3.0	28430 ((<u>Astragalus, fracture, closed, without reduction</u>)) Treatment of closed talus fracture; without manipulation	Sv.&			
28294 with tendon transplants (Joplin type procedure)	9.5	90	3.0	28435 ((closed manipulative reduction;)) with manipulation	3.0	90	3.0	
28296 with metatarsal osteotomy (Mitchell or Lapidus type procedure)	9.5	120	3.0	28440 ((open, with uncomplicated soft tissue closure, manipulative reduction)) Treatment of open talus fracture, with uncomplicated soft tissue closure	4.0	90	3.0	
28298 Hallux valgus (bunion) correction; by phalanx osteotomy	7.0	120	3.0	28445 ((closed or open, open reduction, with or without internal or external skeletal fixation)) Open treatment of closed or open talus fracture, with or without internal or skeletal fixation	10.0	90	3.0	
28299 by other methods (eg, double osteotomy)	BR		3.0	28450 ((Tarsal bone(s) (except astragalus and os calcis), fracture(s); closed, without reduction)) Treatment of closed tarsal bone fracture (except talus and calcaneus); without manipulation, each	Sv.&			
28300 Osteotomy(, including internal fixation, os calcis (Dwyer or Chambers type procedure)); calcaneus (Dwyer or Chambers type procedure) with or without internal fixation	9.5	90	3.0	28455 ((closed manipulative reduction;)) with manipulation, each	2.0	90	3.0	
28302 ((astragalus)) talus	9.0	90	3.0	28460 ((open, with uncomplicated soft tissue closure, manipulative reduction)) Treatment of open tarsal				
28304 ((other mid-tarsal bones)) Osteotomy, midtarsal bones, other than calcaneus or talus;	8.0	90	3.0					
28305 with autogenous graft (includes obtaining graft) (Fowler type)	9.0	120	3.0					
28306 Osteotomy, metatarsal(s), base or shaft, single, for shortening or angular correction(,); first metatarsal	7.0	90	3.0					
28308 ((other metatarsals)) other than first metatarsal	5.6	90	3.0					

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
28465	3.0	90	3.0	28545	*0.72	0	
					2.0	45	3.0
28470	6.0	90	3.0	28546			
28475	Sv.&			28550			
28480	2.2	90	3.0	28555	2.8	45	3.0
28485	3.0	90	3.0	*28570	6.0	90	3.0
28490	6.0	90	3.0	28575	*1.0	0	
28495	Sv.&			28580	2.4	45	3.0
28500	1.2	30	3.0	28585	3.2	45	3.0
28505	1.8	30	3.0	*28600	10.0	90	3.0
28510	3.6	45	3.0	28605	*0.72	0	
28515	Sv.&			28606	2.0	45	3.0
28520	1.0	30	3.0	28610	3.0		
28525	1.6	30	3.0	28615	2.8	45	3.0
*28540	3.0	45	3.0	*28630	6.0	90	3.0
				28635	*0.72	0	
				28640	1.4	45	3.0
					2.0	45	3.0

	Unit Value	Follow-up Days=	Basic Anes@
28645 ((closed or open, open reduction, with or without internal or external skeletal fixation)) <u>Open treatment of closed or open metatarsophalangeal joint dislocation</u>	4.0	90	3.0
*28660 ((interphalangeal joint, dislocation, closed, manipulative reduction without anesthesia)) <u>Treatment of closed interphalangeal joint dislocation; without anesthesia</u>	*0.72	0	
28665 <u>requiring anesthesia</u>	1.2	45	3.0
28670 ((open, with uncomplicated soft tissue closure, manipulative reduction)) <u>Treatment of open interphalangeal joint dislocation, with uncomplicated soft tissue closure</u>	1.6	45	3.0
28675 ((closed or open, open reduction, with or without internal or external skeletal fixation)) <u>Open treatment of closed or open interphalangeal joint dislocation</u>	2.4	60	3.0

ARTHRODESIS

((28700)) 28705 <u>Pantalar arthrodesis((; under age 14 years))</u> (16.0) 19.0	120	3.0	
((28705 age 14 or over 19.0 120 3.0))			
((28710)) 28715 <u>Triple ((arthrodesis, under age 14 years)) arthrodesis</u> (12.0) 15.0	120	3.0	
((28715 age 14 or over 15.0 120 3.0))			
((28720)) 28725 ((Subastragalar)) <u>Subtalar arthrodesis (includes Grice type procedure)((; under age 14 years))</u> (10.0) 12.0	120	3.0	
((28725 age 14 or over 12.0 120 3.0))			
28730 ((Midtarsal or tarso-metatarsal arthrodesis, multiple or transverse)) <u>Arthrodesis, midtarsal or tarsometatarsal, multiple or transverse;</u>	11.0	120	3.0
28735 <u>with osteotomy as for flat foot correction</u>	14.0	120	3.0
28737 <u>Arthrodesis, midtarsal navicular-cuneiform, with tendon lengthening and advancement (Miller type procedure)</u>	7.0	120	3.0
28740 ((single joint)) <u>Arthrodesis, midtarsal or tarsometatarsal, single joint</u>	9.0	120	3.0
28750 ((Great toe metatarso-phalangeal joint)) <u>Arthrodesis, great toe; metatarsophalangeal joint</u>	7.0	120	3.0
28755 <u>interphalangeal joint</u>	4.0	120	3.0
28760 ((with redirection of attachment of extensor hallucis longus (Jones type procedure))) <u>Arthrodesis, great toe, interphalangeal joint, with extensor hallucis longus transfer to first metatarsal neck (Jones type procedure)</u>	6.0	120	3.0

(For hammer toe operation or interphalangeal fusion, see 28285)

AMPUTATION

28800 <u>Amputation, foot((;); midtarsal (Chopart type procedure)</u>	10.0	90	3.0
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28805 <u>transmetatarsal</u>	10.0	90	3.0
28810 <u>Amputation, metatarsal, with toe, single</u>	6.0	90	3.0
28820 <u>Amputation, toe((;); metatarso((-))phalangeal joint</u>	3.0	45	3.0
28825 <u>interphalangeal joint</u>	2.0	45	3.0

MISCELLANEOUS

28899 Unlisted procedure, foot or toes **BR**

(For skin grafts and flaps, see 15050-15770)

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-095 ((CASTING AND STRAPPING)) APPLICATION OF CASTS AND STRAPPING.

The listed ((values)) procedures apply when the cast application or strapping is ((part of a service (Sv.) procedure or is a replacement)) a replacement procedure used during or after the period of follow-up care. Additional ((visit charges are warranted only)) visits are reportable only if significant ((identifiable)) identifiable further services are provided at the time of the cast application or strapping.

Listed ((values)) procedures include removal of cast or strapping.

	Unit Value	Follow-up Days=	Basic Anes@
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BODY AND UPPER EXTREMITY CASTS

29000 ((Halo type fixation and body cast)) <u>Application of halo type body cast (see 20661-20663 for insertion)</u>	5.0	2	3.0
29010 <u>Application of Risser jacket, localizer, body; only</u>	3.0	2	3.0
29015 <u>including head</u>	3.6	2	3.0
29020 <u>Application of turnbuckle jacket, body; only</u>	3.0	2	3.0
29025 <u>including head</u>	3.6	2	3.0
29035 ((Body)) <u>Application of body cast, shoulder to hips;</u>	1.6	2	3.0
29040 <u>including head, Minerva type</u>	2.2	2	3.0
29044 <u>including one thigh</u>	2.0	2	3.0
29046 <u>including both thighs</u>	2.2	2	3.0
((29050 Shoulder spica, under age 10 years 1.2 2 3.0))			
29049 <u>Application; plaster figure of eight</u>	0.6	2	3.0
29055 ((age 10 or over)) <u>shoulder spica</u>	1.8	2	3.0
29058 <u>plaster Velpeau</u>	0.8	2	3.0
((29060 Shoulder to hand (long arm); under age 10 years 0.6 2 3.0))			
29065 ((age 10 or over)) <u>shoulder to hand (long arm)</u>	0.8	2	3.0
((29070 Elbow to fingers (short arm); under age 10 years 0.4 2 3.0))			
29075 ((age 10 or over)) <u>elbow to fingers (short arm)</u>	0.6	2	3.0
((29080 Hand and lower forearm (gauntlet), under age 10 years (age 10 or over)) hand and lower forearm (gauntlet) 0.4 2 3.0))			
29085 <u>hand and lower forearm (gauntlet)</u>	0.6	2	3.0

SPLINTS

((29100 Long arm (shoulder to hand); under age 10 years 0.5 2 3.0))			
29105 ((age 10 or over)) <u>Application of long arm splint (shoulder to hand)</u>	0.6	2	3.0

	Unit Value	Follow-up Days=	Basic Anes@
((29120 Short arm (forearm and hand); under age 10 years))	0.4	2	3.0
29125 ((age 10 or over)) Application of short arm (forearm and hand); static	0.5	2	3.0
29126 dynamic	0.8	2	3.0
29130 Application of finger splint; static	0.3	2	3.0
29131 dynamic	0.4	2	3.0

STRAPPING—ANY AGE

29200 Strapping; thorax	0.4	0	
29220 low back	0.5	0	
29240 shoulder (((e.g.)) e.g., Velpeau)	0.6	0	
29260 elbow or wrist	0.24	0	
29280 hand or finger	0.2	0	

LOWER EXTREMITY CASTS

((29300 Hip spica, unilateral, under age 10 years))	1.4	2	3.0
29305 ((age 10 or over)) Application of hip spica cast; unilateral	2.0	2	3.0
((29320 bilateral, or one and one-half spica, under age 10 years))	1.8	2	3.0
29325 ((age 10 or over)) bilateral, or one and one-half spica	2.4	2	3.0
((29340 Long leg cast (thigh to toes); under age 10 years))	0.8	2	3.0
29345 ((age 10 or over)) Application of long leg cast (thigh to toes);	1.1	2	3.0
((29350 walking or ambulatory type, under age 10 years))	1.0	2	3.0
29355 ((age 10 or over)) walking or ambulatory type	1.3	2	3.0
29358 Application of long leg cast brace	BR		
((29360 Cylinder cast (thigh to ankle); under age 10 years))	0.8	2	3.0
29365 ((age 10 or over)) Application of cylinder cast (thigh to ankle)	1.0	2	3.0
((29400 Short leg (below knee to toes); under age 10 years))	0.5	2	3.0
29405 ((age 10 or over)) Application of short leg (below knee to toes);	0.8	2	3.0
((29420 walking or ambulatory type, under age 10 years))	0.6	2	3.0
29425 ((age 10 or over)) walking or ambulatory type	1.0	2	3.0
29435 Application of patellar tendon bearing (PTB) cast	1.2	2	3.0
29440 Adding walker to previously applied cast((-any age))	0.3		
29450 Application of clubfoot cast with molding or manipulation, long or short leg((-under age 24 months; single)); unilateral	0.4	2	3.0
29455 bilateral	0.8	2	3.0

(If over age 24 months, see other lower extremity casts)

SPLINTS

((29500 Long leg (thigh to ankle or toes); under age 10 years))	0.6	2	3.0
29505 ((age 10 or over)) Application of long leg splint (thigh to ankle or toes)	0.72	2	3.0
((29510 Short leg (calf to foot); under age 10 years))	0.4	2	3.0
29515 ((age 10 or over)) Application of short leg splint (calf to foot)	0.6	2	3.0

STRAPPING—ANY AGE

29520 Strapping; hip	0.5	0	
29530 Knee	0.4	0	
29540 Ankle	0.3	0	
29550 toes	0.3	0	
29580 Unna Boot	0.4	0	
29590 Denis-Browne splint strapping	0.4	0	

REMOVAL OR REPAIR

(((Listed values for removal pertain))) Codes for cast removals should be employed only ((to)) for casts applied by another physician)

29700 Removal or bivalving((-); gauntlet, boot((-); or body((-full arm or full leg)) cast	0.4	0	
29705 full arm or full leg cast	0.4		
29710 shoulder or hip spica, Minerva((-); or Risser jacket, etc.	0.5	0	
29715 turnbuckle jacket	0.7	0	
29720 Repair of spica, body cast or jacket	0.24	0	
29730 Windowing of cast	0.24	0	
29740 Wedging of cast (except clubfoot casts)	0.3	0	
29750 Wedging of clubfoot cast((-); unilateral	0.3	0	
29751 bilateral	0.4	0	

MISCELLANEOUS

29799 Unlisted procedure, casting or strapping	BR		
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AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-100 NOSE RESPIRATORY SYSTEM.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
(For simple furuncle see 10020)			
*30000 Drainage ((of intranasal)) abscess or hematoma ((of lateral cartilage)), nasal, internal approach	*1.2	0	3.0
(For external approach, see 10020, 10060, 10140)			
*30020 Drainage of ((septal)) abscess or hematoma, nasal septum	*1.4	0	3.0
(For lateral rhinotomy, see specific application, e.g., 30118, 30320)			

EXCISION

(For excision of nasopharyngeal fibroma, see 42880)

(For biopsy of nasopharynx, see 42804)

30100 Biopsy, ((soft tissue, nose)) intranasal	0.6	7	3.0
(For biopsy skin of nose, see 11100, 11101)			
30110 Excision of nasal polyp(s)((-one or more, unilateral or bilateral,			

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
30115	1.4	15	3.0	one or more stages,); office type procedure ((complicated)) extensive, requiring hospitalization			
30117	4.0	30	3.0	Excision, intranasal lesion; internal approach			
30118	BR			external approach (lateral rhinotomy)			
30120	10.0	60	3.0	Excision or surgical planing of skin of nose for rhinophyma			
30124	2.5	0	4.0	Excision dermoid cyst, nose; simple, skin, subcutaneous	8.0	90	3.0
30125	BR	30	4.0	complex, under bone or cartilage			
30130	2.0	30	3.0	Excision ((hypertrophic mucosa;)) turbinate, partial or complete			
30140	6.0	90	3.0	((Resection of inferior turbinate (submucous), complete or partial, unilateral or bilateral (independent procedure))) Submucous resection turbinate, partial or complete (For submucous resection of nasal septum, see 30500)			
30150	BR			Rhinectomy; partial			
30160	BR			total (For closure and/or reconstruction, primary or delayed, see integumentary System, 13150-13152, 14060-14300, 15120-15730, 15760, 20900-20910)			
INTRODUCTION				DESTRUCTION			
*30200	*0.48	0		*30800	*0.4	0	3.0
30210*	0.2	0	4.0	30805	1.4	7	3.0
((Endoscopy)) REMOVAL FOREIGN BODY				30820	BR		
*30300	*0.4	0	3.0	((Manipulation)) OTHER PROCEDURES			
30310	2.0	7	3.0	(For reduction of fracture, see 21310-21335)			
30320	BR+		3.0	*30900	*0.6	0	
REPAIR				*30905			
(For obtaining tissues for graft, see 20900-20926, 21210)				((Nasal hemorrhage, anterior, control of, unilateral or bilateral; with or without cauterization or anterior packs)) Control hemorrhage, nasal, with or without cauterization or anterior packs; anterior unilateral or bilateral ..			
(See also repair-complex, 13000-15760 and 21210-21235)				*30906	*2.4	0	3.0
30400	12.0	180	3.0	((posterior, with posterior nasal packs, with or without cauterization and/or anterior pack; initial)) posterior, initial, with posterior nasal packs ..			
(For columellar reconstruction, see 13150 et seq.)				*30915	*1.6	0	3.0
30410	18.0	180	3.0	((30910)) 30915 ((by ligation of anterior ethmoidal or external carotid artery)) Ligation, arteries, ethmoidal ..			
30420	20.0	180	3.0	30920	10.0	30	3.0
30430	3.0	45	3.0	internal maxillary artery, transantral ..			
30440	10.0	45	3.0	(For ligation external carotid artery, see 37600)			
30450	BR		4.0	30999	BR		
new patient				Unlisted procedure, nose ..			
major revision							

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-105 ACCESSORY SINUSES.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
*31000 ((Antrum lavage, puncture or natural ostium, unilateral)) Lavage by cannulation; maxillary sinus, unilateral (antrum puncture or natural ostium)	*0.4	0	3.0
*31001 maxillary sinuses, bilateral . . .	*0.6	0	3.0
31002* sphenoid sinus	0.8	0	3.0
31020 ((Antrotomy, intranasal, unilateral)) Sinusotomy, maxillary (antrotomy); intranasal, unilateral	3.0	90	3.0
31021 intranasal, bilateral	6.0	90	3.0
31030 radical ((Caldwell-Luc)), unilateral (Caldwell-Luc)	12.0	90	3.0
31031 radical, bilateral (Caldwell-Luc)	16.0	90	3.0
31040 Surgery on pterygomaxillary fossa contents by transantral approach	BR		
(For transantral ligation of internal maxillary artery, see 30920)			
31050 ((Sphenoid sinusotomy)) Sinusotomy, sphenoid	11.0	30	3.0
31070 ((Frontal)) Sinusotomy, frontal; external, simple (trephine operation)	10.0	30	3.0
31075 transorbital, unilateral ((Lynch) (mucocele or osteoma)) (for mucocele or osteoma, Lynch type)	16.0	180	3.0
31080 ((radical)) obliterative without osteoplastic flap, brow incision	24.0	180	3.0
31081 obliterative, without osteoplastic flap, coronal incision	BR		
31084 obliterative, with osteoplastic flap, brow incision	BR		
31085 obliterative, with osteoplastic flap, coronal incision	BR		
31090 ((Combined external frontal, ethmoidal and sphenoidal sinusotomy, unilateral)) Sinusotomy combined, three or more sinuses	26.0	180	3.0

	Unit Value	Follow-up Days=	Basic Anes@
EXCISION			
31200 Ethmoidectomy((, unilateral)); intranasal, anterior	6.0	90	3.0
31201 intranasal, total	10.0	90	3.0
31205 extranasal total	13.0	90	3.0
((31220))31225 Maxillectomy((, unilateral, with or)); without orbital exenteration ((and/or lateral rhinotomy))	24.0	180	3.0
31230 with orbital exenteration (en bloc)	24.0	180	3.0

(For orbital exenteration as an independent procedure, see 65110 et seq.)
(For skin grafts, see 15120 et seq.)

OTHER PROCEDURES

(For hypophysectomy, transeptal, see 61665)

(For transcranial hypophysectomy, see 61546)

	Unit Value	Follow-up Days=	Basic Anes@
31245 Transnasal pituitary procedure other than hypophysectomy	BR		
31299 Unlisted procedure, accessory sinuses	BR		

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-110 LARYNX.

	Unit Value	Follow-up Days=	Basic Anes@
EXCISION			
31300 ((Laryngofissure with removal of tumor or laryngocle (cordectomy)) Laryngotomy (thyrotomy, laryngofissure); with removal of tumor or laryngocele, cordectomy	16.0	90	6.0
31320 ((Thyrotomy)) diagnostic	8.0	60	6.0
((31325 for laryngeal web, two stage, with Keel insertion and removal (McNaught type)	16.0	180	6.0
31330 for laryngeal stenosis with graft or core mold, including tracheotomy	16.0	90	6.0
31360 Laryngectomy, total, without radical neck dissection	26.0	180	6.0
31365 total, with radical neck dissection	34.0	180	6.0
31367 subtotal supraglottic, without radical neck dissection	30.0	180	6.0
31368 subtotal supraglottic, with radical neck dissection	30.0	180	6.0
31370 ((Hemilaryngectomy, horizontal)) Partial laryngectomy (hemilaryngectomy); horizontal	30.0	180	6.0
31375 ((lateral-vertical)) lateroververtical	20.0	180	6.0
31380 ((anterio-vertical)) anterovertical	20.0	180	6.0
31382 antero-latero-vertical	20.0	180	6.0
31390 Pharyngolaryngectomy, with radical neck dissection; without reconstruction	BR		
31395 with reconstruction	BR		
31400 Arytenoidectomy or arytenoidopexy, external approach ((see also 31560))	20.0	180	6.0
(For endoscopic arytenoidectomy, see 31560)			
31420 Epiglottidectomy((, external approach))	16.0	180	6.0

INTRODUCTION

((For injection procedure for bronchography, see 31655, 31710))

	Unit Value	Follow-up Days=	Basic Anes@
31500 ((Endotracheal intubation)) Intubation, endotracheal, emergency procedure	1.4	0	

(For injection procedure for bronchography, see 31656, 31708, 31710)

ENDOSCOPY

	Unit Value	Follow-up Days=	Basic Anes@
((For biopsy or pharynx, nasopharynx, hypopharynx, see 42800-42804))			
<u>31505</u> Laryngoscopy, indirect (separate procedure); diagnostic			
((31510) Laryngoscopy, indirect, with biopsy	1.4	7	
<u>31510</u> with biopsy	BR		
<u>31511</u> with removal of foreign body	BR		
<u>31512</u> with removal of lesion	BR		
<u>31515</u> ((direct;)) Laryngoscopy, direct; for aspiration ((independent procedure))	0.6	0	
<u>31520</u> diagnostic, newborn ((independent procedure))	2.4	7	4.0
<u>31525</u> diagnostic, except newborn	4.0	7	4.0
<u>31526</u> diagnostic, with operating microscope	BR		
<u>31530</u> Laryngoscopy, operative, ((including)) with foreign body removal;	6.0	30	4.0
<u>31531</u> with operating microscope	BR		
<u>31535</u> Laryngoscopy, operative, with biopsy;	6.0	30	4.0
<u>31536</u> with operating microscope	BR		
<u>31540</u> ((including)) Laryngoscopy, operative, with excision of tumor and/or stripping of vocal cords or epiglottis;	6.0	90	4.0
<u>31541</u> with operating microscope	BR		
((31545) with Lynch suspension	6.0	90	4.0
<u>31560</u> ((Endoscopic arytenoidectomy, with or without tracheostomy)) Laryngoscopy, operative, with arytenoidectomy;	15.0	90	4.0
<u>31561</u> with operating microscope	BR		
<u>31570</u> ((Injection of vocal cord(s) (e.g., teflon))) Laryngoscopy within injection into vocal cord(s), therapeutic;	6.0	90	4.0
<u>31571</u> with operating microscope	BR		
REPAIR			
((31590) Laryngoplasty (including acute fracture)	BR	6.0	
<u>31580</u> Laryngoplasty; for laryngeal web, two stage, with keel insertion and removal	BR		
<u>31582</u> for laryngeal stenosis, with graft or core mold, including tracheotomy	BR		
<u>31584</u> with open reduction of fracture	BR		
<u>31585</u> Treatment of closed laryngeal fracture; without manipulation	BR		
<u>31586</u> with closed manipulative reduction	BR		
OTHER PROCEDURES			
<u>31599</u> Unlisted procedure, larynx	BR		

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-115 TRACHEA AND BRONCHI.

INCISION

Unit Value	Follow-up Days=	Basic Anes@
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Unit Value	Follow-up Days=	Basic Anes@	
<u>31600</u> Tracheostomy ((independent) separate procedure)((over age 2 years));	5.4	15	5.0
<u>31601</u> under two years	6.0	15	6.0
<u>31605</u> Cricothyroidostomy (separate procedure)	BR		
<u>31610</u> ((Tracheal)) Tracheostomy, fenestration procedure with skin flaps	7.0	15	4.0
(For endotracheal intubation, see 31500)			
(For tracheal aspiration under direct vision, see 31515)			
<u>31612</u> Tracheal puncture, percutaneous for aspiration of mucus (transtracheal aspiration)	BR		

ENDOSCOPY

<u>31615</u> Tracheoscopy through established tracheostomy incision	BR		
<u>31620</u> Bronchoscopy(:); diagnostic, rigid bronchoscope	3.6	30	4.0
<u>31621</u> diagnostic, fiberoptic bronchoscope (flexible)	3.6	7	5.0
<u>31625</u> with biopsy, rigid bronchoscope	5.0	30	4.0
<u>31626</u> with biopsy, fiberoptic bronchoscope (flexible)	5.0	7	5.0
<u>31627</u> with brushing, fiberoptic bronchoscope (flexible)	5.0	7	5.0
<u>31630</u> with tracheal or broncheal dilation or closed reduction of fracture ((of tracheal ring(s)))	6.0	30	6.0
<u>31635</u> with removal of foreign body	5.6	30	4.0
<u>31640</u> with excision of tumor	5.0	30	4.0
<u>31645</u> with therapeutic aspiration of tracheo-bronchial tree, initial	4.0	30	4.0
<u>31646</u> ((subsequent)) with therapeutic aspiration of tracheobronchial tree, subsequent	2.6	30	4.0
(For catheter aspiration of tracheobronchial tree at bedside, see 31725)			
<u>31650</u> with drainage of lung abscess or cavity, initial	4.0	30	4.0
<u>31651</u> ((subsequent)) with drainage of lung abscess or cavity, subsequent	2.6	30	4.0
((31655)) <u>31656</u> with injection of contrast ((medium)) material for segmental bronchography (fiberscope only)	4.0	30	4.0
<u>31659</u> with other bronchoscopic procedures	BR		

INTRODUCTION

(For endotracheal intubation, see 31500)

(For tracheal aspiration ((independent procedure)) under direct vision, see 31515)

<u>31700</u> Catheterization ((for bronchospirometry)) transglottic ((independent) separate procedure)	3.6	0	
<u>31708</u> Instillation of contrast material for laryngography or bronchography, without catheterization	0.9	0	
<u>31710</u> ((Injection procedure for bronchography (independent procedure))			

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
(see also 31655)) <u>Catheterization for bronchography, with or without instillation of contrast material</u>	0.8	0		*32000	Thoracentesis((:)), puncture of pleural cavity for aspiration, initial or subsequent	*0.72	0
(For bronchoscopic catheterization for bronchography, fiberscope only, see 31656)				*32020	Tube thoracostomy with water seal, pneumothorax, ((simple)) hemothorax, empyema (separate procedure)	*1.2	0
31715 <u>Transtacheal injection for bronchography</u>	0.8	0		((32025 complicated, in surgery	3.0	30	3.0
(For detention time, see 99150, 99151)				32030	for drainage of empyema	6.0	60
31717 <u>Catheterization with bronchial brush biopsy</u>	BR			32035	Thoracostomy; with rib resection for empyema	6.0	60
31719 <u>Transtacheal (percutaneous) introduction of indwelling tube for therapy (tickle tube)</u>	BR			32036	with open flap drainage for empyema	8.0	90
31720 <u>Catheter aspiration (separate procedure); nasotracheobronchial</u>	0.8	0		32095	Thoracotomy limited, for biopsy of lung or pleura		
31725 <u>tracheobronchial with fiberscope, bedside</u>	1.0	0		32100	Thoracotomy, ((exploratory, including biopsy)) major; with exploration and biopsy	12.0	90
REPAIR				32110	with control of traumatic hemorrhage and/or repair of lung ((fistula) tear	16.0	90
31750 <u>Tracheoplasty((= plastic operation on trachea)); cervical</u>	BR+		6.0	32120	for post-operative complications	16.0	90
31755 <u>((Asai technique for vocal rehabilitation of laryngectomized patient)) tracheopharyngeal fistulization (Asai technique), each stage</u>	BR+		6.0	32124	with open intrapleural pneumonolysis	16.0	90
31760 <u>intrathoracic</u>	BR+		12.0	((32130 with open drainage of empyema cavity by rib resection (independent procedure)	10.0	90	11.0
31770 <u>Bronchoplasty((:)); graft repair</u>	BR+		11.0	32140	with cyst(s) removal with or without a pleural procedure	16.0	90
31775 <u>excision ((of)) stenosis and anastomosis</u>	BR+		11.0	32141	with excision-plication of bullae, with or without any pleural procedure	20.0	90
(For lobectomy and bronchoplasty, see 32485)				32150	with removal of intrapleural foreign body or fibrin ((body)) deposit	14.0	90
31780 <u>Excision tracheal stenosis and anastomosis; cervical</u>	BR			32151	with removal of intrapulmonary foreign body	16.0	90
31781 <u>cervicothoracic</u>	BR			32160	with cardiac massage	BR+	12.0
31785 <u>Excision of tracheal tumor or carcinoma; cervical</u>	BR				(For segmental or other resections of lung, see 32480-((32500))32525)		
31786 <u>thoracic</u>	BR			32200	((Pneumonotomy)) Pneumonostomy, with open drainage of ((pulmonary)) abscess or cyst	14.0	120
SUTURE				((32205 with removal of foreign body from lung	14.0	90	11.0
31800 <u>((Tracheorrhaphy)) Suture of external tracheal wound or injury((:)); cervical</u>	BR+		6.0	32215	Pleural scarification for repeat pneumothorax	16.0	90
31805 <u>((intrathoracic)) intrathoracic</u>	BR+		12.0	32220	Decortication, pulmonary, ((total (independent procedure))) (separate procedure); total	20.0	90
31820 <u>((Closure of tracheostomy or tracheal fistula)) Surgical closure tracheostomy or fistula; without plastic repair</u>	4.0	30	4.0	32225	partial	14.0	90
31825 <u>with plastic repair</u>	6.0	30	4.0	EXCISION			
(For repair of tracheo((=))esophageal fistula, see 43305-43310)				32310	Pleurectomy; parietal (separate procedure)	20.0	90
31830 <u>Revision of tracheostomy scar</u>	5.60	30	4.0	32315	partial	15.0	90
31899 <u>Unlisted procedure, trachea, bronchi</u>	BR			32320	Decortication and parietal pleurectomy	28.0	90
AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)				32400	Biopsy, pleura((:)); needle	1.2	7
WAC 296-22-116 LUNGS AND PLEURA.				32402	open	6.0	15
	Unit Value	Follow-up Days=	Basic Anes@	32405	Biopsy, lung, percutaneous, needle	3.0	7
				*32420	Pneumonocentesis((:)), puncture of lung for aspiration ((biopsy))	*1.2	0
				32440	Pneumonectomy, total	30.0	90
				32445	Pneumonectomy, extrapleural; without empyemectomy	20.0	90
				32450	with empyemectomy	25.0	90
				32480	Lobectomy, total((= subtotal)) or segmental;	26.0	90
INCISION							

Unit Value Follow-up Days= Basic Anes@

Table with 4 columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Rows include 32485, 32490, 32500, 32520, 32522, 32525, 32540, 32545.

ENDOSCOPY

Table with 4 columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Rows include 32700, 32705, ((32720)).

REPAIR

Table with 4 columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Rows include 32800, 32810, 32815, 32820.

SURGICAL COLLAPSE THERAPY; THORACOPLASTY

((Thoracoplasty)) (see also 32520)

Table with 4 columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Rows include 32900, ((32901)), 32902, 32920, 32905, 32906.

(For open closure of major bronchial fistula, see 32815)

(For resection of first rib for thoracic outlet compression, see 21615, 21616)

Table with 4 columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Rows include 32940, *32960, ((*32961)), 32999.

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-120 HEART AND PERICARDIUM.

Unit Value Follow-up Days= Basic Anes@

(For monitoring, operation of pump and other nonsurgical services, see 99150, 99151, 99160-99162, 99190-99192)

(For other medical or laboratory related services, see appropriate section)

((Incision

Table with 4 columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Rows include 33000, 33005.

PERICARDIUM

Table with 4 columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Rows include 33010*, 33011*, 33015, 33020, 33025, 33030, 33035, 33050, ((*33040)), *33041, 33060, 33065, 33070.

Excision))

Table with 4 columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Row includes 33100.

CARDIAC TUMOR

Table with 4 columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Rows include 33120, 33130.

((Introduction))

(For injection procedure for coronary arteriography, see 36230)

(For cardiac catheterization, see 93500-93566)

(For electronic analysis of internal pacemaker system, see 93795, 93796)

(For fluoroscopy and radiography procedure with insertion of pacemaker, see 71090)

Table with 4 columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Row includes ((33200)).

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
<u>33200</u>				<u>33430</u>			
Insertion of permanent pacemaker with epicardial electrode; by thoracotomy	24.0	90	15.0	((replacement, with bypass)) Replacement, mitral valve, with bypass	52.0	90	15.0
<u>33201</u>	24.0	90	15.0				
by xiphoid approach				TRICUSPID VALVE			
<u>33205</u>				<u>33450</u>			
Insertion of permanent pacemaker with transvenous electrodes	14.0	90		Valvotomy, tricuspid valve (commissurotomy); closed	32.0	90	15.0
<u>33210</u>				open, with bypass	50.0	90	15.0
Insertion of temporary transvenous cardiac electrode, ((temporary (independent procedure)) or pacemaker catheter (separate procedure)	7.0	15	Sv.&	<u>33452</u>			
<u>33212</u>				<u>33460</u>			
Insertion or replacement of pulse generator only	4.0	30	6.0	((Tricuspid valve, valvuloplasty, with bypass)) Valvuloplasty or valvectomy, tricuspid valve, with bypass;	50.0	90	15.0
<u>33216</u>				replacement(, with bypass)	52.0	90	15.0
Insertion, replacement, or repositioning of permanent transvenous electrodes only (15 days or more after initial insertion)	8.0	30	6.0	(For multiple valve replacement, see 33480-33492)			
<u>33218</u>				<u>33468</u>			
Repair of pacemaker; electrodes only	5.0	30	6.0	Tricuspid valve repositioning and plication for Ebstein anomaly	50.0	90	15.0
<u>33219</u>							
with replacement of pulse generator	BR			PULMONARY VALVE			
((33220				<u>33470</u>			
Insertion or replacement of permanent transvenous electrode and pacemaker	20.0	90	5.0	Valvotomy, pulmonary valve (commissurotomy); closed (transventricular)	32.0	90	15.0
33225				open, with inflow occlusion	32.0	90	15.0
transvenous electrode only	12.0	90	4.0	open, with bypass	50.0	90	15.0
33230				<u>33476</u>			
pacemaker only	8.0	30	3.0	Right ventricular resection for infundibular stenosis, with or without commissurotomy	50.0	90	15.0
33235				<u>33478</u>			
replacement or repair of pacemaker	8.0	30	3.0	Outflow tract augmentation (gusset), with or without commissurotomy or infundibular resection	52.0	90	15.0
Suture)) WOUNDS OF THE HEART AND GREAT VESSELS							
<u>33300</u>				MULTIPLE VALVE PROCEDURES			
((Cardiorrhaphy: suture of heart wound or injury)) Repair of cardiac wound; without bypass	24.0	90	15.0	<u>33480</u>			
<u>33305</u>				((Double valve procedure, replacement and/or repair by any of above methods)) Replacement and/or repair, double valve procedure, by methods 33400-33465	70.0	90	15.0
with bypass	30.0	90	15.0	<u>33481</u>			
<u>33310</u>				Single valve replacement; with commissurotomy or valvuloplasty of another valve	56.0	90	15.0
Cardiotomy, exploratory (includes removal of foreign body); without bypass	22.0	90	15.0	<u>33482</u>			
<u>33315</u>				with commissurotomy or valvuloplasty of two valves	60.0	90	15.0
with bypass	34.0	90	15.0	<u>33483</u>			
<u>33320</u>				<u>33485</u>			
Suture repair of aorta or great vessels; without bypass	20.0	90	15.0	Double valve replacement;	65.0	90	15.0
<u>33322</u>				with commissurotomy or valvuloplasty of one valve	67.0	90	15.0
with bypass	30.0	90	15.0	<u>33490</u>			
<u>33330</u>				((Triple valve procedure, replacement and/or repair by any of above methods)) Replacement and/or repair, triple valve procedure, by methods 33400 to 33465	80.0	90	15.0
Insertion of graft; without bypass	30.0	90	15.0	<u>33492</u>			
<u>33335</u>				Triple valve replacement	85.0	90	15.0
with bypass	40.0	90	15.0	((33500			
<u>33350</u>				Pulmonary valve, valvotomy (commissurotomy), closed	32.0	90	15.0
Great vessel repair with other major procedure	BR		15.0	33505			
open, with inflow occlusion	BR			33530			
(For multiple valve replacement, see 33480-33492)				Pulmonary valvular or infundibular stenosis, valvotomy, with bypass	50.0	90	15.0
<u>33415</u>				CORONARY ARTERY PROCEDURES			
Resection of aortic valve for subvalvular stenosis	40.0	90	15.0	<u>33502</u>			
<u>33417</u>				Anomalous coronary artery; ligation	20.0	90	15.0
Aortoplasty (gusset) for supra- valvular stenosis	40.0	90	15.0	graft, without bypass	25.0	90	15.0
				graft, with bypass	35.0	90	15.0
MITRAL VALVE				<u>33510</u>			
<u>33420</u>				Coronary artery bypass, autogenous graft, eg, saphenous vein or internal mammary artery; single artery	35.0	90	15.0
((Mitral valve, valvotomy (commissurotomy), closed)) Valvotomy, mitral valve (commissurotomy); closed	32.0	90	15.0	two coronary arteries	50.0	90	15.0
<u>33422</u>				three or more coronary arteries	55.0	90	15.0
open, with bypass	50.0	90	15.0				
<u>33425</u>							
((valvuloplasty, with bypass)) Valvuloplasty, mitral valve, with bypass	52.0	90	15.0				

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
33520				33688			
Coronary artery bypass, nonautogenous graft (eg, synthetic or cadaver); single artery	30.0	90	15.0	with removal of pulmonary artery band, with or without gusset	5.0		
33525	35.0	90	15.0	33690	15.0	90	15.0
two coronary arteries				33692			
33528	50.0	90	15.0	Total repair tetralogy of Fallot; intact outflow tract	50.0	90	15.0
33532				with outflow tract gusset	50.0	90	15.0
Myocardial implantation, one or more systemic arteries (Vineberg type operation)	25.0	90	15.0	33696	8.0		
with closure of previous shunt							
((33550) Myocardial revascularization with implantation of single systemic artery (Vineberg type)	38.0	90	25.0	SINUS OF VALSALVA			
33555	48.0	90	25.0))	33702	50.0	90	15.0
POSTINFARCTION MYOCARDIAL PROCEDURES				33710	35.0	90	15.0
33542	35.0	90	15.0	33720	50.0	90	15.0
Myocardial resection (eg, ventricular aneurysmectomy)				Repair sinus of Valsalva fistula, with bypass;			
33545	50.0	90	15.0	with repair of ventricular septal defect	35.0	90	15.0
Repair of postinfarction ventricular septal defect, with or without myocardial resection				33720	50.0	90	15.0
33560	BR			Repair sinus of Valsalva aneurysm, with bypass			
Myocardial operation combined with coronary bypass procedure				TOTAL ANOMALOUS PULMONARY VENOUS DRAINAGE			
33570	60.0	90	15.0	33730	50.0	90	15.0
Coronary angioplasty (end arterectomy, with or without gas, arterial implantation or anastomosis), with bypass;				Complete repair of anomalous venous return (supracardiac, intracardiac, or infracardiac types)			
33575	68.0	90	15.0	(For partial anomalous return, see atrial septal defect)			
combined with vascularization				SHUNTING PROCEDURES			
((33600) Ventricular aneurysm, with bypass	52.0	90	15.0	33735	32.0	90	15.0
33620	BR+		BR+))	Atrial septectomy; closed (Blalock-Hanlon type operation)			
Cardiac transplant				open, with inflow occlusion	40.0	90	15.0
SEPTAL DEFECT				33738	50.0	90	15.0
33640	32.0	90	15.0	transvenous method, balloon, Rashkind type (includes cardiac catheterization)			
((Atrial)) Repair atrial septal defect, secundum(:); without bypass				33750	30.0	90	15.0
33641	46.0	90	15.0	Shunt; subclavian to pulmonary artery (Blalock-Taussig type operation)			
with bypass				33755	30.0	90	15.0
33643	30.0	90	15.0	ascending aorta to pulmonary artery (Waterston type operation)			
patch closure, with or without anomalous pulmonary venous drainage				33762	30.0	90	15.0
33645	30.0	90	15.0	descending aorta to pulmonary artery (Potts-Smith type operation)			
Direct or patch closure, sinus venosus, with or without anomalous pulmonary venous drainage				33766	30.0	90	15.0
33649	BR			vena cava to pulmonary artery (Glenn type operation)			
Repair of tricuspid atresia (eg, Fontan, Gago procedures)				TRANSPOSITION OF THE GREAT VESSELS			
33660	50.0	90	15.0	33782	50.0	90	15.0
((Endocardial)) Patch closure, endocardial cushion defect, with ((bypass)) or without repair of mitral and/or tricuspid cleft;				Repair transposition of great vessels, atrial baffle procedure (Mustard type); with bypass			
((33680) Transposition of great vessels, atrial baffle procedure (i.e., Mustard type), with bypass	BR+		15.0	33783	50.0	90	15.0
33700	50.0	90	15.0	with removal of pulmonary artery band, with or without gusset			
Ventricular septal defect, with bypass				33784	50.0	90	15.0
33740	50.0	90	15.0	with closure of ventricular septal defect			
Tetralogy of Fallot, with bypass				TRUNCUS ARTERIOSUS			
33760	50.0	90	15.0	33786	50.0	90	15.0
Sinus of Valsalva fistula, with bypass				Total repair, truncus arteriosus (Rastelli type operation)			
33780	32.0	90	15.0	33788	30.0	90	15.0
Anomalous coronary vessels, without bypass				Replant pulmonary artery for hemitruncus			
33781	50.0	90	15.0	(For pulmonary artery band, see 33690)			
with bypass				AORTIC ANOMALIES			
33800	50.0	90	15.0	33802	18.0	90	15.0
Anomalous venous return, with bypass, total				Division of aberrant vessel (vascular ring);			
33805	46.0	90	15.0))	with reanastomosis	20.0	90	15.0
partial, with or without atrial septal defect, with bypass				33810	20.0	90	15.0
33665	35.0	90	15.0	Creation of aortopulmonary window; without bypass			
with repair of separate ventricular septal defect				with bypass	30.0	90	15.0
33670	50.0	90	15.0	33812			
Repair of complete atrioventricular canal, with or without prosthetic valve				33820	15.0	90	15.0
33681	35.0	90	15.0	Patent ductus arteriosus; ligation (primary procedure)			
Closure ventricular septal defect; direct							
33682	50.0	90	15.0				
patch							
33684	50.0	90	15.0				
with pulmonary valvotomy or infundibular resection (acyanotic)							

	Unit Value	Follow-up Days=	Basic Anes@
33822 division, under 18 years	18.0	90	15.0
33824 division, 18 years and older . . .	20.0	90	15.0
33830 ligation or division when performed with another procedure	5.0		
33840 Excision of coarctation of aorta, with or without associated patent ductus arteriosus; with direct anastomosis	20.0	90	15.0
33845 with graft	30.0	90	15.0
33850 with shunt, left subclavian to descending aorta (Blalock-Park type operation)	30.0	90	15.0

THORACIC AORTIC ANEURYSM

33860 Ascending aorta graft, with bypass; with or without valve suspension	40.0	90	15.0
33865 with valve replacement	50.0	90	15.0
33870 Transverse arch graft, with bypass	60.0	90	15.0
33875 Descending thoracic aorta graft, with or without bypass	20.0	90	15.0

PULMONARY ARTERY

33910 Pulmonary artery embolectomy; with bypass	30.0	90	15.0
33915 without bypass	20.0	90	15.0

MISCELLANEOUS

33950 Cardiac transplantation, including removal of donor heart	BR		
33960 Prolonged extracorporeal circulation for cardiopulmonary insufficiency	BR		
33970 Intra-aortic balloon counterpulsation; insertion and removal	10.0	10	29
33972 monitoring only	BR		
33999 Unlisted procedure, cardiac surgery	BR		

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-125 ARTERIES AND VEINS.

	Unit Value	Follow-up Days=	Basic Anes@
((Incision))			
ARTERIAL EMBOLECTOMY OR THROMBECTOMY, WITH OR WITHOUT CATHETER			
34001 Embolectomy or thrombectomy, with or without catheter; carotid, subclavian artery, by neck incision	14.0	60	6.0
34051 innominate, subclavian artery, by thoracic incision	14.0	60	11.0
34101 axillary, brachial, innominate, subclavian artery, by arm incision	14.0	60	5.0
((34000 Direct, carotid	14.0	60	6.0
34005 subclavian	14.0	60	6.0
			Cervical
			Thoracic
			11.0
34010 axillary-brachial	14.0	60	5.0
34015 innominate	18.0	60	12.0
34020 renal	20.0	60	6.0
34025 celiac or mesenteric	20.0	60	6.0
34030 aorta-iliac	20.0	60	6.0

	Unit Value	Follow-up Days=	Basic Anes@
34035 femoral-popliteal	14.0	60	5.0
34040 pulmonary, without bypass	28.0	60	15.0
34045 with bypass	34.0	60	15.0
34200 Catheter, subclavian	14.0	60	4.0
34205 axillary-brachial	14.0	60	4.0
34210 aorta-iliac	16.0	60	4.0
34215 femoral-popliteal	14.0	60	4.0
34151 renal, celiac, mesentery, aortoiliac artery, by abdominal incision	20.0	60	6.0
34201 femoropopliteal, aortoiliac artery, by leg incision	14.0	60	5.0

((Venous Thrombectomy—direct or with catheter

34400 Vena cava and/or iliac, abdominal approach	18.0	60	5.0
34420 Extremity	12.0	60	3.0
34440 Combined vena cava and extremity, inguinal approach	20.0	60	4.0
34445 inguinal and abdominal approach	24.0	60	5.0

VENOUS THROMBECTOMY, DIRECT OR WITH CATHETER

34401 Thrombectomy, direct or with catheter; vena cava, iliac vein, by abdominal incision	18.0	60	5.0
34421 vena cava, iliac, femoropopliteal vein, by leg incision	12.0	60	3.0
34451 vena cava, iliac, femoropopliteal vein, by abdominal and leg incision	24.0	60	5.0
34471 subclavian vein, by neck incision	28.0	60	5.0
34490 axillary and subclavian vein, by arm incision	28.0	60	5.0

((Excision)) DIRECT REPAIR OF ANEURYSM, OR EXCISION (PARTIAL OR TOTAL) AND GRAFT INSERTION FOR ANEURYSM FALSE ANEURYSM, OR OCCLUSIVE DISEASE

Sympathectomy, when done, is included in the listed value for aortic procedures. When done in conjunction with extremity artery procedure, see WAC 296-22-010, item 7a and modifier -50.

((Excision and Graft or Direct Repair))

(For intracranial aneurysm, see ((61540-61565)) 61700 et seq.)

(For thoracic aortic aneurysm, see 33860-33875)

((35000 Aneurysm or occlusive disease, carotid	28.0	90	6.0
35010 axillary-brachial	28.0	90	5.0
35020 subclavian	30.0	90	6.0
			Cervical
			Thoracic
			11.0
35030 innominate	32.0	90	12.0
35040 ascending arch, with or without valve suspension, with bypass	BR+		15.0
35045 with valve replacement	BR+		15.0
35050 transverse arch, with bypass	BR+		15.0
35060 descending thoracic aorta, without bypass	48.0	90	15.0
35065 with bypass	56.0	90	15.0
35070 abdominal aorta	40.0	90	12.0
35075 involving visceral vessels	BR+		12.0
35078 involving iliac vessels	40.0	90	12.0
35080 splenic artery	24.0	90	6.0
35090 hepatic, celiac or mesenteric			

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
artery	40.0	90	6.0				
35100 renal artery, unilateral	32.0	90	10.0	35320 Subclavian			Cervical
35101 bilateral	40.0	90	10.0		30.0	90	6.0
35110 iliac artery	32.0	90	6.0				Thoracic
35120 common femoral artery	28.0	90	5.0				11.0
35130 popliteal artery	28.0	90	5.0	35330 Innominate	32.0	90	12.0
35200 A-V fistula, neck	28.0	60	6.0	35340 Abdominal aorta	40.0	90	12.0
35210 chest	34.0	90	11.0	35350 Mesenteric or celiac	40.0	90	6.0
35220 abdomen	34.0	90	5.0	35360 Renal, unilateral	32.0	90	10.0
35230 extremity	28.0	60	3.0	35361 bilateral	40.0	90	10.0
35370 Iliac				35370 Iliac	32.0	90	6.0
35380 Combined aorto-iliac				35380 Combined aorto-iliac	40.0	90	12.0
35390 Common and/or deep (profunda) femoral				35390 Common and/or deep (profunda) femoral	28.0	90	5.0
35400 Femoral and/or popliteal				35400 Femoral and/or popliteal	28.0	90	5.0
35001 Direct repair of aneurysm or excision (partial or total) and graft insertion, with or without patch graft, for aneurysm or occlusive disease; carotid, subclavian artery, by neck incision	28.0	90	6.0	35301 Thromboendarterectomy, with or without patch graft; carotid, vertebral, subclavian, by neck incision	30.0	90	6.0
35011 axillary-brachial artery, by arm incision	28.0	90	5.0	35311 subclavian, innominate, by thoracic incision	30.0	90	11.0
35021 innominate, subclavian artery, by thoracic incision	32.0	90	12.0	35321 axillary-brachial	30.0	90	5.0
35081 abdominal aorta	40.0	90	12.0	35331 abdominal aorta	40.0	90	12.0
35091 abdominal aorta involving visceral vessels (mesenteric, celiac, renal)	BR		12.0	35341 mesenteric, celiac, or renal	40.0	90	6.0
35102 abdominal aorta involving iliac vessels (common, hypogastric, external)	40.0	90	12.0	35351 iliac	32.0	90	6.0
35111 splenic artery	24.0	90	6.0	35361 combine aortoiliac	40.0	90	12.0
35121 hepatic, celiac, renal, or mesenteric artery	40.0	90	6.0	35371 common and/or deep (profunda) femoral	28.0	90	5.0
35131 iliac artery (common, hypogastric, external)	32.0	90	6.0	35381 femoral and/or popliteal, and/or tibioperoneal	28.0	90	5.0
35141 common femoral artery (profunda femoris, superficial femoral)	28.0	90	5.0				
35151 popliteal artery	28.0	90	5.0	BYPASS GRAFT--VEIN ((or synthetic graft))			
35161 other arteries (eg, radial, brachial, ulnar)	BR			((35500))35501 Bypass graft, vein; carotid	30.0	90	6.0
				((35510))35506 carotid-subclavian	30.0	90	6.0
							((Cervical))
							((Thoracic))
							((+/-))
				35507 subclavian-carotid	30.0	90	6.0
				35509 carotid-carotid	30.0	90	11.0
				35511 subclavian-subclavian	30.0	90	11.0
				((35520))35516 subclavian-axillary	30.0	90	6.0
							((Thoracic))
							((+/-))
				((35530))35521 axillary-femoral	30.0	90	5.0
				((35540))35526 ((Aorto-subclavian)) aortosubclavian or carotid	32.0	90	12.0
				((35550))35531 ((Aorto-ceeliac or)) aortoceliac, mesenteric, or renal	36.0	90	12.0
				((35560) Aorto-renal, unilateral	32.0	90	12.0
				35561 bilateral	40.0	90	12.0
				((35570))35536 ((Spleno-renal)) splenorenal	32.0	90	10.0
				((35580))35541 ((Aorto-iliac, unilateral)) aortoiliac	32.0	90	12.0
				((35581) bilateral	40.0	90	12.0
				((35590))35546 ((Aorto-femoral, unilateral)) aortofemoral	32.0	90	12.0
				((35591) bilateral	40.0	90	12.0
				35548 aortoiliofemoral, unilateral	32.0	90	12.0
				35549 aortoiliofemoral, bilateral	40.0	90	12.0
				((35600))35551 ((Aorto-femoral)) aorto-femoral-popliteal	40.0	90	12.0
REPAIR BLOOD VESSEL OR ARTERIOVENOUS FISTULA, WITH OR WITHOUT PATCH GRAFT							
35201 Repair blood vessels or A-V fistula, direct; neck	28.0	60	6.0				
35206 upper extremity	28.0	60	3.0				
35211 intrathoracic, with bypass	35.0	60	6.0				
35216 intrathoracic, without bypass	30.0	60	3.0				
35221 intra-abdominal	34.0	90	5.0				
35226 lower extremity	28.0	60	3.0				
35231 Repair blood vessel or A-V fistula with vein graft; neck	30.0	60	6.0				
35236 upper extremity	30.0	60	6.0				
35241 intrathoracic, with bypass	40.0	60	6.0				
35246 intrathoracic, without bypass	35.0	60	6.0				
35251 intra-abdominal	40.0	90	6.0				
35256 lower extremity	32.0	60	3.0				
35261 Repair blood vessel or A-V fistula with graft other than vein; neck	32.0	60	6.0				
35266 upper extremity	32.0	60	6.0				
35271 intrathoracic, with bypass	42.0	60	6.0				
35276 intrathoracic, without bypass	37.0	60	6.0				
35281 intra-abdominal	42.0	90	6.0				
35286 lower extremity	34.0	60	3.0				
THROMBOENDARTERECTOMY((with or without patch graft))							
(For coronary artery, see 33570, 33575)							
((35300) Carotid or vertebral	30.0	90	6.0				
35310 Axillary-brachial	30.0	90	5.0				

	Unit Value	Follow-up Days=	Basic Anes@
((35610))35556 femoral-popliteal((; unilateral))	28.0	90	5.0
((35611 bilateral	40.0	90	5.0)
((35620))35558 femoral-femoral ((bypass))	28.0	90	5.0
35563 ilioiliac	30.0	90	12.0
35565 iliofemoral	32.0	90	12.0
35566 femoral-anterior tibial, posterior tibial, or peroneal artery	30.0	90	12.0
35571 popliteal-tibial	32.0	90	12.0

BYPASS GRAFT—WITH OTHER THAN VEIN INCLUDING MANDRIL GROWN GRAFT

35601 Bypass graft, with other than vein, carotid	40.0	90	12.0
35606 carotid-subclavian	40.0	90	12.0
35612 subclavian-subclavian	40.0	90	12.0
35616 subclavian-axillary	35.0	90	12.0
35621 axillary-femoral	35.0	90	12.0
35626 aortosubclavian or carotid	35.0	90	12.0
35631 aortoceliac, mesenteric, renal	35.0	90	12.0
35636 splenorenal	35.0	90	12.0
35641 aortoiliac	35.0	90	12.0
35646 aortofemoral	30.0	90	12.0
35651 aortofemoral-popliteal	30.0	90	12.0
35656 femoral-popliteal	28.0	90	5.0
35661 femoral-femoral	28.0	90	5.0
35663 ilioiliac	28.0	90	5.0
35665 iliofemoral	28.0	90	5.0
35666 femoral-anterior tibial, posterior tibial, or peroneal artery	28.0	90	5.0
35671 popliteal-tibial	28.0	90	5.0

EXPLORATION (NOT FOLLOWED BY SURGICAL REPAIR) WITH OR WITHOUT LYSIS OF ARTERY

((35700))35701 Exploration; carotid artery	10.0	30	3.0
((35720))35721 femoral artery	8.0	30	3.0
((35740))35741 popliteal artery	8.0	30	3.0
((35760))35761 Other vessels	BR+		BR+

EXPLORATION FOR ((Post-operative)) POSTOPERATIVE HEMORRHAGE OR THROMBOSIS

35800 ((Neck)) Exploration for postoperative hemorrhage or thrombosis; neck	BR+		BR+
35820 chest	BR+		BR+
35840 abdomen	BR+		BR+
35860 extremity	BR+		BR+

EXCISION OF GRAFT

35900 Excision of infected graft;	BR
35910 with revascularization	BR

Introduction

((Injection Procedures for Vascular Radiology)) VASCULAR INJECTION PROCEDURES

NOTES

Listed ((values)) services for injection procedures include necessary local anesthesia, introduction of needles or catheter, ((necessary local anesthesia;)) injection of contrast medium with or without automatic power injection and necessary pre- and post-injection care specifically related to the injection procedure.

((Vascular injection procedures are listed according to site and method of injection (needle or catheter), rather than for a specific radiographic procedure, since a specific injection procedure may be used in conjunction with various radiographic procedures.))

For radiological vascular injection performed by a single physician as a complete procedure (necessary local anesthesia, placement of needle or catheter and injection of contrast media, and supervision of the study and interpretation of results), see RADIOLOGY section, code numbers 75500-75893.

((Cost of)) Catheters, drugs and contrast media ((is)) are not included in the listed ((value)) service for the injection procedures.

((An intracatheter, as used in the following procedures, refers to a sheathed combination of needle and short catheter.))

(For injection procedures in conjunction with cardiac catheterization, see ((93540)) 93541-93545)

For chemotherapy of malignant disease, see 90790-90793

INTRAVENOUS((:))

(An intracatheter is a sheathed combination of needle and short catheter)

36000 Introduction of needle or intracatheter, vein; unilateral	1.0	0	
36001 bilateral	1.4	0	
36010 Introduction of catheter((; by placement)); in superior or inferior vena cava, right heart or pulmonary artery	2.0	0	3.0
((36020 by selective catheterization of renal, adrenal, hepatic, etc., veins	4.0	0	3.0
36030 intraosseous	1.0	0	0)

(For venous catheterization for selective organ blood sampling, see 36500)

INTRA-ARTERIAL—INTRA-AORTIC((:))

36100 Introduction of needle or ((intracatheter technique)) intracatheter, carotid or vertebral((:)) artery; unilateral	5.0	0	3.0
36101 bilateral	6.0	0	3.0
36120 Introduction of needle or intracatheter; retrograde brachial artery	5.0	0	3.0
36140 extremity artery	2.0	0	3.0
36145 Arteriovenous shunt for dialysis (cannula, fistula or graft)	1.0	0	3.0
36160 ((aortic, translumbar)) Introduction of needle or intracatheter, aortic, translumbar	3.0	0	3.0
36200 Introduction of catheter ((technique)); aorta (arch, abdominal, midstream renal, aorto-iliac runoff((; etc.))	4.0	0	3.0
36210 cerebral artery, selective, single ((artery))	5.8	0	3.0
36220 multiple cerebral arteries, with or without midstream arch injection	7.0	0	3.0
36230 coronary artery, selective, unilateral or bilateral	6.0	0	7.0
36240 renal, celiac, mesenteric or other artery, selective, single ((artery)), with or without midstream injection	5.0	0	3.0
36250 bilateral renal or multiple arteries	6.0	0	3.0
36299 Unlisted procedure, vascular injection			BR

Unit Follow-up Basic Unit Follow-up Basic Value Days= Anes@ Value Days= Anes@

VENOUS

Table with columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Includes codes 36400-36510 and descriptions for venipuncture, transfusion, and catheterization.

ARTERIAL

Table with columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Includes codes 36600 and 36620 for arterial puncture and catheterization.

Table with columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Includes codes 36625, 36640, and 36660 for arterial catheterization and umbilical artery catheterization.

INTERVASCULAR CANNULIZATION OR SHUNT ((independent)) SEPARATE PROCEDURE

Table with columns: Code, Description, Unit Value, Follow-up Days, Basic Anes@. Includes codes 36800-37190 for various vascular procedures like cannula insertion, arteriovenous fistula, and shunts.

	Unit Value	Follow- up Days=	Basic Anes@	
((Suture)) REPAIR, LIGATION AND OTHER PROCEDURES				
37400	Arteriorrhaphy((suture of wound or injury of major artery (independent procedure), neck)) suture of major artery, wound or injury (separate procedure); neck	12.0	30	6.0
37420	chest	20.0	60	15.0
37440	abdomen	20.0	60	9.0
37460	extremity	10.0	30	4.0
37470	Repair multiple arteries and/or veins	BR		
37500	Phleborrhaphy((suture of wound or injury of major vein (independent procedure), neck)) suture of major vein, wound or injury (separate procedure); neck	10.0	30	6.0
37520	chest	20.0	60	12.0
37540	abdomen	20.0	60	6.0
37560	extremity	8.0	30	3.0
37565	Ligation of internal jugular vein.	BR		
37600	Ligation ((of), external carotid artery	10.0	30	3.0
37605	internal or common carotid ar- tery	10.0	30	3.0
37606	internal or common carotid ar- tery, with gradual occlusion, as with Selverstone or Crutchfield clamp	10.0	30	4.0
37609	Ligation or biopsy, temporal ar- tery	4.0	30	4.0
37615	Ligation, major artery (eg, post- traumatic, rupture); neck	BR		
37616	chest	BR		
37617	abdomen	BR		
37618	extremity	BR		
	(For application of carotid clamp, see 61565)			
37620	Interruption, partial or complete, of inferior vena cava by suture, ligation, plication, clip, extravascular, intravascular (um- brella device)	16.0	90	5.0
37650	Interruption, partial or complete, of femoral vein, by ligature, in- travascular device; unilateral	8.0	30	3.0
37651	bilateral	10.0	30	3.0
37660	Interruption, partial or complete, of common iliac vein by ligature, intravascular device	12.0	90	3.0
(37620)	Ligation and/or division of in- ferior vena cava	16.0	90	5.0
37625	plication or clipping of vena cava	16.0	90	5.0
37650	Ligation of femoral vein	8.0	30	3.0
37660	Ligation and/or division of com- mon iliac vein	12.0	90	3.0))
37700	Ligation and division of long saphenous vein (at saphenofemoral junction, ((with or without retrograde injection)) or distal interruptions; unilateral	4.8	30	3.0
37701	bilateral	6.0	60	3.0
37720	Ligation and division and com- plete stripping of long or short saphenous veins((:)); unilateral	7.0	30	3.0
37721	bilateral	12.0	30	3.0
37730	Ligation and division and complete stripping of long and short saphenous veins((:));			

	Unit Value	Follow- up Days=	Basic Anes@	
37731	unilateral	10.0	30	3.0
37735	bilateral	14.5	30	3.0
37737	Ligation and division and com- plete stripping of long or short saphenous veins with radical ex- cision of ulcer and skin graft and/or interruption of communi- cating veins of lower leg, with excision of deep fascia; unilater- al	18.0	30	3.0
37760	bilateral	22.0	30	3.0
37770	((Radical subfascial stripping (i.e., Linton type), with or with- out skin graft)) Ligation of per- forators, subfascial, radical (Linton type), with or without skin graft	10.0	60	3.0
37780	Ligation and division of short saphenous vein at saphenopopliteal junction (((in- dependent)) separate procedure); unilateral	2.0	30	3.0
37781	bilateral	4.0	30	3.0
37785	Ligation and division of minor varicose vein of leg	1.2	15	3.0
37799	Unlisted procedure, vascular sur- gery	BR		

HEMIC AND LYMPHATIC SYSTEMS

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-130 SPLEEN.

	Unit Value	Follow- up Days=	Basic Anes@	
38090	Puncture spleen	10.0	45	6.0
38100	Splenectomy	14.5	45	6.0

INTRODUCTION

38200	Injection procedure for spleno- portography	2.0	7	3.0
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AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-135 LYMPH NODES AND LYMPHATIC CHANNELS.

	Unit Value	Follow- up Days=	Basic Anes@	
INCISION				
*38300	Drainage of lymph node abscess or lymphadenitis, simple	*0.6	0	3.0
38305	extensive	BR+		3.0
38308	Lymphangiomy or other opera- tions on lymphatic channels	BR		
38380	Suture and/or ligation of thorac- ic duct; cervical approach	BR		
38381	thoracic approach	BR		

EXCISION

38500	Biopsy or excision of lymph node; unspecified (((independent)) sep- arate procedure) (((except 38510, 38520, 38530)))	1.4	15	3.0
38510	deep, cervical node	3.4	30	3.0
38520	deep cervical node with exci- sion scalene fat pad	5.0	30	3.0

Unit Follow-up Basic
Value Days= Anes@

38530	internal mammary node ((<u>im-</u> <u>dependent</u>)) <u>separate</u> <u>procedure</u>	7.0	60	3.0
38550	Excision of cystic hygroma, axil- lary or cervical, without deep neurovascular dissection; <u>simple</u> .	6.0	60	3.0
38555	complex	BR+		3.0

**RADICAL LYMPHADENECTOMY
(RADICAL RESECTION OF LYMPH
NODES)**

38700	((<u>Supra-hyoid</u>);) <u>Suprahyoid</u> <u>lymphadenectomy</u> ; unilateral ...	12.0	60	4.0
38701	bilateral	15.0	60	4.0
38720	<u>Cervical lymphadenectomy</u> (complete)((:)); unilateral.....	19.0	60	4.0
38721	bilateral	22.0	60	4.0
38740	<u>Axillary(:)</u> <u>lymphadenectomy</u> ; superficial	8.0	60	3.0
38745	complete	14.0	60	3.0
38760	((<u>Inguinal</u>);) <u>Inguinofemoral</u> <u>lymphadenectomy</u> , superficial, <u>including Cloquet's node</u> (<u>sepa-</u> <u>rate procedure</u>); unilateral	8.0	60	3.0
38761	bilateral	12.0	60	3.0
38765	((<u>deep</u> , with <u>iliac lymphaden-</u> <u>ectomy</u>);) <u>Inguinofemoral lym-</u> <u>phadenectomy</u> , superficial, in continuity with pelvic <u>lymphea-</u> <u>denectomy</u> , including external <u>iliac hypogastric and obturator</u> <u>nodes</u> (<u>separate procedure</u>); unilateral	20.0	60	5.0
38766	bilateral	24.0	60	5.0
38770	<u>Pelvic lymphadenectomy</u> , includ- <u>ing external iliac, hypogastric,</u> <u>and obturator nodes</u> (<u>separate</u> <u>procedure</u>); unilateral	12.0	60	6.0
38771	bilateral	20.0	60	6.0
38780	<u>Retroperitoneal lymphadenec-</u> <u>tomy</u> , extensive, including pelvic, aortic, and renal ((<u>lymphadenec-</u> <u>tomy</u>)) <u>nodes</u> (<u>separate proce-</u> <u>dure</u>)	28.0	90	7.0

(For excision and repair of
lymphedematous skin and subcu-
taneous tissue, see 15000, 15500-
15730)

INTRODUCTION

38790	Injection procedure for lymphan- giography((:)); unilateral	3.0	7	
38791	bilateral	4.0	7	
38794	Cannulation, thoracic duct	BR		
38999	Unlisted procedure, hemic or lymphatic system.....	BR		

MEDIASTINUM AND DIAPHRAGM

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-140 MEDIASTINUM.

Unit Follow-up Basic
Value Days= Anes@

INCISION

39000	Mediastinotomy with exploration or drainage((:)); cervical ap- proach.....	6.0	90	6.0
39010	transthoracic((-intercostal))..	12.0	90	12.0
39020	sternal split	22.0	90	12.0
39050	<u>Removal of foreign body</u> , ((<u>re-</u> <u>moval</u>);) <u>mediastinum</u> ; cervical approach	8.0	90	6.0
39060	transthoracic((-intercostal))..	12.0	90	12.0
39070	sternal split	22.0	90	12.0

EXCISION

39200	Excision of mediastinal cyst	18.0	90	12.0
39220	Excision of mediastinal tumor ..	18.0	90	12.0

(For substernal thyroidectomy,
see 60270)

(For thymectomy, see 60520)

39240	Ligation of thoracic duct, cer- vical approach	10.0	90	6.0
39245	transthoracic approach	20.0	90	12.0

ENDOSCOPY

39400	Mediastinoscopy, with or without biopsy	BR+		3.0
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REPAIR

39499	Unlisted procedure, media- stinum	BR		
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AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-141 DIAPHRAGM.

Unit Follow-up Basic
Value Days= Anes@

REPAIR

39500	Repair, diaphragmatic hernia, (<u>esophageal hiatal</u>), transabdominal, including fundoplasty((:)); except neonatal, neonatal, including chest tube and ventral hernia re- pair	17.0	90	6.0
39510	Repair, diaphragmatic hernia (<u>esophageal hiatal</u>); transthoracic	22.0	90	7.0
39520	Repair, diaphragmatic hernia (<u>esophageal hiatal</u>); transthoracic	17.0	90	11.0
39530	combined, ((<u>thoraco-abdomi-</u> <u>nal</u>)) <u>thoracoabdominal</u>	19.0	90	11.0
39531	combined, <u>thoracoabdominal</u> , with dilation of stricture (with or without gastrectomy)	BR	11.0	
39540	Repair, diaphragmatic hernia (other than neonatal), traumati- c((:)); acute	BR+		13.0
39541	chronic	BR		
39545	Imbrication of diaphragm for eventration; paralytic	22.0	90	7.0
39547	nonparalytic	BR		
39599	Unlisted procedure, diaphragm..	BR		

(For incidental repair of minor
hiatal hernia, see WAC 296-22-
010, item 7b)

DIGESTIVE SYSTEM

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-146 LIPS.

	Unit Value	Follow-up Days=	Basic Anes@
<u>(For procedures on skin of lips, see 10000 et seq.)</u>			
EXCISION			
((For excision of mucocle or other small lesion of lip, see 11400-11460, 13000-13300))			
((For biopsy, see 11100))			
40490	0.6	7	3.0
40500	10.5	120	3.0
40510	10.5	120	3.0
40520	6.0	120	3.0
<u>(For excision of mucous lesions, see 40810-40814)</u>			
40530	6.0	120	3.0
<u>(For lip reconstruction ((except 40520), primary or secondary, see 13000-15760)) see 13131 et seq.)</u>			
REPAIR (CHEILOPLASTY)			
40650	BR		
40652	BR		
40654	BR		
40700	16.0	90	6.0
40701	20.0	90	6.0
40702	14.0	90	6.0
<u>(For secondary, local revision, unilateral or bilateral, see 13000-15760)</u>			
40720	16.0	90	6.0
40740	14.0	90	6.0
<u>(For plastic or reconstruction operation on lip, see 13000-15760)</u>			
40760	BR		
40761	BR		

(For repair cleft palate, see 42200 et seq.)

(For other reconstructive procedures, see 14060, 14061, 15120-15261, 15515 et seq.)

OTHER PROCEDURES

40799 Unlisted procedure, lips BR

NEW SECTION

WAC 296-22-147 VESTIBULE OF MOUTH.

	Unit Value	Follow-up Days=	Basic Anes@
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The vestibule is the part of the oral cavity outside the dentoalveolar structures; it includes the mucosal and submucosal tissue of lips and cheeks.

INCISION

40800*	0.4	0	4.0
	BR	0	4.0
40801	0.4	0	4.0
40804*	BR		
40805	BR		
40806	Sv		

EXCISION, DESTRUCTION

40808	0.6	0	4.0
40810	0.6	0	4.0
40812	1.0	0	4.0
40814	BR	0	4.0
40816	BR	0	4.0
40818	BR	0	4.0
40819	BR	0	4.0
40820	BR	0	4.0

REPAIR

40830	0.4	0	4.0
40831	0.4	0	4.0
40840	BR	0	4.0
40842	BR	0	4.0
40843	BR	0	4.0
40844	BR	0	4.0
40845	BR	0	4.0

(For skin grafts, see 15000 et seq.)

OTHER PROCEDURES

40899 Unlisted procedure, vestibule of mouth BR

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-150 TONGUE, FLOOR OF MOUTH.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION ((Glossotomy))			
*41000 ((Drainage of lingual abscess)) Incision and drainage of intraoral abscess, cyst, or hematoma of tongue or floor of mouth; lingual	*0.4	0	3.0
41005* sublingual, superficial	0.4	0	4.0
41006 sublingual, deep, supramylohyoid	BR	0	4.0
41007 submental space	BR	0	4.0
41008 submandibular space	BR	0	4.0
41009 masticator space	BR	0	4.0
41010 Incision of lingual frenum (frenotomy)	0.4	15	4.0
41015 Incision and drainage of extraoral abscess, cyst, or hematoma of floor of mouth; sublingual	0.6	15	4.0
41016 submental	BR		4.0
41017 submandibular	BR		4.0
41018 masticator space	BR		4.0
(For frenoplasty, see 41520)			
EXCISION ((Glossectomy))			
41100 Biopsy of tongue, anterior two-thirds	((0-6)) 1.0	15	3.0
41105 posterior ((two-thirds)) one-third	((1-0)) 0.6	15	3.0
41108 Biopsy, floor of mouth	1.0	15	4.0
41110 Excision lesion of tongue; without closure	BR		4.0
41112 with closure, anterior two-thirds	BR		4.0
41113 with closure, posterior one-third	BR		4.0
41115 Excision of lingual frenum (frenectomy)	BR		4.0
41116 Excision lesion of floor of mouth	BR		4.0
41120 Glossectomy((-partial (less than one-half tongue)); less than one-half tongue)	8.0	120	6.0
41130 Hemiglossectomy	12.0	120	6.0
41135 partial, with unilateral radical neck dissection	20.0	120	6.0
41140 ((Glossectomy;)) complete or total, with or without ((tracheotomy)) tracheostomy, without radical neck dissection	18.0	120	6.0
41145 ((partial or total, including unilateral radical neck dissection)) complete or total, with or without tracheostomy, with unilateral radical neck dissection	26.0	120	6.0
41150 ((more complex (c.g., mandibular resection))) composite procedure with resection floor of mouth and mandibular resection, without radical neck dissection	BR+		6.0
41155 composite procedure with resection floor of mouth, mandibular resection, and radical neck dissection (Commando type)	BR	120	6.0

REPAIR

	Unit Value	Follow-up Days=	Basic Anes@
41250* Repair laceration up to 2 cm; floor of mouth and/or anterior two-thirds of tongue	1.0	0	4.0
41251* posterior one-third of tongue	1.0	0	4.0
41252* Repair laceration of tongue, floor of mouth, over 2 cm or complex	BR		4.0
((Introduction))			
OTHER PROCEDURES			
41500 ((Mechanical fixation of tongue)) Fixation tongue, mechanical, other than suture ((c.g.)) eg, K-wire	5.0	30	3.0
((Repair (Glossoplasty))			
41510 Suture tongue to lip for micrognathia (Douglas type procedure)	10.0	30	3.0
41520 Frenoplasty (surgical revision of frenum, eg, with Z-plasty)	BR		
(For frenotomy, see 40806, 41010)			
41599 Unlisted procedure, tongue, floor of mouth	BR		
(For plastic repair of tongue, see 13000-15760)			
(For frenuloplasty, see 13000, 13140, 14040)			
((Suture (Glossorrhaphy))			
(For suture of injury, see 12020, 12140, 12240, 13000-13300)			
DENTOALVEOLAR STRUCTURES			
AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)			
WAC 296-22-155 TEETH AND GUMS.			
	Unit Value	Follow-up Days=	Basic Anes@
(For biopsy, see 11100)			
INCISION			
*41800 Drainage ((of alveolar or periapical abscess, acute with cellulitis, intraoral)) abscess, cyst, hematoma	*0.4	0	3.0
((41900 Dental surgery			3.0))
41805 Removal embedded foreign body; from soft tissues	0.8	0	3.0
41806 from bone	2.0	0	3.0
EXCISION, DESTRUCTION			
41820 Gingivectomy, excision gingiva, each quadrant	BR		
41821 Operculectomy, excision pericoronal tissues	BR		
41822 Excision fibrous tuberosities	BR		
41823 Excision osseous tuberosities	BR		
41825 Excision of lesion or tumor (except listed above); without repair	BR		
41826 with simple repair	BR		
41827 with complex repair	BR		
(For nonexcisional destruction, see 41850)			

	Unit Value	Follow-up Days=	Basic Anes@
41828 <u>Excision of hyperplastic alveolar mucosa, each sextant or quadrant (specify)</u>	BR		
41830 <u>Alveolectomy, including curettage of osteitis or sequestrectomy</u>	BR		
41850 <u>Destruction of lesion (except excision)</u>	BR		
OTHER PROCEDURES			
41870 <u>Periodontal mucosal grafting . . .</u>	BR		
41872 <u>Gingivoplasty</u>	BR		
41874 <u>Alveoplasty</u>	BR		
<i>(For closure of lacerations, see 40830, 40831)</i>			
<i>(For segmental osteotomy, see 21202, 21206)</i>			
<i>(For reduction of fractures, see 21420-21490)</i>			
41899 <u>Unlisted procedure, dentoalveolar structures</u>	BR		

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)
WAC 296-22-160 PALATE ((AND)), UVULA.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
*42000 <u>((Incision and)) Drainage of abscess of palate, uvula</u>	*0.4	0	3.0
EXCISION, DESTRUCTION			
42100 <u>Biopsy of palate, uvula</u>	0.6	7	3.0
42104 <u>Excision lesion of palate, uvula; without closure</u>	BR		
42106 <u>with closure</u>	BR		
<i>(For skin graft, see 14040-14300)</i>			
<i>(For mucosal graft, see 40818)</i>			
<i>(For excision of local lesion of palate, see 11440-11442, 11640-11660)</i>			
<i>(For graft or flap closure, see 14040-14300, 15050, 15120, 15240, 15510-15720)</i>			
42120 <u>Resection of palate or extensive excision of lesion ((of palate)) . .</u>	BR +		6.0
<i>(For ((resection)) reconstruction of palate with ((reconstruction; see)) extraoral tissue, see 14040-14300, 15050, 15120, 15240, 15510-15720)</i>			
*42140 <u>Uvulectomy: excision of uvula . .</u>	*0.6	0	3.0
42150 <u>Removal exostosis bony palate . .</u>	BR		
42160 <u>Destruction of lesion, palate or uvula (thermal, cryo or chemical)</u>	BR		
REPAIR			
42180 <u>Repair laceration of palate; up to 2 cm</u>	BR		
42182 <u>over 2 cm or complex</u>	BR		

	Unit Value	Follow-up Days=	Basic Anes@
42200 <u>Palatoplasty((plastic operation)) for cleft palate, soft and/or hard palate only</u>	16.0	90	6.0
42205 <u>Palatoplasty for cleft palate, with closure of alveolar ridge((:)); soft tissue only</u>	20.0	90	6.0
42210 <u>with bone graft to alveolar ridge ((includes obtaining graft))</u>	22.0	90	6.0
<i>(For obtaining bone graft by second surgeon, see WAC 296-22-010, item 5c and modifier -64)</i>			
42215 <u>Palatoplasty for cleft palate; major revision</u>	16.0	90	6.0
42220 <u>secondary lengthening procedure</u>	17.0	90	6.0
42225 <u>attachment pharyngeal flap . . .</u>	17.0	90	6.0
42235 <u>Repair anterior palate, including vomer flap</u>	16.0	90	6.0
42250 <u>Repair oroantral or oronasal fistula, up to 1 cm</u>	BR		4.0
<i>(For repair of larger defect, see 42215)</i>			
42260 <u>Repair nasolabial fistula</u>	BR		4.0
<i>(For repair cleft lip, see 40700 et seq.)</i>			

OTHER PROCEDURES

42299 <u>Unlisted procedure, palate, uvula</u>	BR		
<i>(For secondary minor revision, see 13000-14300)</i>			
Suture			
<i>(For suture of palate injury, see 13000-14300)</i>			

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)
WAC 296-22-165 SALIVARY GLANDS AND DUCTS.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
*42300 <u>Drainage ((of parotid abscess; simple)) abscess; parotid, simple</u>	*1.4	0	3.0
42305 <u>parotid, complicated</u>	BR +		3.0
*42310 <u>((Drainage of)) submaxillary ((duct)) or sublingual ((gland abscess)), intraoral</u>	*1.0	0	3.0
42320 <u>((Drainage of submaxillary abscess, external, requiring general anesthesia)) submaxillary, external</u>	3.0	0	3.0
42325 <u>Fistulization sublingual salivary cyst (ranula);</u>	BR		
42326 <u>with prosthesis</u>	BR		
*42330 <u>Sialolithotomy((:)); submandibular (submaxillary), sublingual, or parotid, uncomplicated, intraoral</u>	*0.6	0	3.0
42335 <u>((submaxillary, complicated)) submandibular (submaxillary) or sublingual, complicated . . .</u>	2.4	30	3.0
42340 <u>parotid, extraoral or complicated intraoral</u>	6.0	30	3.0

EXCISION

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@		
*42400	Biopsy ((of) salivary gland(:); needle	*0.8	0						
42405	incisional	2.0	30	3.0					
42408	Excision sublingual salivary cyst (ranula)	BR		42725	parapharyngeal, intraoral approach retropharyngeal or parapharyngeal, external approach	2.4	15	3.0	
42409	Marsupialization sublingual salivary cyst (ranula)	BR				BR+		3.0	
	(For fistulization of sublingual salivary cyst, see 42325)								
42410	Excision of parotid tumor or parotid gland(, superficial, without nerve dissection); lateral lobe, without nerve dissection	6.0	60	3.0					
42415	lateral lobe, with ((nerve)) dissection and preservation of facial nerve	14.5	60	3.0					
42420	((Excision of parotid gland)) total, with dissection and preservation of facial nerve	18.0	60	3.0					
42425	total, en bloc removal with sacrifice of facial nerve	12.0	60	3.0					
42426	total, with unilateral radical neck dissection	25.0	60	3.0					
42440	Excision ((of) submandibular (submaxillary ((tumor and/or)) gland	10.0	60	3.0					
42450	Excision ((of) sublingual gland ((or tumor))	5.5	60	3.0					
REPAIR									
42500	Plastic repair ((of) salivary duct, (sialodochoplasty)(:); primary(:) or simple	7.0	60	3.0					
42505	secondary or complicated	BR+		3.0					
42507	Parotid duct diversion, bilateral (Wilke type procedure);	BR							
42508	with excision of one submandibular gland	BR							
42509	with excision of both submandibular glands	BR							
((Introduction)) OTHER PROCEDURES									
42550	Injection procedure for sialography	0.4	0						
((Suture))									
42600	Closure ((of) salivary fistula	BR+		3.0					
((Manipulation))									
*42650	Dilation ((of) salivary duct ((ptyalactasis)))	*0.3	0	3.0					
42660*	Dilation and catheterization of salivary duct, with or without injection	.5							
42665	Ligation salivary duct, intraoral	BR							
42699	Unlisted procedure, salivary glands or ducts	BR							
AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)									
WAC 296-22-170 PHARYNX, ADENOIDS AND TONSILS.									
	Unit Value	Follow-up Days=	Basic Anes@						
INCISION									
*42700	((Drainage of peritonsillar abscess)) Incision and drainage abscess; peritonsillar	*0.6	0	3.0					
42720	((Drainage of)) retropharyngeal or ((parapharyngeal abscess))								
					42800	Biopsy ((of); oropharynx	0.8	7	3.0
					42802	hypopharynx	1.4	7	3.0
					42804	nasopharynx, visible lesion, simple	1.0	7	3.0
					42806	nasopharynx, survey for unknown primary lesion	BR		
						(For laryngoscopic biopsy, see 31510, 31535, 31536)			
					42808	Excision of lesion of pharynx	BR		
					42809	Removal of foreign body from pharynx	BR		
						((For larynx, see 31510, 31535))			
						((For excision of pharyngoesophageal diverticulum, see 43130))			
					42810	Excision branchial cleft cyst or vestige(:); confined to skin and subcutaneous tissues	4.0	30	3.0
					42815	extending beneath subcutaneous tissues	10.0	30	3.0
					((42840) 42820	Tonsillectomy((, with or without)) and adenoidectomy(:); under age 12 years	4.0	30	3.0
					((42841) 42821	age 12 or over	4.8	30	3.0
					42825	Tonsillectomy, primary or secondary; under age 12	3.5	30	3.0
					42826	age 12 or over	4.0	30	3.0
					((42850) 42830	Adenoidectomy ((independent procedure)), primary ((or secondary)); under age 12	2.8	30	3.0
					42831	age 12 or over	3.0	30	3.0
					42835	Adenoidectomy, secondary; under age 12	2.8	30	3.0
					42836	age 12 or over	3.0	30	3.0
					42860	Excision of tonsil ((tag(s)) tags	2.8	30	3.0
					42870	Excision ((of) lingual tonsil ((independent)) separate procedure	4.8	30	3.0
					42880	Excision of nasopharyngeal lesion (eg, fibroma)	BR+		3.0
						(For excision and repair of hypopharyngeal diverticulum, cervical approach, see 43130; for endoscopic approach, see 43225)			
					42890	Limited pharyngectomy; without radical neck dissection	BR		
					42895	with radical neck dissection	BR		
					((Suture)) Repair				
					42900	((Suture of wound or injury of pharynx)) Suture pharynx for wound or injury	BR+		3.0
					((Repair))				
					42950	Pharyngoplasty(:) (plastic or reconstructive operation on pharynx)	BR+		3.0

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
(For pharyngeal flap, see 42225)				43120	Esophagogastrectomy (lower-third), combined ((thoraco-abdominal)) thoracoabdominal with or without pyloroplasty . . .	29.0	90 12.0
OTHER PROCEDURES				43130	Diverticulectomy((-cervical approach)) hypopharynx or esophagus, with or without myotomy; cervical approach	14.0	90 6.0
42955 Pharyngostomy (fistulization of pharynx, external for feeding) . . .	BR			43135	thoracic approach	20.0	90 12.0
42960 Control oropharyngeal hemorrhage (primary or secondary, eg, posttonsillectomy); simple	1.0	0	4.0	43136	Diverticulopexy, hypopharynx, with or without myotomy	BR	
42961 complicated, requiring hospitalization	BR				(For endoscopic approach, see 43225)		
42962 with secondary surgical intervention	BR			ENDOSCOPY			
42970 Control of nasopharyngeal hemorrhage (primary or secondary, eg, postadenoidectomy); simple, with posterior nasal packs, with or without anterior packs and/or cauterization	2.0	0	4.0	43200	Esophagoscopy, ((diagnostic)) rigid or fiberoptic (specify); diagnostic	4.0	15 3.0
42971 complicated, requiring hospitalization	BR			((43205	with insertion of radioactive substance	4.8	15 3.0))
42972 with secondary surgical intervention	BR			43202	with biopsy and/or collection of specimen by brushing or washing for cytology	4.8	15 3.0
42999 Unlisted procedure, pharynx, adenoids, or tonsils	BR				((For radiotherapist services, see 77520-77560)		
AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)				43210	with biopsy	4.8	15 3.0))
WAC 296-22-180 ESOPHAGUS.				43215	with foreign body removal . . .	6.0	15 3.0
				43217	with removal of polyp(s)	6.0	15 3.0
				43218	with irrigation	5.0	15 3.0
				43219	with insertion of plastic tube or stent	4.8	15 3.0
				43220	with dilation, direct	4.8	15 3.0
					(For ((indirect)) dilation, without visualization see 43450-((43455)) 43456)		
INCISION				((43230	Esophagogastroscopy (two instrument procedure)	6.0	15 3.0))
43000 Esophagotomy, cervical approach; without removal foreign body	14.0	90	6.0	43221	Esophagogastroscopy, fiberoptic; diagnostic	4.0	15 3.0
43020 ((for)) with removal of foreign body((-cervical approach)) . . .	14.0	90	6.0	43222	with biopsy and/or collection of specimen by brushing or washing for cytology	4.0	15 3.0
43030 Cricopharyngeal myotomy	14.0	90	6.0	43223	with removal of foreign body . . .	5.0	15 3.0
43040 Esophagotomy, thoracic approach; without removal of foreign body	19.0	90	12.0	43224	with removal of polyp(s)	6.0	15 3.0
((43040))43045 ((thoracic approach)) with removal foreign body	19.0	90	12.0	43225	with repair of hypopharyngeal diverticulum (Dohlnan procedure)	6.0	15 3.0
				43226	with insertion of wire to guide dilation	4.0	15 3.0
				43227	for control of hemorrhage	5.0	15 3.0
				43228	with fulguration of mucosal lesion	5.0	15 3.0
					(For gastroscopy, without esophagoscopy, see 43700-43714)		
EXCISION				43235	Esophagogastroduodenoscopy; diagnostic	5.0	15 3.0
43100 Excision(;) of local lesion ((of)), esophagus, with primary repair; cervical approach	19.0	90	12.0	43239	with biopsy and/or collection of specimen by brushing or washing for cytology	4.0	15 3.0
43101 thoracic approach	20.0	90	12.0	43247	with removal of foreign body . . .	5.0	15 3.0
43105 Wide excision of malignant lesion of cervical esophagus, with or without laryngectomy;	BR			43251	with removal of polyp(s)	6.0	15 3.0
43106 with radical neck dissection (Wookey type procedure)	BR			43255	for control of hemorrhage	5.0	15 3.0
43110 Esophagectomy: ((resection of esophagus, transpleural or extrapleural (upper two-thirds) with gastric anastomosis, with or without pyloroplasty or vagotomy)) (at upper two-thirds level) and gastric anastomosis; with or without pyloroplasty . . .	30.0	90	12.0	43258	with fulguration of mucosal lesion	5.0	15 3.0
43111 with second stage pyloroplasty	35.0	90	12.0	43260	with cannulation of ampulla of Vater for radiographic studies and/or specimen collection for cytology	5.0	15 3.0
43115 Esophagectomy (at upper two-thirds level) with segment replacement(;) of bowel ((or prosthesis, one or two stages)) . .	40.0	90	12.0	43262	with electro-surgical		

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@	
43264	sphincterotomy (Oddi)	6.0	15	3.0	43415	((transthoracic) thoracic approach	19.0 90 12.0	
	with extraction of stone from common bile duct	7.0	15	3.0	43420	Closure ((of) esophagostomy or ((other external esophageal) fistula((:); cervical approach	14.0 90 6.0	
REPAIR					43425	thoracic approach	26.0 90 12.0	
43300	Esophagoplasty((:)); (plastic repair or reconstruction ((of esophagus)) cervical approach; without repair of tracheoesophageal fistula	BR+		12.0	(For repair of esophageal hiatal hernia, see 39500 et seq.)			
43305	with repair of ((tracheoesophageal) tracheoesophageal fistula((; cervical approach))	22.0	90	6.0	MANIPULATION			
43310	((thoracic approach)) Esophagoplasty, (plastic repair or reconstruction) thoracic approach; without repair of tracheoesophageal fistula	30.0	90	12.0	*43450	Dilation ((of) esophagus, by unguided sound(s) or bougie((:)(s) indirect((:); initial session	*0.6 0 3.0	
43312	with repair of tracheoesophageal fistula	26.0	90	12.0	*43451	subsequent session	*0.6 0 3.0	
43320	Esophagogastrostomy (cardioplasty) with or without vagotomy and pyloroplasty; abdominal approach	22.0		((Abdominal) 90 6.0 ((Thoracic) ((++0))	43453	Dilation esophagus, over guide wire or string	3.0 15 3.0	
43321	thoracic approach	22.0	90	11.0	(For ((direct)) dilation with direct visualization, see 43220)			
43324	Esophagogastric fundoplasty (eg, Nissen, Belsey IV, Hill procedures)	BR			43455	((by balloon) Brusque esophageal dilation by balloon or Stark dilator;	4.0 15 3.0	
43325	Esophagogastric fundoplasty with fundic patch (Thal-Nissen procedure)	BR			43456	retrograde	BR	
	(For cricopharyngeal myotomy, see 43030)				43460	Esophagogastric tamponade, with balloon (Sengstaaken type)	Sv. & BR	
43330	Esophagomyotomy (Heller type) with or without hiatal hernia repair; abdominal approach	19.0		((Abdominal) 90 6.0 ((Thoracic) ((++0))	43499	Unlisted procedure, esophagus	BR	
43331	thoracic approach	19.0	90	11.0	AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)			
	(For esophagoduodenostomy or esophagojejunostomy with total gastric resection, see 43620)				WAC 296-22-190 STOMACH.			
43340	Esophagojejunostomy (without total gastrectomy); abdominal approach	24.0		((Abdominal) 90 6.0 ((Thoracic) ((++0))		Unit Value	Follow-up Days=	Basic Anes@
43341	thoracic approach	24.0	90	11.0	INCISION			
43350	Esophagostomy((:)); fistulization of esophagus, external; abdominal approach	14.0		((Abdominal) 90 6.0 ((Thoracic) ((++0))	43500	Gastrotomy with exploration or foreign body removal	12.0 45 5.0	
43351	thoracic approach	14.0	90	11.0	43510	with esophageal dilation and insertion of plastic tubes	BR	
43352	cervical approach	14.0	90	14.0	43520	Pyloromyotomy((:); cutting of pyloric muscle (Fredet-Ramstedt type operation)	10.0 45 6.0	
SUTURE					EXCISION			
43400	((Direct ligation of)) Ligation, direct, esophageal varices	20.0	90	12.0	43600	Biopsy of stomach; by capsule, tube, peroral((; via tube)) (one or more specimens)	3.0 0	
43410	Suture ((of)) esophageal wound((:)) or injury ((or rupture)); cervical approach	BR+		7.0	43605	by laparotomy	12.0 45 5.0	
					43610	Local excision of ulcer or tumor	14.5 45 6.0	
					43620	((Total gastrectomy)) Gastrectomy, total; including intestinal anastomosis	28.0 90 7.0	
					43625	with repair by intestinal transplant	34.0 90 7.0	
					43630	((Subtotal or hemi-gastrectomy, without vagotomy)) Hemigastrectomy or distal subtotal gastrectomy including pyloroplasty, gastroduodenostomy or gastrojejunostomy; without vagotomy	19.0 60 6.0	
					43635	with vagotomy, any type	21.0 60 6.0	
					43638	Hemigastrectomy or proximal subtotal gastrectomy, thoracic or abdominal approach	19.0 60 6.0	
					43640	Vagotomy and pyloroplasty, with or without gastrectomy	17.0 60 6.0	
					(For pyloroplasty, see 43800)			

(For vagotomy, see ((64070-64072)) 64752-64760)

ENDOSCOPY

	Unit Value	Follow-up Days=	Basic Anes@
43700 Gastroscopy, fiberoptic, without esophagoscopy; diagnostic	4.0	7	3.0
((43705 with biopsy	4.8	7	3.0
43720 Gastrocamera photo series (as with GT-V)	2.0	0	
43702 with biopsy and/or collection of specimen by brushing or washing for cytology	2.0	0	
43709 with removal of foreign body	3.0	7	3.0
43711 with removal of polyp(s)	5.0	7	3.0
43712 for control of hemorrhage	5.0	7	3.0
43714 with fulguration of mucosal lesion	5.0	7	3.0

(For esophagogastroduodenoscopy, see 43235-43264)

SUTURE

43800 Pyloroplasty	13.0	45	5.0
(For pyloroplasty and vagotomy, see 43640)			
43810 Gastroduodenostomy	14.0	45	5.0
43820 Gastrojejunostomy	14.0	45	5.0
43825 with vagotomy any type	18.0	45	6.0
43830 Gastrostomy, temporary (tube, rubber, or plastic) (((independent)) separate procedure);	13.0	45	5.0
43831 neonatal, for feeding	8.0	30	5.0
43832 ((permanent)) Gastrostomy, permanent, with construction of gastric tube	16.0	45	5.0
43840 Gastrorrhaphy((-)); suture of perforated duodenal or gastric ulcer, wound, or injury	13.0	45	6.0
43850 Revision of gastroduodenal anastomosis (gastroduodenostomy) with reconstruction, without vagotomy	20.0	60	5.0
43855 with vagotomy	23.0	60	6.0
43860 Revision of gastrojejunal anastomosis ((gastrojejunostomy)) gastrojejunostomy) with reconstruction((-); without vagotomy	20.0	60	5.0
43865 with vagotomy	23.0	60	6.0
43870 Closure of gastrostomy, surgical	12.0	45	5.0
43880 Closure of ((gastro-colic)) gastrocolic fistula	BR+		5.0
43885 Anterior gastropexy for hiatal hernia (separate procedure)	BR		
43999 Unlisted procedure, stomach	BR		

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)
WAC 296-22-195 INTESTINES (EXCEPT RECTUM).

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
44000 Enterolysis (freeing of intestinal adhesion); (((independent)) separate procedure)	10.0	45	4.0
(For incidental enterolysis, see WAC 296-22-010, item 7b)			
44005 with acute bowel obstruction	14.5	90	6.0
44010 Duodenotomy	14.5	60	7.0

	Unit Value	Follow-up Days=	Basic Anes@
44020 Enterotomy with exploration or foreign body removal((-)); small bowel, other than duodenum	14.5	60	4.0
44025 large bowel	15.0	60	4.0
44040 Exteriorization of intestine (Mikulicz resection((-)) with crushing of spur)	18.0	60	5.0
44050 Reduction of volvulus, intussusception, internal hernia, by laparotomy	14.0	90	5.0
44060 Sigmoid myotomy (Reilly type operation) for diverticular disease	BR	90	6.0

EXCISION

44100 Biopsy of intestine by capsule, tube, peroral((-via tube)) (one or more specimens)	3.0	0	
44110 Excision of one or more lesions of small or large bowel not requiring anastomosis, exteriorization, or fistulization((-)); single enterotomy	16.0	60	4.0
44111 multiple enterotomies	BR+		4.0
44115 Excision colonic diverticulum	BR		
44120 Enterectomy((-); resection of small intestine; with anastomosis	17.0	60	6.0
44125 with double-barrel enterostomy	14.0	60	6.0
44130 Enteroenterostomy((-); anastomosis of intestine; (((independent)) separate procedure)	14.5	90	5.0
44131 intestinal bypass for morbid obesity			
44140 Colectomy, partial((-); with anastomosis	18.0	90	5.0
44141 with skin level cecostomy or colostomy	20.0	90	6.0
44143 with end colostomy and closure of distal segment (Hartmann type procedure)	18.0	90	6.0
44144 with resection, with colostomy or ileostomy and creation of mucofistula	18.0	90	6.0
44145 with coloproctostomy (low pelvic anastomosis)	24.0	90	6.0
44146 with coloproctostomy (low pelvic anastomosis) with colostomy	26.0	90	6.0
44150 ((total, with ileostomy or ileoproctostomy)) Colectomy, total, abdominal, with ileostomy or ileoproctostomy; with proctectomy	26.0	90	6.0
44155 with proctectomy and ileostomy	30.0	90	6.0
44160 Colectomy with removal of terminal ileum and ileocolostomy	30.0	90	6.0

ENTEROSTOMY—EXTERNAL FISTULIZATION OF INTESTINES (((independent)) SEPARATE PROCEDURE)((-))

44300 ((Tube enterostomy)) Enterostomy, tube, or cecostomy (((independent procedure)))	8.5	90	4.0
44305 in conjunction with other procedures	2.0	90	
44308 Enterostomy, suture of one wall of intestine to abdominal wall, small or large intestine	10.0	90	5.0

	Unit Value	Follow-up Days=	Basic Anes@
44310 Ileostomy((-permanent))	14.5	90	4.0
44312 Revision of ileostomy; simple (release of superficial scar)	<u>BR</u>		
44314 complicated (reconstruction in depth)	<u>BR</u>		
44316 Continent ileostomy (Koch procedure)	<u>BR</u>		
(For fiberoptic evaluation, see 44385)			
44320 Colostomy or skin level cecostomy (separate procedure)	12.0	90	4.0
44340 Revision of colostomy, simple (release of superficial scar)	1.2	90	
44345 complicated (reconstruction in depth)	6.0	60	4.0

ENDOSCOPY, SMALL BOWEL AND STOMAL

(For esophagogastroduodenoscopy, see 43235-43264)

44360 Small intestinal endoscopy, enteroscopy beyond second portion of duodenum; diagnostic	3.0	7	3.0
44361 with biopsy and/or collection of specimen by brushing or washing for cytology	2.0	7	3.0
44363 with removal of foreign body	<u>BR</u>	7	3.0
44364 with removal of polyps	3.0	7	3.0
44366 for control of hemorrhage	<u>BR</u>		3.0
44369 with fulguration of mucosal lesion	2.0	7	3.0
44375 Fiberoptic gastrojejunoscopy through stoma	4.0	7	3.0
44380 Fiberoptic ileoscopy through stoma;	4.0	7	3.0
44382 with biopsy and/or collection of specimen for cytology	3.0	7	3.0
44385 Fiberoptic evaluation of Koch pouch	3.0	7	3.0
44388 Fiberoptic colonoscopy through colostomy	3.0	7	3.0

(For colonoscopy per rectum, see 45360-45386)

REPAIR

44400 Cecopexy, fixation of cecum to abdominal wall	12.0	90	4.0
44405 Sigmoidopexy, fixation of sigmoid colon to abdominal wall	12.0	90	4.0

SUTURE

44600 Suture of intestine (enterorrhaphy), large or small, for perforated ulcer, diverticulum, wound, injury or rupture(;;); single	14.0	45	7.0
44605 with colostomy	16.0	90	7.0
44610 multiple	<u>BR+</u>		7.0
44620 Closure of enterostomy, large or small intestine;	10.0	90	5.0
44625 with resection and anastomosis	14.0	90	6.0
44640 Closure of intestinal cutaneous fistula	<u>BR+</u>		4.0
44650 Closure of enteroenteric or enterocolic fistula	14.0	90	5.0
44660 Closure of enterovesical fistula; without intestinal or bladder resection	14.0	90	5.0

(For closure of renocolic fistula, see 50525, 50526)

44661 with bowel and/or bladder resection

(For closure of gastrocolic fistula, see 43880)

(For closure of rectovesical fistula, see 45800(;;)-45805)

44680 Intestinal plication, complete (Noble type ((procedure)) operation) (((independent)) separate procedure)

20.0 90 6.0
BR

44799 Unlisted procedure, intestine

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-200 MECKEL'S DIVERTICULUM AND THE ((MESENTERY)) MESENTERY.

	Unit Value	Follow-up Days=	Basic Anes@
EXCISION			
44800 Excision of Meckel's diverticulum (diverticulectomy) or omphalomesenteric duct	10.0	45	4.0
44820 ((Excision)) Excision of lesion of mesentery (((independent)) separate procedure) (with bowel resection, see 44120 or 44140 et seq.)	<u>BR+</u>		4.0

SUTURE

44850 Suture of mesentery (((independent)) separate procedure)	13.0	45	4.0
(For reduction and repair of internal hernia, see 44050)			
44899 Unlisted procedure, Meckel's diverticulum and the mesentery	<u>BR</u>		

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-205 APPENDIX.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
44900 Incision and drainage of appendiceal abscess, transabdominal	7.0	45	4.0

EXCISION

44950 Appendectomy;	9.5	45	4.0
(For incidental appendectomy, see WAC 296-22-010, item 7b and modifier -52)			
44955 when done for indicated purpose at time of other major procedure (not as separate procedure)	6.0	45	4.0
44960 for ruptured appendix with abscess or generalized peritonitis	<u>BR</u>		

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-210 RECTUM.

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
				initial or subsequent); diagnostic (separate procedures)	0.6	0	3.0
INCISION				45302 with collection of specimen by brushing or washing for cytology	1.0	7	3.0
45000	3.0	15	3.0	45303 with dilation, direct, instrumental	1.5	7	3.0
45005	4.5	30	3.0	45305 with biopsy, ((initial))	1.2	7	3.0
45020	4.8	30	3.0	((45306) subsequent for same lesion	0.72	7	3.0))
				45307 with removal of foreign body	1.0	7	3.0
				45310 with removal of ((papilloma or polyp, initial)) polyp or papilloma	1.4	7	3.0
EXCISION				((45311) subsequent for same lesion	1.0	7	3.0))
45100	4.0	15	3.0	45315 with removal of multiple ((papillomas)) excrescences, papillomata or polyps((-simple))	1.8	7	3.0
				((45320) complicated	BR+		3.0
45105	6.0	30	3.0	45340 Endoscopic control of hemorrhage			3.0
				45350 Endoscopic removal of foreign body, anus or rectum			3.0))
45108	BR			45317 for control of hemorrhage	2.0	7	3.0
45110	26.0	90	7.0	45319 with retrograde lavage (eg, water pik)	1.8	7	3.0
45111	24.0	90	7.0	45330 Sigmoidoscopy, flexible fiberoptic; diagnostic	0.8	15	3.0
45112	28.0	90	7.0	45331 with biopsy	1.4	15	3.0
45114	30.0	90	7.0	45332 with removal of foreign body	1.4	15	3.0
45116	28.0	90	7.0	45333 with removal of polyp(s)	1.8	15	3.0
45120	26.0	90	7.0	45334 for control of hemorrhage	BR		
45130	14.5	90	4.0	45355 Colonoscopy, with standard sigmoidoscope, transabdominal via colotomy, single or multiple	3.0	7	3.0
45135	26.0	90	6.0	45360 Colonoscopy, fiberoptic, beyond 25 cm to splenic flexure; diagnostic procedure	5.0	7	3.0
45150	BR+		3.0	45365 with biopsy and/or collection of specimen for cytology	4.0	7	3.0
45160	19.0	90	3.0	45367 with removal of foreign body	5.0	7	3.0
45170	BR+		3.0	45368 with control of hemorrhage	6.0	7	3.0
45180	BR			45370 with removal of polypoid lesion(s)	6.0	7	3.0
45181	BR			45371 with retrograde lavage (eg, water pik)	4.0	7	3.0
				45378 Colonoscopy, fiberoptic, beyond splenic flexure; diagnostic procedure	6.0	7	3.0
				45379 with removal of foreign body	7.0	7	3.0
ENDOSCOPY ((independent procedure))				45380 with biopsy and/or collection of specimen for cytology	6.0	7	3.0
45300				45382 for control of hemorrhage	7.0	7	3.0
				45385 with removal of polypoid lesion(s)	7.0	7	3.0
				45386 with retrograde lavage (eg, water pik)	5.0	7	3.0
				(For small bowel and stomal endoscopy, see 44360-44388)			
				REPAIR			
45500	10.0	90	3.0	45500 Proctoplasty, for stenosis	10.0	90	3.0
45505	11.0	90	3.0	45505 for prolapse of mucous membrane	11.0	90	3.0
45520	1.0	0		45520 Perirectal injection of sclerosing solution for prolapse((-)); office	1.0	0	
45521	4.0	30	3.0	45521 hospital	4.0	30	3.0
45540	18.0	90	4.0	45540 Proctopexy for prolapse, abdominal ((or-perineal)) approach	18.0	90	4.0

	Unit Value	Follow-up Days=	Basic Anes@
45541 perineal approach	18.0	90	3.0
45550 ((Protopexy)) proctopexy combined with sigmoid resection, abdominal approach	22.0	90	5.0
45560 Repair of rectocele (separate procedure)	24.0	90	5.0
(For repair of rectocele with posterior colporrhaphy, see 57250)			

SUTURE

45800 Closure of rectovesical fistula; ..	20.0	90	5.0
45805 with colostomy	22.0	90	5.0
45820 Closure of rectourethral fistula ..	20.0	90	3.0
45825 with colostomy	22.0	90	4.0
(For rectovaginal fistula closure, see 57300--((57307)) 57308)			

MANIPULATION

*45900 Reduction of procidentia (((independent)) separate procedure) under anesthesia	*0.6	0	
45905* Dilation of anal sphincter (separate procedure) under anesthesia other than local	BR		
45910 Dilation of rectal stricture (separate procedure) under anesthesia other than local	BR		
45915* Removal of fecal impaction or foreign body (separate procedure) under anesthesia	BR		
45999 Unlisted procedure, rectum	BR		

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-215 ANUS.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
*46000 Fistulotomy, subcutaneous	*0.6	0	3.0
(For fistulectomy, see 46060, 46270--((46300)) 46285)			
*46030 ((Seton removal, office)) Removal of seton, other marker	*0.6	0	
46032 Undercutting for pruritus ani (modified Ball operation)	1.0	0	3.0
46040 Incision and drainage of ischiorectal and/or perirectal abscess (((independent)) separate procedure)	2.4	15	3.0
46045 Incision and drainage of intramural, intramuscular or submucosal abscess, transanal, under anesthesia	2.4	15	3.0
*46050 Incision and drainage, perianal abscess, superficial (see also 45020, 46060)	*0.48	0	3.0
46060 Incision and drainage of ischiorectal or intramural abscess with fistulectomy, submuscular (see also 45020)	9.5	90	3.0
46070 Incision, anal septum (infant) ...	1.2	0	3.0
(For anoplasty, see 46700-46705)			

*46080 Sphincterotomy, anal((-)), division of anal sphincter (((independent)) separate procedure)	*1.2	0	3.0
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EXCISION

46200 Fissurectomy, with or without sphincterotomy	4.8	90	3.0
46210 Cryptectomy, single((-office)) ..	1.4	30	3.0
46211 multiple, ((hospital)) (((independent)) separate procedure)	7.0	90	3.0
46220 Papillectomy or excision of single tab, ((office)) anus (((independent)) separate procedure)	0.6	15	3.0
46221 Hemorrhoidectomy, by simple ligature (rubber band)	BR		
46230 Excision of external hemorrhoid tags and/or multiple papillae, office	1.2	15	3.0
46250 Hemorrhoidectomy, external, complete	4.8	90	3.0
46255 Hemorrhoidectomy, internal and external, simple;	7.0	90	3.0
((46260 radical (Whitehead type procedure)	10.0	90	3.0
46257 with fissurectomy	BR		
46258 with fistulectomy, with or without fissurectomy	BR		
46260 Hemorrhoidectomy, internal and external, complex or extensive; ..	10.0	90	3.0
46261 with fissurectomy	BR		
46262 with fistulectomy, with or without fissurectomy	BR		
46270 Fistulectomy((-)); subcutaneous ..	2.4	30	3.0
46275 submuscular	9.5	90	3.0
46280 complex or ((multiple)) multiple	BR+		3.0
46285 second stage	2.0	30	3.0
((46300 Fistulectomy, submuscular, with hemorrhoidectomy	9.5	90	3.0
46310 Fissurectomy and hemorrhoidectomy	8.0	90	3.0
*46320 Enucleation or excision of external thrombotic hemorrhoid	*0.72	0	3.0

INTRODUCTION

*46500 ((Hemorrhoids;)) Injection of sclerosing solution, hemorrhoids or mucosal prolapse	*0.4	0	3.0
46510* Perianal injection of alcohol or other solution for pruritus ani ...	BR		
46530 Dilation of anus and lower rectum under anesthesia for hemorrhoids (Lord procedure)	BR		

ENDOSCOPY

*46600 Anoscopy((-); diagnostic((-with or without biopsy)) (((independent)) separate procedure)	*0.32	0	3.0
46602 with collection of specimen by brushing or washing for cytology	0.5	0	3.0
46604 with dilation, direct, instrumental	0.7	0	3.0
46606 with biopsy	1.0	0	3.0
46608 with removal of foreign body ..	1.5	0	3.0
46610 with removal of polyp	1.5	0	3.0
46612 with multiple polyp removal ..	BR		3.0
46614 for control of hemorrhage	BR		

((For removal of foreign body, see 45350)

((For control of hemorrhage, endoscopic, see 45340))

	Unit Value	Follow-up Days=	Basic Anes@
REPAIR			
46700 Anoplasty((:)), plastic operation for stricture((:)); adult	9.0	90	3.0
46705 infant	10.0	30	4.0
(For simple incision of anal septum, see 46070)			
((46720)) 46715 Repair of congenital anovaginal fistula ("cut-back" type procedure)	12.0	90	4.0
46716 Perineal transplant of anovaginal fistula	14.0	90	4.0
46730 Construction of anus for congenital absence((:)); perineal or sacrococcygeal approach	16.0	90	5.0
46735 combined abdominal and perineal approach	20.0	90	7.0
46740 Construction of anus for congenital absence, with repair of urinary fistula	22.0	90	7.0
46750 Sphincteroplasty, anal, for incontinence, or prolapse; adult	10.0	90	3.0
46751 child	12.0	90	4.0
46753 Graft (Thiersch operation) for rectal incontinence and/or prolapse	BR		
46754 Removal of Thiersch wire or suture	BR		
46760 ((muscle transplant)) Sphincteroplasty, anal, for incontinence, adult, muscle transplant	BR+		4.0
DESTRUCTION			
*46900 ((Condylomata, multiple, simple, chemical)) Chemosurgery of condylomata, anal, multiple, simple	*0.48	0	
*46910 ((electrodessication)) Electrodesiation of condylomata, anal, multiple, simple	*0.8	0	3.0
*46920 ((surgical excision, simple)) Excision and electrodesiation of condylomata, anal; simple	*1.0	0	3.0
46930 ((complicated)) extensive	BR+		3.0
46932* Cryosurgery of condylomata, anal; simple	BR		
46933 extensive	BR		
46934 Cryosurgery of hemorrhoids; internal	BR		
46935 external	BR		
46936 internal and external	BR		
46937 Cryosurgery of rectal tumor; benign	BR		
46938 malignant	BR		
46940 Curettage or cauterization of anal fissure, including dilation of anal sphincter (separate procedure); initial	BR		
46942 subsequent	BR		
SUTURE			
46945 Ligation of internal hemorrhoids; single procedure	BR		
46946 multiple procedures	BR		
OTHER PROCEDURES			
46999 Unlisted procedure, anus	BR		

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-220 LIVER.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
*47000 ((Needle biopsy of liver;)) Biopsy of liver, needle, percutaneous	*1.4	0	3.0
47010 Hepatotomy for drainage of abscess or cyst, one or two stages	BR		
EXCISION			
47100 ((Wedge biopsy (independent procedure))) Biopsy of liver, wedge (separate procedure)	10.0	45	4.0
47120 Hepatectomy ₁ ((f)) resection of liver((:)); partial lobectomy	19.0	45	10.0
47125 total left lobectomy	BR+		13.0
47130 total right lobectomy	BR+		13.0
47135 total, with transplant	BR+		15.0
REPAIR			
47300 Marsupialization of cyst or abscess of liver	14.5	60	6.0
SUTURE			
47350 Hepatorrhaphy((:)) ₁ suture of liver wound or injury((:)); simple	14.0	45	4.0
47355 with common duct or gallbladder drainage	18.0	45	7.0
47360 complex	BR+		9.0
47399 Unlisted procedure, liver	BR		

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-225 BILIARY TRACT.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
47400 Hepaticotomy or hepaticostomy with exploration, drainage ₂ or removal of calculus	20.0	45	6.0
47420 Choledochotomy or choledochostomy with exploration, drainage ₂ or removal of calculus, with or without cholecystotomy;	17.0	45	5.0
47425 with transduodenal sphincterotomy	19.0	45	6.0
47440 Duodenocholedochotomy((:)) ₁ transduodenal choledocholithotomy	19.0	45	6.0
47460 Transduodenal sphincterotomy or sphincteroplasty ((independent)) separate procedure	19.0	45	6.0
47480 Cholecystotomy or cholecystostomy with exploration, drainage or removal of calculus ((independent)) separate procedure	12.0	45	5.0
INTRODUCTION			
47500 Injection procedure for percutaneous ((trans-hepatic)) transhepatic cholangiography	1.6	0	
EXCISION			
47600 Cholecystectomy;	14.5	45	5.0
47605 with cholangiography	15.0	45	5.0
47610 Cholecystectomy with ((open))			

	Unit Value	Follow-up Days=	Basic Anes@
47611 exploration of common duct ..	17.0	45	6.0
47620 with biliary endoscopy	<u>BR</u>		
47630 with transduodenal sphincterotomy or sphinteroplasty, with or without cholangiography	20.0	45	6.0
47630 Biliary duct stone extraction, percutaneous via t-tube tract (eg, Burhenne technique)	<u>BR</u>		

((Repair))

47700 Exploration for congenital atresia of bile ducts, without repair, with or without liver biopsy, with or without cholangiography	14.5	45	6.0
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REPAIR

47720 ((Direct anastomosis of gallbladder and gastrointestinal tract)) Cholecystoenterostomy; direct ..	14.5	60	5.0
47721 with gastroenterostomy	<u>16.0</u>	<u>60</u>	<u>6.0</u>
47740 Roux-en-y ((anastomosis of gallbladder and gastrointestinal tract))	16.0	60	6.0
47760 ((Direct anastomosis)) Anastomosis, direct, of extrahepatic biliary ducts and gastrointestinal tract	20.0	90	6.0
47765 Anastomosis, direct, of intrahepatic ducts and gastrointestinal tract	<u>BR+</u>		<u>6.0</u>
47780 ((Roux-en-y anastomosis)) Anastomosis, Roux-en-y of extrahepatic biliary ducts and gastrointestinal tract	22.0	90	6.0
47800 ((Plastic reconstruction of extrahepatic biliary ducts with end-to-end anastomosis)) Reconstruction, plastic, of extrahepatic biliary ducts with end-to-end anastomosis	20.0	90	6.0
47810 Implantation of biliary istulous tract into stomach or intestine ..	<u>BR</u>		

SUTURE

47850 Choledochorrhaphy	<u>BR</u>		
47855 Cholecystorrhaphy	<u>BR</u>		
47999 Unlisted procedure, biliary tract.	<u>BR</u>		

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-230 PANCREAS.

	Unit Value	Follow-up Days=	Basic Anes@
48000 ((Abdominal drainage of)) Drainage of abdomen for pancreatitis	13.0	60	5.0
48020 Removal of pancreatic calculus ..	20.0	60	6.0
48100 Biopsy of pancreas (((independent)) separate procedure)	14.0	60	5.0
48120 Excision of lesion of pancreas ((eg)) eg, cyst, adenoma)	17.0	60	6.0
48140 Pancreatectomy, distal subtotal, with or without splenectomy; ...	20.0	60	6.0
48145 with ((pancreatico-jejunostomy)) pancreaticojejunostomy	22.0	60	6.0

INCISION

	Unit Value	Follow-up Days=	Basic Anes@
48148 Excision of ampulla of Vater, simple	<u>BR</u>		
48150 ((Whipple type)) Pancreatectomy, proximal subtotal, with pancreaticojejunostomy or pancreaticoduodenostomy (Whipple type operation)	34.0	60	6.0
48151 Pancreatectomy, near-total, with preservation of duodenum (Child type procedure)	<u>BR</u>		
48155 Pancreatectomy, total;	34.0	60	6.0
48160 with transplantation	<u>BR+</u>		<u>6.0</u>
48180 Pancreatico((-))jejunostomy ((eg)) side-to-side anastomosis, Puestow type ((procedure)) operation, (((independent)) separate procedure)	24.0	60	6.0

REPAIR

48500 Marsupialization of cyst of pancreas	14.5	60	6.0
48520 Internal ((direct)) anastomosis of pancreatic cyst to gastrointestinal tract; direct	17.0	60	6.0
48540 Roux-en-y ((internal anastomosis, cyst to gastrointestinal tract))	19.0	60	6.0
48999 Unlisted procedure, pancreas ...	<u>BR</u>		

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-235 ABDOMEN, PERITONEUM AND OMEN-TUM.

	Unit Value	Follow-up Days=	Basic Anes@
49000 Exploratory laparotomy((:)), exploratory celiotomy (((independent)) separate procedure) (see WAC 296-22-010, item 7b) ...	10.0	45	4.0
49002 Reopening of recent laparotomy incision for exploration; removal of hematoma, control of bleeding			
49010 ((Retroperitoneal exploration (independent)) Exploration, retroperitoneal area (separate procedure)	10.0	45	5.0
49020 Drainage of peritoneal abscess(;) or localized peritonitis, exclusive of appendiceal abscess, transabdominal	11.0	45	4.0
(For appendiceal abscess, see 44900)			
49040 Drainage of subdiaphragmatic or subphrenic abscess	12.0	45	5.0
49060 Drainage of retroperitoneal abscess	11.0	45	5.0
*49080 Peritoneocentesis(;;), abdominal paracentesis(;;); initial	*0.8	0	
*49081 subsequent	*0.6	0	
49085 Removal of peritoneal foreign body	<u>BR</u>		
(For lysis of intestinal adhesions, see 44000)			
EXCISION			
((49000)) 49200 Excision of intra-abdominal or retroperitoneal tumors or			

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@	
				49560	((Ventral)) Repair ventral hernia (separate procedure);	11.0	45	3.0
				49565	recurrent	12.0	45	3.0
				49570	((Epigastric, simple; properitoneal—fat)) Repair epigastric hernia, properitoneal fat (separate procedure); simple	3.0	45	3.0
				49575	((more)) complex	7.0	45	3.0
				((49480)) 49580	((Umbilical;)) Repair umbilical hernia; under age 5 years	7.0	45	3.0
				49581	age 5 or over	8.5	45	3.0
				49590	Repair spigelian hernia	9.0	45	3.0
				49600	Repair of omphalocele(in newborn, simple); small, with primary closure	9.5	45	6.0
				49605	((giant (gastroschisis))) large or gastroschisis, with or without prosthesis	14.5	60	9.0
				49606	with staged closure of prosthesis, reduction in operating room, under anesthesia	BR		9.0
				49610	((Gross type procedure, first stage)) Repair of omphalocele (Gross type operation); first stage	12.0	60	8.0
				49611	second stage	12.0	60	7.0
					(For diaphragmatic or hiatal hernia repair, see 39500- ((39530)) 39531)			
				49630	Reduction of torsion, omentum	BR		
				49635	Omentopexy for establishing collateral circulation in portal obstruction	BR		
				49640	Omentoplasty (omental flap reconstruction for transfer of omentum with intact blood supply to thorax, neck or axilla)	BR		
SUTURE				49900	((Secondary suture)) Suture, secondary, of abdominal wall for evisceration or dehiscence	6.0	30	5.0
					(For suture of ruptured diaphragm, see 39540-39541)			
				49910	Suture of omentum, omentorrhaphy for wound or injury	BR		
				49999	Unlisted procedure, abdomen, peritoneum and omentum	BR		
URINARY SYSTEM								
					(For supply of anticarcinogenic agents, use 99070 in addition to primary procedure)			
AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)								
WAC 296-22-245 KIDNEY.								
						Unit Value	Follow-up Days=	Basic Anes@
INCISION								
					(For retroperitoneal exploration ((or)), abscess, tumor, or cyst, see 49010, 49060, 49200, 49201)			
				((50000))	Aspiration and/or injection of renal cyst or pelvis, percutaneous	2.4	7	

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
50010	Renal exploration, not necessitating other specific procedures	17.0	90	6.0			
50020	Drainage of perirenal or renal abscess (((independent)) separate procedure)	14.0	90	5.0	50320	unilateral or bilateral	BR+
50040	Nephrostomy((:)), nephrotomy with drainage	20.0	90	5.0	50340	from living donor, unilateral	24.0
50045	Nephrotomy, with exploration	20.0	90	5.0		Recipient nephrectomy((:)) (separate procedure); unilateral ((independent procedure))	20.0
	(For renal endoscopy performed in conjunction with this procedure, see 50570-50580)				50341	bilateral	30.0
50060	Nephrolithotomy((:)); removal of calculus	20.0	90	5.0	50360	Renal ((homo-transplantation:)) homotransplantation, implantation of graft((:)); excluding donor and recipient nephrectomy	30.0
50065	secondary surgical operation for ((stone)) calculus	24.0	90	5.0	50365	with unilateral recipient nephrectomy	50.0
50070	complicated by congenital kidney abnormality	24.0	90	5.0	50366	with bilateral recipient nephrectomy	50.0
50075	large (staghorn) calculus filling renal pelvis and calyces	26.0	90	5.0	50370	Removal of transplanted homograft (eg, infarcted or rejected kidney)	13.0
50100	Transection or repositioning of aberrant renal vessels (((independent)) separate procedure)	17.0	90	5.0	50380	Renal ((auto-transplantation:)) autotransplantation, reimplantation of kidney	30.0
50120	Pyelotomy((:)); with exploration	20.0	90	5.0		(For extra-corporeal "bench" surgery, use autotransplantation as the primary procedure and add the secondary procedure eg, partial nephrectomy, nephrolithotomy, etc)	
	(For renal endoscopy performed in conjunction with this procedure, see 50570-50580)						
50125	with drainage, pyelostomy	20.0	90	5.0	INTRODUCTION		
50130	with removal of calculus((:)) (pyelolithotomy((:)), pelviolithotomy)	20.0	90	5.0		(For injection procedure for retroperitoneal pneumography, see 49430)	
50135	complicated ((eg-)) eg, secondary operation, congenital kidney abnormality)	24.0	90	5.0	50390	Aspiration and/or injection of renal cyst or pelvis by needle, percutaneous	2.5
							7
EXCISION						(For fluoroscopic guidance, see 76000; for ultrasonic guidance, see 76938, 76939)	
	(For excision of retroperitoneal tumor or cyst, see 49200, 49201)				50392	Introduction of intracatheter or catheter into renal pelvis for drainage and/or injection, percutaneous	2.5
50200	Renal biopsy, percutaneous((:)); by ((trochar)) trocar or needle	2.4	7		50394	Injection procedure for pyelography (as nephrostogram, pyelostogram, antegrade pyeloureterograms) through nephrostomy or pyelostomy tube, or indwelling ureteral catheter (separate procedure)3
	(For fluoroscopic guidance, see 76000; for ultrasonic guidance, see 76942, 76943)				50396	Manometric studies through nephrostomy or pyelostomy tube, or indwelling ureteral catheter4
50205	by surgical exposure of kidney	8.0	30	5.0	50398*	Change of nephrostomy or pyelostomy tube3
50220	Nephrectomy, including partial ureterectomy, any approach including rib resection;	20.0	90	5.0		((For injection and/or aspiration of renal cyst or pelvis, see 50000))	
50225	complicated because of previous surgery on same kidney	24.0	90	5.0	REPAIR		
50230	radical, with regional lymphadenectomy	26.0	90	5.0	50400	Pyeloplasty((:)); (Foley Y-pyeloplasty), plastic operation on renal pelvis, with or without plastic operation on ureter or nephropexy, nephrostomy, pyelostomy, or ureteral splinting	22.0
((50235))50234	Nephrectomy with total ureterectomy and bladder cuff; through same ((or separate)) incision	24.0	90	5.0	50405	complicated ((eg-)) congenital kidney abnormality, secondary pyeloplasty, solitary kidney)	26.0
	through separate incision	24.0	90	5.0			
50240	Nephrectomy, partial	24.0	90	5.0			
((50260))	Decapsulation, unilateral	18.0	90	5.0			
50261	bilateral	26.0	90	5.0			
50280	Excision or unroofing of cyst(s) of kidney	18.0	90	5.0			
50290	Excision of perinephric cyst	18.0	90	5.0			
RENAL TRANSPLANTATION							
	(For dialysis, see ((90940-9096+)) 90941-90999)						
50300	Donor nephrectomy, with preparation and maintenance of homograft; from cadaver donor,						

	Unit Value	Follow-up Days=	Basic Anes@
50420 Nephropexy((:)), fixation or suspension of kidney ((<u>independent</u>)) <u>separate procedure</u>	16.0	90	5.0
SUTURE			
50500 Nephrorrhaphy((:)), suture of kidney wound or injury	20.0	90	8.0
50520 Closure of ((<u>nephro-cutaneous</u>)) <u>nephrocuteaneous</u> or <u>pylo-cutaneous</u>) <u>pyelocutaneous fistula</u>	20.0	90	5.0
50525 Closure of ((<u>nephro-visceral</u>)) <u>nephrovisceral fistula</u> ((<u>e.g.</u>)) <u>eg. ((<u>reno-colic</u>))</u>), including visceral repair <u>abdominal approach</u>	24.0	((Abdominal)) 90	5.0
		((Thoracic)) 90	5.0
50526 <u>thoracic approach</u>	24.0	90	11.0
(For supplemental skills of two surgeons, see WAC 296-22-010, item 5b, and modifier -62)			
50540 Symphysiotomy for horseshoe kidney with or without pyeloplasty and/or other plastic procedure, unilateral or bilateral (one operation)	28.0	90	5.0
ENDOSCOPY			
50550 <u>Renal endoscopy through established nephrostomy or pyelostomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; hospital</u>	3.0	3	3.0
50551 <u>office</u>	1.0	3	
50552 <u>with ureteral catheterization, hospital</u>	3.0	3	3.0
50553 <u>with ureteral catheterization, office</u>	1.5	3	
50554 <u>with biopsy, hospital</u>	3.0	3	3.0
50555 <u>with biopsy, office</u>	1.5	3	
50556 <u>with fulguration, with or without biopsy, hospital</u>	3.0	3	3.0
50557 <u>with fulguration, with or without biopsy, office</u>	2.0	3	
50558 <u>with insertion of radioactive substance with or without biopsy and/or fulguration, hospital</u>	3.2	3	3.0
50559 <u>with insertion of radioactive substance with or without biopsy and/or fulguration, office</u>	3.0	3	
50560 <u>with removal of foreign body or calculus, hospital</u>	3.0	3	3.0
50561 <u>with removal of foreign body or calculus, office</u>	2.0	3	
<u>When procedures 50570-50580 provide a significant identifiable service, they may be added to 50045 and 50120</u>			
50570 <u>Renal endoscopy through nephrotomy or pyelotomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service;</u>	1.4	3	
(For nephrotomy, see 50045)			
(For pyelotomy, see 50120)			
50572 <u>with ureteral catheterization</u>	1.8	3	
50574 <u>with biopsy</u>	1.8	3	

50576 <u>with fulguration, with or without biopsy</u>	2.0	3	
50578 <u>with insertion of radioactive substance, with or without biopsy and/or fulguration</u>	2.4	3	
50580 <u>with removal of foreign body or calculus</u>	2.0	3	

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-250 URETER.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
50600 <u>Ureterotomy with exploration or drainage ((<u>independent</u>)) <u>separate procedure</u></u>	18.0	90	5.0
(For ureteral endoscopy performed in conjunction with this procedure, see 50970-50980)			
50610 <u>Ureterolithotomy; upper one-third or ureter</u>	20.0	90	5.0
50620 <u>((Ureterolithotomy;)) middle one-third of ureter</u>	18.0	90	5.0
50630 <u>((upper-or)) lower one-third</u>	20.0	90	5.0

(For transvesical ureterolithotomy, see 51060)

(For cystotomy with stone basket extraction of ureteral calculus, see 51065)

(For endoscopic extraction or manipulation of ureteral calculus, see 52320-52330)

EXCISION

(For ureterocele, see 51535, 51536, 52300)

50650 <u>Ureterectomy, with bladder cuff ((<u>independent</u>)) <u>separate procedure</u></u>	20.0	90	5.0
50660 <u>Ureterectomy, total, ectopic ureter, combination abdominal, vaginal and/or perineal approach</u>	22.0	90	7.0

INTRODUCTION

50684 <u>Injection procedure for ureterography or ureteropyelography through ureterostomy or indwelling ureteral catheter (separate procedure)</u>	0.3	0	
50686 <u>Manometric studies through ureterostomy or indwelling ureteral catheter</u>	0.4	0	
50688* <u>Change of ureterostomy tube</u>	0.3	0	
50690 <u>Injection procedure for visualization of ilial conduit and/or ureteropyelography, exclusive of radiologic service (separate procedure)</u>	0.4	0	

REPAIR

50700 <u>Ureteroplasty: Plastic operation on ureter ((<u>e.g.</u>)) eg. stricture)</u>	20.0	90	5.0
50715 <u>Ureterolysis, with or without repositioning</u>			

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
of ureter for retroperitoneal (fibroses, ovarian vein syndrome, etc.) fibrosis; unilateral	16.0	90	5.0	50841	40.0	120	6.0
(50721) 50716 bilateral	24.0	90	5.0	50860	18.0	90	5.0
50722 Ureterolysis for ovarian vein syndrome	16.0	90	5.0	50861	22.0	90	5.0
50725 Ureterolysis for retrocaval ureter, with reanastomosis of upper urinary tract or vena cava	26.0	90	5.0	SUTURE			
50740 Ureteropyelostomy((-)) anastomosis of ureter and renal pelvis	22.0	90	5.0	50900	20.0	90	5.0
50750 Ureterocalycostomy, anastomosis of ureter to renal calyx	24.0	90	5.0	50920	20.0	90	5.0
50760 Ureteroureterostomy	22.0	90	5.0	50930			
50770 Transureteroureterostomy((-)) anastomosis of ureter to contralateral ureter	24.0	90	5.0	50940	BR+ BR+		5.0 5.0
50780 Ureteroneocystostomy((-)) anastomosis of ureter to bladder, or other operations for correction of (vesico-ureteral) vesicoureteral reflux((-)); unilateral	22.0	90	5.0	(For ureteroplasty, ureterolysis, etc., see 50700-50861)			
50781 bilateral	26.0	90	5.0	ENDOSCOPY			
(When combined with cystourethroplasty or vascial neck revision, see 51820)				50950	3.0	3	
50785 Ureteroneocystostomy, with bladder flap((-)); unilateral	24.0	90	5.0	50951	1.3	3	
50786 bilateral	28.0	90	5.0	50952	3.0	3	
50800 Ureteroenterostomy((-)), direct anastomosis of ureter to intestine((-); unilateral	22.0	90	5.0	50953	1.8	3	
50801 bilateral	26.0	90	5.0	50954	3.0	3	
50810 Ureterosigmoidostomy, with creation of sigmoid bladder and establishment of abdominal or perineal colostomy, including bowel anastomosis	30.0	120	6.0	50955	1.8	3	
(For supplemental skills of two surgeons, see WAC 296-22-010, item 5b, and modifier -62)				50956	3.2	3	
50820 (Uretero-ileal) Ureteroileal conduit (ileal bladder), including bowel anastomosis((-) (Bricker operation); unilateral	30.0	120	6.0	50957	2.0	3	
(For supplemental skills of two surgeons, see WAC 296-22-010, item 5b, and modifier -62)				50958	3.6	3	
50821 bilateral	34.0	120	6.0	50959	2.4	3	
(For combination of 50800-50821 with cystectomy, see 51580-51595)				50960	3.2	3	
50830 Urinary undiversion (eg, taking down of ureteroileal conduit, ureterosigmoidostomy or ureterenterostomy with ureteroureterostomy or ureteroneocystostomy)	BR			50961	2.0	3	
50840 Replacement of all or part of ureter by bowel segment, including bowel anastomosis((-); unilateral	30.0	120	6.0	When procedures 50970-50980 provide a significant identifiable service, they may be added to 50600			
				50970	1.3	3	
				(For ureterotomy, see 50600)			
				50972	1.8	3	
				50974	1.8	3	
				50976	2.0	3	
				50978	2.4	3	
				50980	2.0	3	

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-255 BLADDER.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
51000 Aspiration of bladder by needle	0.4	0	
*51005 <u>Aspiration of bladder; by ((trochar)) trocar or intracatheter</u>	*1.0	0	
51010 with insertion of suprapubic catheter	2.0	30	5.0
((51029)) 51020 Cystotomy or cystostomy; with fulguration and/or insertion of radioactive material	14.5	90	5.0
51030 ((Cystotomy or cystostomy)) with cryosurgical destruction of intravesical lesion	14.5	90	5.0
51040 Cystostomy((:)); cystotomy with drainage	12.0	90	5.0
51045 <u>Cystotomy, with insertion of ureteral catheter (separate procedure)</u>	14.5	90	5.0
51050 Cystolithotomy((:)); cystotomy with removal of calculus, without vesical neck resection	14.5	90	5.0
51060 <u>Transvesical ureterolithotomy</u>	19.0	90	5.0
51065 <u>Cystotomy, with stone basket extraction of ureteral calculus</u>	12.0	30	5.0
51080 <u>Drainage of perivesical or prevesical space abscess</u>	8.0	90	5.0
EXCISION			
51500 Excision of urachal cyst or sinus, with or without umbilical hernia repair	14.0	90	5.0
51520 Cystotomy; for simple excision of vesical neck ((independent)) separate procedure	16.0	90	5.0
51525 for excision of bladder diverticulum, single or multiple ((independent)) separate procedure	20.0	90	5.0
51530 for excision of bladder tumor	16.0	90	5.0
(For transurethral excision, see 52200-52240)			
51535 <u>Cystotomy for excision ((σ))₂ incision or repair of ureterocele((:)); unilateral</u>	16.0	90	5.0
51536 bilateral	18.0	90	5.0
(For transurethral excision, see 52300)			
((51560)) 51550 Cystectomy, partial; simple	18.0	90	6.0
51555 <u>complicated (eg, postradiation, previous surgery, difficult location)</u>	20.0	90	6.0
51565 <u>Cystectomy, partial, with reimplantation of ureter(s) into bladder (ureteroneocystostomy)</u>	24.0	90	6.0
51570 <u>Cystectomy, complete; ((independent)) separate procedure</u>	26.0	90	6.0
51575 ((with pelvic and bilateral iliac lymphadenectomy (independent procedure))) with bilateral pelvic lymphadenectomy, including external iliac, hypogastric and obturator nodes	34.0	90	6.0

	Unit Value	Follow-up Days=	Basic Anes@
51580 ((with uretero-sigmoidostomy)) Cystectomy, complete with ureterosigmoidostomy or ureterocutaneous transplantations;	34.0	120	7.0
51585 ((with pelvic and bilateral iliac lymphadenectomy)) with bilateral pelvic lymphadenectomy, including external iliac, hypogastric and obturator nodes	40.0	120	7.0
51590 ((with uretero-iteal)) Cystectomy, complete, with ureteroileal conduit or sigmoid bladder, including bowel anastomosis;	44.0	120	7.0
51595 ((with pelvic and bilateral iliac lymphadenectomy)) with bilateral lymphadenectomy, including external iliac, hypogastric and obturator nodes	50.0	120	7.0
51597 <u>Pelvic exenteration, complete, for vesical, prostatic, or urethral malignancy, with removal of bladder and ureteral transplantations, with or without hysterectomy and/or abdominoperineal resection of rectum and colon and colostomy, or any combination thereof</u>			<u>BR</u>

(For supplemental skills of two surgeons, see WAC 296-22-010, item 5b, and modifier -62)

INTRODUCTION

(For bladder catheterization, see 53670-53675)

51600 Injection procedure for cystography or voiding urethracystography	0.2	0	
51605 <u>Injection procedure and placement of chain for contrast and/or chain urethrocytography</u>	0.4	0	
51610 Injection procedure for retrograde urethrocytography	0.3	0	
(For injection procedure for retroperitoneal pneumography, see 49430)			
*51700 Bladder irrigation, simple, lavage and/or instillation	*0.2	0	
51705* <u>Change of cystostomy tube; simple</u>	0.3	0	
51710* <u>complicated</u>	<u>BR</u>		
51720 Bladder instillation of anticarcinogenic agent (including detention time)	0.8	0	

URODYNAMICS

The following section (51725-51796) lists procedures that may be used separately or in many and varied combinations. All of the presently known urodynamic procedures are listed as are some of their most frequently used combinations. When multiple procedures are performed in the same investigative session, modifier '-51' should be employed.

All procedures in this section imply that these services are performed by, or are under the direct supervision of, a physician and that all instruments, equipment, fluids, gases, probes, catheters, technician's fees, medications, gloves, trays, tubing and other sterile supplies be provided by the physician. When the physician only interprets the results and/or

Follow-
Unit up Basic
Value Days= Anes@

Follow-
Unit up Basic
Value Days= Anes@

operates the equipment, a p.c. (professional component modifier '-26') should be used to identify physicians' services.

Only the urodynamic testing is included in this section. The nerve blocks that are listed may be pudendal, unilateral or bilateral; sacral, unilateral or bilateral, single or multiple; or subarachnoid and epidural of the sacral segments. They are listed in the neurosurgical section 62274-62279 and 64430-64441.

CYSTOMETROGRAM STUDIES (CMG)

As a single procedure (separate procedure) performed in any body position, including residual urine volume, volume at first urge to void, bladder capacity, tracing (if available), interpretation and report. (For simultaneous electromyogram see 51786 and 51788)

51725	Simple cystometrogram (eg, spinal manometer)	BR		
51726	Complex cystometrogram (eg, calibrated electronic equipment); with gas			
51727	with liquid	BR		
51728	with simultaneous (rectal, gastric or intraperitoneal) "intra-abdominal" pressure	BR		
51729	with voiding pressure	BR		
51730	with simultaneous "intra-abdominal" and voiding pressure	BR		
51731	before and after pharmacological testing, with gas	BR		
51732	before and after pharmacological testing, with liquid	BR		
51733	before and after nerve block, gas or liquid	BR		

UROFLOWMETRIC STUDIES (UFR)

As a single procedure (separate procedure) performed in any body position, including volume, flow rate, and tracing (if available), interpretation and report. (For simultaneous electromyogram see 51787, 51788). (For simultaneous voiding pressure see 51795-51796)

EXTERNAL MEASUREMENTS

51736	Simple uroflowmetry (eg, stopwatch flow rate, mechanical uroflowmeter);	BR		
51737	before and after pharmacological testing	BR		
51738	before and after nerve block	BR		
51739	Sound recording of external stream (eg, Lyons type)	BR		
51740	Cystometrogram ((independent)) separate procedure)	1.0	0	
51750	Uroflowmetric evaluation (separate procedure)	0.3	0	

REPAIR

51800	Cystoplasty or cystourethroplasty((:)), plastic operation on bladder and/or vesical neck (anterior Y-plasty, vesical fundus resection((; etc-)), any procedure, with or without wedge resection of posterior vesical neck	20.0	90	5.0
51820	Cystourethroplasty with unilateral or bilateral ureteroneocystostomy	30.0	90	5.0
51840	Anterior ((vesico-urethropexy)) vesicourethropexy, or urethropexy (((-;-)) Marshall-Marchetti type); simple	14.5	90	4.0
51841	complicated (eg, secondary repair)	21.0	90	4.0

(For urethropexy (Peyreya type), see 57289)

51860	Cystorrhaphy((:)), suture of bladder wound, injury or rupture((:)); simple	14.5	90	4.0
51865	complicated	BR+		6.0
51880	Closure of cystostomy ((independent)) separate procedure) ..	8.0	90	3.0
51900	Closure of vesicovaginal fistula, abdominal approach	22.0	90	5.0
	(For vaginal approach, see 57320-57330)			
51920	Closure of vesicouterine fistula ((with or without hysterectomy));	20.0	90	5.0
51925	with hysterectomy	20.0	90	5.0
	(For closure of vesicoenteric fistula, see 44660, 44661)			
	(For closure of rectovesical fistula, see 45800-45805)			
51940	Closure of ((extrophy)) extrophy (see also 54390)	BR+		5.0
51960	((Enterocystoplasty)) Enterocystoplasty, including bowel anastomosis	30.0	90	5.0
	(For supplemental skills of two surgeons, see WAC 296-22-010, item 5b, and modifier -62)			
51980	Cutaneous vesicostomy	18.0	90	5.0

ENDOSCOPY - CYSTOSCOPY, URETHROSCOPY, CYSTOURETHROSCOPY

NOTES

Endoscopic descriptions are listed so that the main procedure can be identified without having to list all the minor related functions performed at the same time. For example: meatotomy, urethral calibration and/or dilation, urethroscopy, and cystoscopy prior to a transurethral resection of prostate; ureteral catheterization following extraction of ureteral calculus; internal urethrotomy and bladder neck fulguration when performing a cystourethroscopy for the female urethral syndrome. When the secondary procedure requires significant additional time and effort, it may be identified by the addition of modifier '-22.' For example: Urethrotomy performed for a documented pre-existing stricture or bladder neck contracture.

((Cystoscopy, Urethroscopy, Cystourethroscopy))

52000	((Diagnosite)) Cystourethroscopy ((independent)) separate procedure), office;	1.2	7	3.0
52005	with ureteral catheterization, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service	1.6	7	3.0
52007	with ureteral catheterization and brush biopsy of ureter or renal pelvis for cytology ..	BR	3	3.0
52010	with ejaculatory duct catheterization	1.6	7	
52100	Cystourethroscopy, hospital	2.0	7	3.0
52105	with ureteral catheterization, with or without irrigation, instillation, or ureteropyelography exclusive of radiologic service ...	3.6	7	3.0
52107	with ureteral catheterization and brush biopsy of ureter			

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
52110	BR	3	3.0	52283	2.0	7	
	3.6	7	3.0	52285			
52190	SV.&		3.0	52290	3.4	7	3.0
TRANSURETHRAL SURGERY (URETHRA, PROSTATE, BLADDER, URETER)				52300	4.0	30	3.0
((52200))52202	2.6	7	3.0	52305	6.0	30	3.0
52204	2.0	7	3.0	52310	6.0	30	3.0
((52210))52212	2.6	7	3.0	52315	BR+	30	3.0
52214	2.0	7	3.0	52320	7.0	30	3.0
((52220))52222	2.6	7	3.0	52330	5.0	30	3.0
52224	2.0	7	3.0	52332	BR	7	3.0
((52230))52232	6.0	30	3.0	52335	4.2	7	3.0
52234	5.0	30	3.0	52340	6.0	30	3.0
52235	12.0	30	3.0	52500	10.0	90	4.0
52240	18.0	30	5.0	((52600))52601	20.0	90	5.0
52250	6.0	30	3.0	52605	4.2	0	3.0
52260	3.0	30	3.0	52606	2.4	0	
52265	1.4	7		(For other approaches, see ((55800-55840)) 55801-55845)			
52270	4.0	45	3.0	((52610))52612			
52275	4.0	45	3.0				
52277	6.0	30	3.0	52614	15.0	90	5.0
52280	3.0	7	3.0	52620	11.0	90	5.0
52281	2.4	7					
52282	3.2	7	3.0				

Unit Follow-up Basic
Value Days= Anes@

Unit Follow-up Basic
Value Days= Anes@

52630	days ((<u>post-operative</u>)) <u>postoperative</u> of regrowth of obstructive tissue longer than one year ((<u>post-operative</u>)) <u>postoperative</u>	6.0	90	5.0
52640	of ((<u>post-operative</u>)) <u>postoperative</u> bladder neck contracture	20.0	90	5.0
52650	Transurethral cryosurgical removal of prostrate (<u>postoperative irrigations and aspirations of sloughing tissue included</u>)	10.0	90	5.0
52700	Transurethral drainage of prostatic abscess	20.0	120	5.0
52800	Litholapaxy(;) ₂ crushing of calculus in bladder and removal of fragments(;) ₂ simple, small (less than 2.5 cm)	8.0	60	5.0
52805	complicated or large (over 2.5 cm)	10.0	30	3.0
		14.0	30	3.0

53240	Marsupialization of urethral diverticulum, male or female	4.0	30	3.0
53250	Excision of bulbourethral gland (Cowper's gland)	12.0	60	3.0
53260	Excision or fulguration(;) ₂ urethral polyp(s), distal urethra (For endoscopic approach, see ((52200-52220)) 52212-52224)	1.0	15	3.0
53265	urethral caruncle	1.2	15	3.0
53270	Skene's glands	1.2	15	3.0
53275	urethral prolapse	3.0	30	3.0

REPAIR

(For hypospadias, see 54300-54330)

53400	Urethroplasty(;) ₂ first stage, for fistula, diverticulum, or stricture, (((;-g)) eg, Johannsen type)	10.0	60	3.0
53405	second stage (formation of urethra), including urinary diversion	14.0	60	3.0
53410	Urethroplasty(;) ₂ one-stage reconstruction of male anterior urethra	16.0	60	3.0
53420	Urethroplasty(;) ₂ two-stage reconstruction or repair of prostatic or membranous urethra(;) ₂ first stage	20.0	60	3.0
53425	second stage	20.0	90	3.0
53430	Urethroplasty(;) ₂ reconstruction of female urethra	14.0	90	3.0
53440	Operation for correction of male urinary incontinence, with or without introduction of prosthesis	20.0	90	3.0
53442	Removal of perineal prosthesis introduced for continence	BR	90	3.0
53445	Operation for correction of male urinary incontinence with placement of inflatable urethral or bladder neck sphincter, including placement of pump and/or reservoir	BR	90	3.0
53447	Removal of inflatable sphincter including pump and/or reservoir	BR	90	3.0
53449	Surgical correction of hydraulic abnormality of inflatable sphincter	BR	90	3.0
53450	Urethral meatoplasty, with mucosal advancement	4.0	30	3.0
53460	Urethral meatoplasty, with partial excision of distal urethral segment (Richardson type procedure)	3.4	30	3.0

(For meatotomy, see 53020, 53025)

SUTURE

((53500))53502	Urethrorrhaphy(;) ₂ suture of urethral wound or injury, female	BR+		3.0
53505	Urethrorrhaphy, suture of urethral wound or injury, penile, perineal	10.0	90	3.0
53510	prostatomembranous	14.0	90	3.0
53515		20.0	90	3.0
53520	Closure of urethrostomy or urethrocuteaneous fistula, male ((<u>independent</u>)) <u>separate procedure</u>	6.0	90	3.0

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-260 URETHRA.

Unit Follow-up Basic
Value Days= Anes@

(For endoscopy, see cystoscopy, urethroscopy, cystourethroscopy, 52000-52805)

(For injection procedure for urethrocytography, see 51600-51610)

INCISION

53000	Urethrotomy or urethrostomy, external (((<u>independent</u>)) <u>separate procedure</u>)(;) ₂ pendulous urethra	2.4	15	3.0
53010	perineal urethra, external (((<u>independent procedure</u>)))	6.0	30	3.0
53020	Meatotomy(;) ₂ cutting of meatus (((<u>independent</u>)) <u>separate procedure</u>), except infant; office	1.0	15	3.0
53021	hospital	3.0	15	3.0
53025	Meatotomy, cutting of meatus (<u>separate procedure</u>), infant	0.6	15	3.0
53040	Drainage of deep periurethral abscess (For subcutaneous abscess, see 10060-10061)	3.0	30	3.0
53060	Drainage of Skene's gland abscess or cyst	1.2	15	3.0
53080	Drainage of perineal urinary extravasation(;) ₂ uncomplicated (((<u>independent</u>)) <u>separate procedure</u>)	4.0	15	3.0
53085	complicated	BR+		5.0

EXCISION

53200	Biopsy of urethra	2.0	7	3.0
53210	Urethrectomy, total, including cystostomy(;) ₂ female	14.0	60	5.0
53215	male	18.0	60	5.0
53220	Excision or fulguration of carcinoma of urethra	BR+		3.0
53230	Excision of urethral diverticulum((<u>-female</u>)) (((<u>independent</u>)) <u>separate procedure</u>); female	10.0	60	3.0
53235	male	12.0	60	3.0

	Unit Value	Follow-up Days=	Basic Anes@
(For closure of ((urethro-vagin- at)) <u>urethrovaginal fistula</u> , see 57310)			
(For closure of ((urethro-rectal)) <u>urethrorectal fistula</u> , see 45820, 45825)			
MANIPULATION			
*53600 Dilation of urethral stricture by passage of sound, male((:)); initial	*0.4	0	
*53601 subsequent	*0.3	0	
*53605 Dilation of urethral stricture or vesical neck by passage of sound or urethral dilator, male, general or conduction (spinal) anesthesia, hospital	1.6	3	3.0
*53620 Dilation of urethral stricture by passage of filiform and follower, male((:)); initial	*0.8	0	
*53621 subsequent	*0.6	0	
*53640 Passage of filiform and follower for acute vesical retention, male	*0.8	0	
*53660 Dilation of female urethra including suppository and/or instillation((:)); initial	*0.4	0	
*53661 subsequent	*0.3	0	
53665 in hospital, general anesthesia	1.5	3	3.0
53670* Catheterization; simple	0.3	0	
53675* complicated (may include difficult removal of balloon catheter)	0.7	0	
53899 Unlisted procedure, urinary system	BR		

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-265 PENIS.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
54000 ((Dorsal or lateral slit of prepuce, newborn (independent procedure))) <u>Slitting of prepuce, dorsal or lateral, (separate procedure); newborn</u>	0.6	7	
54001 except newborn	1.4	7	3.0
54015 <u>Incision and drainage of penis, deep</u>	1.4	15	3.0

DESTRUCTION

*54050 ((Condylomata) <u>Destruction of condylomata, penis, multiple, simple, chemical</u>	*0.3	0	3.0
*54055 ((electrodesiccation) <u>electrodesiccation</u>	*0.8	0	3.0
*54060 surgical excision	*1.0	0	3.0
54065 extensive	BR+		3.0

(For destruction or excision of other lesions, see Integumentary System)

EXCISION

54100 Biopsy of penis, cutaneous (((independent)) <u>separate procedure</u>)	0.6	7	3.0
54105 deep structures	1.4	15	3.0
54110 <u>Excision of penile plaque (Peyronie disease)</u>	7.4	30	3.0

	Unit Value	Follow-up Days=	Basic Anes@
54115 <u>Removal foreign body from deep penile tissue (eg, plastic implant)</u>	6.0	45	3.0
54120 Amputation of penis, partial	10.0	60	3.0
54125 complete	20.0	60	3.0
54130 <u>Amputation of penis, radical((:)); with bilateral ((superficial inguinal)) <u>inguinofemoral lymphadenectomy</u></u>	26.0	90	3.0
54135 ((with bilateral inguinal and iliac lymphadenectomy)) <u>in continuity with bilateral pelvic lymphadenectomy, including external iliac, hypogastric and obturator nodes</u>	30.0	90	5.0
(For lymphadenectomy (((independent)) separate procedure), see 38760-((38766))38771)			
54150 Circumcision, clamp procedure((:)); newborn	0.8	15	
((54151))54152 except newborn office	1.0	15	3.0
54154 except newborn, hospital	2.4	15	3.0
54160 <u>Circumcision, surgical excision other than clamp or dorsal slit((:)); newborn</u>	0.8	30	
54161 except newborn	3.0	30	3.0
INTRODUCTION			
*54200 Injection procedure for Peyronie((s)) disease	*0.4	0	
54205 <u>with surgical exposure of plaque</u>	7.4	30	3.0
54220 Irrigation of corpora cavernosa for priapism	BR+		3.0
54230 <u>injection procedure for corpora cavernosography</u>	BR		3.0
54240 <u>penile plethysmography</u>	BR		3.0
REPAIR			
(For other ((urethroplasty)) <u>urethroplasties</u> , see 53400-53430)			
54300 Plastic operation of penis for straightening of chordee (((e.g.)) eg, hypospadias), with or without mobilization of urethra;	8.0	60	3.0
54305 with transplantation of prepuce	14.0	60	3.0
54320 Urethroplasty((:)), formation of urethra, ((Dennis-Brown)) <u>Denis-Browne type ((procedure)) operation (including urinary diversion)((:)); penile or penoscrotal</u>	14.0	90	3.0
54325 scrotal or perineal	18.0	90	3.0
54330 Urethroplasty and straightening of chordee (including urinary diversion), complete, one stage, for hypospadias	20.0	90	3.0
(For other methods of hypospadias repair, see 15000-15730)			
54360 <u>Plastic operation on penis to correct angulation</u>			
54380 Plastic operation on penis for epispadias distal to external sphincter	BR+		3.0
54385 with incontinence	BR+		4.0
54390 with ((extrophy)) <u>extrophy of bladder</u>	BR+		4.0

	Unit Value	Follow-up Days=	Basic Anes@
54400 Plastic operation for insertion of penile prosthesis.....((BR+))	14.0		3.0
54402 Removal of penile prosthesis.....	BR		
54405 Plastic operation for insertion of inflatable penile prosthesis, including placement of pump and/or reservoir.....	BR		
54407 Removal of inflatable penile prosthesis, including pump and/or reservoir.....	BR		
55409 Surgical correction of hydraulic abnormality of inflatable prosthesis.....	BR		
54420 ((Priapism operation (i.e., corpora)) Corpora cavernosa-saphenous vein shunt (priapism operation), unilateral or bilateral.....((BR+))	10.0		3.0
54430 Corpora cavernosa-corpora spongiosum shunt (priapism operation), unilateral or bilateral..	10.0	0	3.0
54440 Plastic operation of penis for injury.....	BR+		3.0

MANIPULATION

54450 Foreskin manipulation including lysis of preputial adhesions and stretching.....	BR		
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AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-270 TESTIS.

	Unit Value	Follow-up Days=	Basic Anes@
EXCISION			
54500 Biopsy, needle (((independent)) separate procedure).....	0.4	7	
54505 Biopsy, incisional, ((unilateral)) (((independent)) separate procedure); unilateral.....	3.0	15	3.0
54506 bilateral (((independent procedure))).....	4.0	15	3.0
(When combined with vasogram, seminal vesiculogram or epididymogram, see 55300)			
54510 Excision of local lesion of testis .	6.0	30	3.0
54520 Orchiectomy, simple, (including subcapsular), with or without testicular prosthesis, scrotal or inguinal approach((:)); unilateral.....	6.0	30	3.0
54521 bilateral.....	8.0	30	3.0
54530 Orchiectomy, radical, for tumor((:)); inguinal approach....	8.0	30	3.0
54535 with abdominal exploration....	12.0	30	4.0
(For orchiectomy with repair of hernia, see 49510)			
(For radical ((retroperitoneal)) retroperitoneal lymphadenectomy, see 38780)			
54550 Exploration for undescended testis (inguinal or scrotal area); unilateral.....	8.0	30	4.0
54555 bilateral.....	12.0	30	4.0

	Unit Value	Follow-up Days=	Basic Anes@
54560 Exploration for undescended testis with abdominal exploration; unilateral.....	12.0	30	4.0
54565 bilateral.....	15.0	30	5.0

REPAIR

54600 Reduction of torsion of testis ((by)), surgical ((means)), with or without fixation of contralateral testis.....	8.0	30	3.0
54620 Fixation of contralateral testis (((independent)) separate procedure).....	4.0	30	3.0
54640 Orchiopexy, any type, with or without hernia repair((:)); unilateral.....	12.0	30	3.0
54641 bilateral.....	18.0	30	4.0
54645 second stage (Torek type)....	2.0	30	3.0
54660 Insertion of testicular prosthesis((:)) (separate procedure); unilateral (((independent procedure))).....	4.0	30	3.0
54661 bilateral.....	6.0	30	3.0
54670 Suture or repair of testicular injury.....	8.0	30	3.0
54680 Transplantation of testis(es) to thigh (because of scrotal destruction).....	10.0	30	3.0

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-275 EPIDIDYMISS.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
54700 Incision and drainage of epididymis, testis and/or scrotal space (((e.g.)) abscess or hematoma).....	1.4	7	3.0
EXCISION			
54800 Biopsy of epididymis, needle....	0.4	7	
54820 Exploration of epididymis with or without biopsy.....	6.0	30	3.0
54830 Excision of local lesion of epididymis.....	6.0	30	3.0
54840 Excision of spermatocele with or without epididymectomy.....	8.0	45	3.0
(With hernia repair, see 49515)			
54860 Epididymectomy, unilateral....	8.0	45	3.0
54861 bilateral.....	10.0	45	3.0

REPAIR

54900 Epididymovasostomy((:)), anastomosis of epididymis to vas deferens((:)); unilateral.....	10.0	90	3.0
54901 bilateral.....	14.0	90	3.0

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-280 TUNICA VAGINALIS.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
*55000 Puncture aspiration of hydrocele, with or without injection of medication.....	*0.48	0	

	Unit Value	Follow-up Days=	Basic Anes@
EXCISION			
55040 Excision of hydrocele((:)); unilateral	8.0	45	3.0
<u>55041</u> <u>bilateral</u>	<u>12.0</u>	<u>45</u>	<u>3.0</u>
(With hernia repair, see 49515)			

	Unit Value	Follow-up Days=	Basic Anes@
REPAIR			
55060 Repair of hydrocele (Bottle type)	6.0	45	3.0

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)
WAC 296-22-285 SCROTUM.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
*55100 Drainage of scrotal wall abscess (see also 54700)	*0.4	0	3.0
55120 Removal of foreign body in scrotum	BR+		3.0
EXCISION			
(For ((local)) excision of local lesion of skin of scrotum, see integumentary system)			
55150 Resection of scrotum	BR+		3.0

	Unit Value	Follow-up Days=	Basic Anes@
REPAIR			
55170 Scrotoplasty((:)); plastic operation on scrotum	BR+		3.0

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)
WAC 296-22-290 VAS DEFERENS.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
55200 Vasotomy((:)); cannulization with or without incision of vas, unilateral or bilateral (((<u>independent</u>)) <u>separate procedure</u>) ..	3.6	30	3.0

	Unit Value	Follow-up Days=	Basic Anes@
EXCISION			
55250 Vasectomy, unilateral or bilateral (((<u>independent</u>)) <u>separate procedure</u>), including <u>postoperative semen examination(s)</u>	3.6	30	3.0

	Unit Value	Follow-up Days=	Basic Anes@
INTRODUCTION			
55300 Vasotomy for vasograms, seminal vesiculograms, or epididymograms, unilateral or bilateral	3.6	30	3.0
(When combined with 54505 or 54506, apply WAC 296-22-010, item 7a)			
(For radiographic procedure ((<u>value</u>)), see 74440, 74441)			

	Unit Value	Follow-up Days=	Basic Anes@
REPAIR			
55400 Vasovasostomy, ((<u>basovasorrhaphy</u>)) <u>vasovasorrhaphy</u> ; unilateral	10.0	90	3.0
55401 <u>bilateral</u>	14.0	90	3.0

SUTURE

	Unit Value	Follow-up Days=	Basic Anes@
55450 Ligation (percutaneous) of vas deferens, unilateral or bilateral (((<u>independent</u>)) <u>separate procedure</u>)	1.2	30	3.0

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)
WAC 296-22-295 SPERMATIC CORD.

	Unit Value	Follow-up Days=	Basic Anes@
EXCISION			
55500 Excision of hydrocele of spermatic cord, unilateral (((<u>independent</u>)) <u>separate procedure</u>) ..	6.0	45	3.0
55520 Excision of lesion of spermatic cord (((<u>independent</u>)) <u>separate procedure</u>)	6.0	30	3.0
55530 Excision of varicocele or ligation of spermatic veins for varicocele; (((<u>independent</u>)) <u>separate procedure</u>)	8.0	45	3.0
55535 abdominal approach	9.5	45	5.0
55540 with hernia repair	9.5	45	3.0

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)
WAC 296-22-300 SEMINAL VESICLES.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
55600 Vesiculotomy, unilateral ((<u>or bilateral</u>))	8.0	60	5.0
<u>55601</u> <u>bilateral</u>	<u>12.0</u>	<u>60</u>	<u>5.0</u>
<u>55605</u> <u>complicated</u>	<u>14.0</u>	<u>60</u>	<u>3.0</u>

	Unit Value	Follow-up Days=	Basic Anes@
EXCISION			
55650 Vesiculectomy, any approach((:)); unilateral ((<u>or bilateral</u>))	20.0	90	5.0
<u>55651</u> <u>bilateral</u>	<u>20.0</u>	<u>90</u>	<u>5.0</u>
55680 Excision of Mullerian duct cyst ..	20.0	90	5.0
(For injection procedures, see 52010, 52110, 55300)			

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)
WAC 296-22-305 PROSTATE.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
55700 Biopsy, prostate((:)); needle or punch, single or multiple, any approach	1.4	15	3.0
55705 incisional, any approach	8.0	30	4.0
55720 Prostatotomy((:)); external drainage of prostatic abscess, any approach((:)); simple	8.0	60	4.0
55725 complicated	14.0	60	4.0
(For transurethral drainage, see 52700)			

	Unit Value	Follow-up Days=	Basic Anes@
55740 Prostatolithotomy((-)), removal of prostatic ((<u>calculus</u>)) calculus (((<u>independent</u>)) <u>separate procedure</u>)	20.0	60	4.0

EXCISION

(For ((transurethral)) transurethral removal of prostate, see 52600-52650)

((55800) <u>55801</u> Prostatectomy, including control of postoperative bleeding during initial hospitalization, complete (vasectomy, meatotomy, urethral calibration and/or dilation and internal urethrotomy are included); perineal, subtotal	20.0	90	6.0
55810 <u>perineal radical</u>	26.0	90	6.0
((55820) <u>55821</u> <u>suprapubic, subtotal, one or two stages</u>	20.0	90	5.0
((55830) <u>55831</u> <u>retropubic, subtotal</u>	20.0	90	5.0
55840 <u>retropubic, radical</u>	26.0	90	6.0
55845 <u>retropubic, radical, with bilateral pelvic lymphadenectomy, including external iliac, hypogastric and obturator nodes</u>	BR		

OTHER PROCEDURES

(For artificial insemination, see 58310)

55899 <u>Unlisted procedure, male genital system</u>	BR		
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NEW SECTION

WAC 296-22-306 INTERSEX SURGERY.

	Unit Value	Follow-up Days=	Basic Anes@
55970 Intersex surgery; male to female	BR		
55980 Intersex surgery; female to male	BR		

FEMALE GENITAL SYSTEM

(For pelvic laparotomy, see 49000)

(For paracentesis, see 49080, 49081)

(For injection procedure for pelvic pneumography, see 49440)

(For secondary closure of abdominal wall evisceration or ((disruption))disruption, see 49900)

(For ((chemotherapy)) chemotherapy, see ((~~96030-96050~~) 90790-90793)

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-307 PERINEUM.

	Unit Value	Follow-up Days=	Basic Anes@
*56000 Incision and drainage of perineal abscess (nonobstetrical) (see also 10060 et seq((-))	*0.6	0	3.0

EXCISION

56100 Biopsy of perineum (((<u>independent</u>)) <u>separate procedure</u>)	0.6	7	3.0
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(For excision of local lesion, see ((~~11400-11660, 13000-15760~~) 11420-11426, 11620-11626)

REPAIR

56200 Perineoplasty((-)), repair of perineum ((<u>t</u>))nonobstetrical((<u>t</u>)), (((<u>independent</u>)) <u>separate procedure</u>) (see also 56800)	BR+		3.0
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(For repair of wounds to genitalia, see 12001-12007, 12041-12047, 13131, 13132)

(For repair of recent injury of vagina and perineum, nonobstetrical, see 57210)

(For anal sphincteroplasty, see 46750, 46751)

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-310 VULVA AND INTROITUS.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
(For incision and drainage of sebaceous cyst, furuncle, or caruncle, see 10000-10020, 10060, 10061)			

	Unit Value	Follow-up Days=	Basic Anes@
*56400 Incision and drainage, abscess of vulva, extensive	*0.8	0	3.0
*56420 Incision and drainage of Bartholin's gland abscess, unilateral	*1.0	0	3.0
(For incision and drainage of Skene's gland abscess or cyst, see 53060)			
56440 Marsupialization of Bartholin's gland cyst	4.0	30	3.0
DESTRUCTION			
*56500 ((Condylomata, multiple, simple, chemical)) <u>Destruction of condylomata, vulva, multiple; simple, chemical</u>	*0.48	0	3.0
*56505 ((electrodesiccation)) <u>electrodesiccation</u>	*0.8	0	3.0
*56510 surgical excision	*1.0	0	3.0
56515 extensive	BR+		3.0
56520 <u>Cryosurgery of benign lesion, vulva; simple</u>	BR		
56521 <u>multiple</u>	BR		
(For destruction of Skene's gland cyst or abscess, see 53270)			
(For cautery destruction of urethral caruncle, see 53265)			
EXCISION			
56600 Biopsy of vulva ((independent)) <u>separate procedure</u>	0.6	7	3.0
(For local excision or fulguration of lesion(s) of external genitalia, see ((11400-11660, 13000-15760, 17000-17300)) 11420-11426, 11620-11626, 17000-17302, 56500-56521)			
56620 Vulvectomy(;;); partial, unilateral or bilateral (but less than 80% of vulvar area)	12.0	60	3.0
56625 complete (skin and subcutaneous tissue), bilateral	15.0	60	3.0
(For skin graft, see 15000 et seq)			
56630 <u>Vulvectomy, radical; without skin graft</u>	20.0	120	3.0
56635 with ((inguinal)) <u>inguinofemoral lymphadenectomy, unilateral</u>	24.0	120	5.0
56636 with <u>inguinofemoral lymphadenectomy, bilateral</u>	26.0	120	5.0
56640 ((with inguinal and iliac lymphadenectomy, unilateral)) <u>vulvectomy, radical, with inguino femoral, iliac, and pelvic lymphadenectomy; unilateral</u>	26.0	120	5.0
56641 <u>bilateral</u>	30.0	120	5.0
(For lymphadenectomy, see 38760-38780)			
((56660 Circumcision, female))	1.0	30	3.0
56680 Clitoridectomy, simple	8.0	30	3.0
56685 extensive	12.0	90	3.0
56700 Hymenectomy(;;), partial excision of hymen	2.4	30	3.0
56710 <u>Plastic revision of hymen</u>	2.4	30	3.0
*56720 <u>Hymenotomy, simple incision</u>	*1.4	0	3.0

	Unit Value	Follow-up Days=	Basic Anes@
56740 Excision of Bartholin's gland or cyst	4.8	30	3.0
(For excision of Skene's gland, see 53270)			
(For excision of urethral caruncle, see 53265)			
(For excision or fulguration of urethral carcinoma, see 53220)			
(For excision or marsupialization of urethral diverticulum, see 53230-53240)			
REPAIR			
(For repair of urethra for mucosal prolapse, see 53275)			
56806 Plastic repair of ((vulva (for dysparunia))) <u>introitus</u>	4.8	30	3.0
SUTURE			
(For episiorrhaphy, episioepineorrhaphy((recent injury of vulva and/or perineum (non-obstetrical), see 57210)) for recent injury of vulva and/or perineum, nonobstetrical, see 57210)			

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)
WAC 296-22-315 VAGINA.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
57000 Colpotomy with exploration ((or drainage of pelvic abscess))	4.0	30	3.0
57010 <u>with drainage of pelvic abscess</u>	BR		
*57020 Colpocentesis ((independent)) <u>separate procedure</u>	*0.8	0	3.0
EXCISION			
57100 Biopsy of vaginal mucosa; <u>simple</u> ((independent)) <u>separate procedure</u>	0.72	7	3.0
57105 <u>extensive, requiring suture (including cysts)</u>	BR		
57108 <u>Colpectomy, obliteration of vagina; partial</u>	12.0	60	3.0
(For excision and/or fulguration of local lesion(s), see 11200-11660, 17000-17300)			
57110 ((Colpectomy)) <u>complete</u> ((obliteration of vagina))	14.0	60	3.0
57120 ((Colpocleisis)) <u>Colpocleisis (Le Fort type)</u>	12.0	60	3.0
57130 Excision of vaginal septum	BR+		3.0
57135 <u>Excision of vaginal cyst or tumor</u>	BR		
INTRODUCTION			
*57150 Irrigation and/or application of ((any)) medicament for treatment of bacterial, parasitic or fungoid disease	*0.24	0	
*57160 Insertion of pessary	*0.24	0	
57170 <u>Diaphragm fitting with instructions</u>	0.24		

	Unit Value	Follow-up Days=	Basic Anes@
REPAIR			
(For urethral suspension, (Marshall-Marchetti type) abdominal approach, see 51840, 51841)			
57200 Colporrhaphy(:); suture of injury of vagina (non(=)obstetrical)	BR+	3.0	
57210 Colpoperineorrhaphy(:); suture of injury of vagina and/or perineum (non(=)obstetrical)	BR+	3.0	
57220 Plastic operation on urethral sphincter, vaginal approach (eg, Kelly urethral plication) ((independent)) separate procedure)	7.0	60	3.0
57230 Plastic repair of urethrocele ((independent)) separate procedure)	7.0	60	3.0
57240 Anterior colporrhaphy(:); repair of cystocele with or without repair of urethrocele ((independent)) separate procedure)	8.5	60	4.0
57250 Posterior colporrhaphy(:); repair of rectocele ((independent procedure))with or without perineorrhaphy	7.0	60	3.0
((57255 with perineoplasty or perineorrhaphy 8.0 60 3.0))			
(For repair of rectocele (separate procedure) without posterior colporrhaphy, see 45560)			
57260 Combined ((anterior-posterior)) anteroposterior colporrhaphy;	12.0	60	3.0
57265 with enterocele repair	14.0	60	3.0
((57267 with Manchester type repair 14.0 60 3.0))			
57270 Repair of enterocele, abdominal approach ((independent)) separate procedure)	14.0	60	4.0
57280 Colpopexy, abdominal approach	14.0	60	4.0
57288 Sling operation for stress incontinence (eg, fascia or synthetic)	15.0	90	5.0
57289 Pereyra procedure, including anterior colporrhaphy	13.0	90	3.0
57290 Construction of artificial vagina (vaginal atresia or absence)	BR+		3.0
57300 Closure of rectovaginal fistula(:); vaginal approach	14.5	90	3.0
57305 abdominal approach	18.0	90	5.0
57307 abdominal approach, with concomitant colostomy	20.0	90	5.0
57310 Closure of urethrovaginal fistula	14.5	60	4.0
57320 Closure of vesicovaginal fistula, vaginal approach	14.5	60	4.0
(For concomitant cystostomy, see 51005-51040 and WAC 296-22-010, item 7a)			
((57220)) 57330 transvesical and vaginal approach	BR+		5.0
(For abdominal approach, see 51900)			
MANIPULATION			
*57400 Dilatation of vagina under anesthesia	*0.72	0	3.0
*57410 Pelvic examination under anesthesia	*0.72	0	3.0
ENDOSCOPY			
57450 Culdoscopy, ((with or without biopsy (independent procedure)))			

57451 <u>diagnostic;</u>	4.0	15	3.0
<u>with biopsy and/or lysis of adhesions or tubal sterilization</u>	4.0	15	3.0
57452* <u>Colposcopy; (separate procedure)</u>	1.0	0	
57454* <u>with biopsies, or biopsy of the cervix</u>	2.0	0	

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)
WAC 296-22-325 CERVIX UTERI.

	Unit Value	Follow-up Days=	Basic Anes@
EXCISION			
(For radical surgical procedures, see 58200-58240)			
*57500 Biopsy, single or multiple, or local excision of lesion, with or without fulguration, ((quadrant biopsy)) ((independent)) separate procedure)	*0.6	0	3.0
*57510 Cauterization of cervix(:); electro or thermal((office))	*0.6	0	
57511* cryocautery, initial or repeat	0.6	0	
57520 Biopsy of cervix, circumferential (cone) with or without dilation and ((curettage)) curettage, with or without Sturmdorff type repair (see also 58120)	4.8	45	3.0
57530 Trachelectomy(:) (cervicectomy(:)); amputation of cervix ((independent)) separate procedure)	4.8	45	3.0
57540 Excision of cervical stump, abdominal approach;	12.0	45	4.0
57545 with pelvic floor repair	BR+		4.0
57550 Excision of cervical stump, vaginal approach;	12.0	45	3.0
57555 with anterior and/or posterior repair	14.5	45	3.0
57556 with repair of enterocele	14.5	45	4.0

	Unit Value	Follow-up Days=	Basic Anes@
INTRODUCTION			
(For insertion of any radioactive material, see 77520-77550)			
(For insertion of intra-uterine device, see 58300)			
*57600 ((insertion)) Introduction of any hemostatic agent or pack for spontaneous hemorrhage ((independent)) separate procedure(:); initial	*0.72	0	3.0
*57620 subsequent	*0.24	0	3.0

REPAIR			
57700 Tracheloplasty (Shirodkar or Lash type ((procedure)) operation)	6.0	45	3.0
57720 Trachelorrhaphy(:); plastic repair of uterine cervix, vaginal approach	6.0	45	3.0

MANIPULATION			
*57800 Dilatation of ((cervical)) cervical canal, instrumental ((independent)) separate procedure)	*0.6	0	3.0
57820 Dilatation and ((curettement)) curettage of cervical stump	4.0	15	3.0

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-330 CORPUS UTERI.

	Unit Value	Follow-up Days=	Basic Anes@
EXCISION			
*58100 Endometrial biopsy, suction type (((independent)) separate procedure).....	*0.72	0	3.0
58101* Endometrial washings (eg, for cytology sampling).....	1.0	0	3.0
58102 Office endometrial curettage....	2.0	0	3.0
58103 Menstrual extraction.....	0.5	0	
58120 Dilation and curettage, diagnostic and/or therapeutic (((non((-))obstetrical) (see also 57520)) nonobstetrical).....	4.0	15	3.0
(For postpartum hemorrhage, see 59160)			
58140 Myomectomy((-single or multiple)), excision of fibroid tumor of uterus, ((abdominal approach)) single or multiple, (((independent)) procedure); abdominal approach.....	14.0	45	5.0
58145 vaginal approach.....	BR+		5.0
58150 Total hysterectomy (corpus and cervix), with or without removal of tube(s), ((and/or ovaries, one or both)) with or without removal of ovary(s).....	16.0	45	5.0
58180 Supracervical hysterectomy((-) (subtotal hysterectomy), with or without tube(s), ((and/or ovaries, one or both)) with or without removal of ovary(s)....	16.0	45	5.0
58200 Total hysterectomy, extended, corpus cancer, including partial vaginectomy;.....	20.0	120	5.0
58205 with bilateral radical pelvic lymphadenectomy.....	24.0	120	6.0
58210 Total hysterectomy, extended, cervical cancer, with bilateral radical pelvic lymphadenectomy (Wertheim type operation)....	30.0	120	7.0
58240 Total hysterectomy or cervicectomy, with removal of bladder and ureteral transplantations, and/or ((abdomino-perineal)) abdominoperineal resection of rectum and colon and colostomy, or any combination thereof (pelvic exenteration).....	BR+		7.0
58260 Vaginal hysterectomy;.....	16.0	45	4.0
58265 with plastic repair of vagina, anterior and/or posterior colporrhaphy.....	18.0	45	4.0
58267 with colpo-urethrocytopexy (Marshal-Marchetti-Krantz type).....	20.0	90	5.0
58270 with repair of enterocele....	18.0	45	4.0
58275 Vaginal hysterectomy, with total or partial colpectomy;.....	18.0	45	4.0
58280 with repair of enterocele....	18.0	45	4.0
58285 Vaginal hysterectomy, radical (Schauta type ((procedure)) operation).....	24.0	120	7.0

INTRODUCTION

	Unit Value	Follow-up Days=	Basic Anes@
(For insertion of radioactive substance into corpus with or without dilation and curettage, see 77520-77550)			
*58300 Insertion of ((intro-uterine)) intrauterine device (IUD).....	*1.0	0	3.0
58301 Removal of intrauterine device (IUD).....	BR		
58310 Artificial insemination.....	BR		
*58320 Insufflation of uterus and tubes with air and CO ₂	*1.0	0	3.0
58340 Injection procedure for hysterosalpingography.....	0.8	0	
58350* Hydrotubation of oviduct, including materials.....	1.0	0	
(For materials supplied by physician, see 99070)			

REPAIR

58400 Uterine suspension, with or without shortening of round ligaments, with or without shortening of sacrouterine ligaments; (((independent)) separate procedure).....	12.0	45	4.0
58410 with presacral sympathectomy.....	14.0	45	5.0
58430 ((Interposition)) Interposition operation (Watkins type ((procedure))), with or without pelvic floor repair.....	14.0	45	4.0
(For Manchester type repair, see 57267)			
58500 Hysterosalpingostomy((-)), anastomosis of tube(s) to uterus.....	14.0	45	4.0
58520 Hysterorrhaphy((-); repair of ruptured uterus (non((-))obstetrical).....	12.0	45	4.0
58540 Hysteroplasty((-); repair of uterine anomaly (Strassman type).....	14.0	45	4.0

SUTURE

(For closure of vesicouterine fistula, see 51920)

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-333 OVIDUCT.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
58600 Transection of fallopian tube, ((unilateral or bilateral)) abdominal or vaginal approach, unilateral or bilateral.....	12.0	45	4.0
58605 Transection of fallopian tube, abdominal or vaginal approach, postpartum, during same hospitalization (((independent)) separate procedure).....	7.0	45	4.0
(For laparoscopic procedures, see 58980-58987)			
58610 Ligation of fallopian tube(s)....	BR		
58615 Occlusion of fallopian tube(s) by device (eg, band, clip, Falope ring) vaginal or suprapubic approach.....	BR		4.0

Unit Follow-up Basic
Value Days= Anes@

Unit Follow-up Basic
Value Days= Anes@

(For laparoscopic approach, see 58983)

58987 with aspiration (single or multiple) 8.0 10 5.0

EXCISION

58700	Salpingectomy, complete or partial, unilateral or bilateral ((independent)) separate procedure	12.0	45	4.0
58720	Salpingo-oophorectomy, complete or partial, unilateral or bilateral ((independent)) separate procedure	12.0	45	4.0
58740	Salpingoplasty, unilateral or bilateral ((independent)) separate procedure	14.0	45	4.0

OTHER PROCEDURES

58999 Unlisted procedure, female genital system nonobstetrical BR

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-340 ((GENERAL INFORMATION AND INSTRUCTIONS)) MATERNITY CARE AND DELIVERY.

NOTES

((Total maternity care includes)) The services normally required in uncomplicated maternity cases include antepartum care, delivery and postpartum care. ((The listed values include the services normally provided in uncomplicated maternity care. (For multiple pregnancies, see WAC 296-20-010, item 10 and modifier-22.))

Antepartum care includes usual prenatal services ((e.g.)) initial and subsequent history, physical examinations, recording of weight, blood pressure, fetal heart tones, routine chemical urinalyses, maternity counseling).

Delivery includes vaginal delivery (with or without ((episiorrhaphy)) episiotomy, with or without forceps or breech delivery) or Cesarean section, and resuscitation of new born infant when necessary.

Postpartum care includes hospital and office visits following vaginal or cesarean section delivery.

For medical complications of pregnancy ((e.g.)) toxemia, cardiac problems, neurological problems((?)) or other problems requiring additional or unusual services or requiring hospitalization, see ((appropriate)) services in **MEDICINE** section. ((f))For surgical complications of pregnancy not listed below, see appropriate procedures in **SURGERY** ((section, WAC 296-22010, item 1-4 and modifier-68.))

If a physician provides all or part of the antepartum and/or postpartum ((care of a patient;)) patient care but does not perform the delivery due to termination of pregnancy by abortion or referral to another physician for delivery, see 59420-59430.

(For circumcision of newborn, see 54150-54160)

((For obstetrical anesthesia provided by the attending physician, see modifier-47.))

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-337 OVARY.

Unit Follow-up Basic
Value Days= Anes@

INCISION

58800	Drainage of ovarian cyst(s), unilateral, or bilateral, (separate procedure); vaginal approach	4.0	15	4.0
58805	abdominal approach	12.0	45	4.0
58820	Drainage of ovarian abscess((:)); vaginal approach	4.0	15	4.0
58822	abdominal approach	6.0	15	4.0

EXCISION

58900	Biopsy of ovary, unilateral or bilateral ((independent)) separate procedure	12.0	45	4.0
58920	Wedge resection or bisection of ovary, unilateral or bilateral	12.0	45	4.0
58925	Ovarian cystectomy, unilateral or bilateral	12.0	45	4.0
58940	Oophorectomy, ((unilateral or bilateral;)) partial or total, unilateral or bilateral;	12.0	45	4.0
58945	with total omentectomy	16.0	60	4.0

ENDOSCOPY-LAPAROSCOPY

The endoscopic descriptors in this publication are listed so that the main procedure can easily be identified without having to list all the minor related procedures that may be performed at the same time (such as lysis of adhesions and fulguration of bleeding points during laparoscopy with fulguration transection of the oviducts). When the secondary procedures involve significant additional time and effort, they may be listed using modifier -50.

(For peritoneoscopy, see 49300-49303)

58980	Laparoscopy for visualization of pelvic viscera;	6.0	10	5.0
58982	with fulguration of oviducts (with or without transection)	8.0	10	5.0
58983	with occlusion of oviducts by device (eg, band, clip, or Falope ring)	BR		5.0

(For vaginal or suprapubic approach, see 58615)

58984	with fulguration of ovarian or peritoneal lesions	8.0	10	5.0
58985	with lysis of adhesions	8.0	10	5.0
58986	with biopsy (single or multiple)	8.0	10	5.0

Unit Follow-up Basic
Value Days= Anes@

INCISION

59000	Amniocentesis for diagnostic purposes, abdominal approach	1.0	0	
59010*	Amnioscopy	1.0	0	
59011*	Amnioscopy (intraovular)	BR	0	
59020*	Fetal oxytocin stress test	1.0	0	
59030*	Fetal scalp blood sampling;	1.0	0	
59031*	repeat	0.5	0	
59050	Initiation and/or supervision of internal fetal monitoring during labor by consultant	1.0	0	

EXCISION

59100	Hysterotomy, abdominal, for removal of hydatidiform mole;	14.0	45	5.0
59101	with tubal ligation	14.0	45	6.0
59105	Hysterotomy, abdominal, for legal abortion;	16.0	45	6.0
59106	with tubal ligation	18.0	45	6.0

EXCISION

59120 Surgical treatment of ectopic pregnancy((:)); tubal, requiring salpingectomy and/or

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
59121	14.0	45	5.0	59500			
59125	BR						
59126	BR+		5.0	59501	10.0	7	5.0
59130	BR			59520	13.0	45	5.0
59135	BR+		5.0	59521	10.0	7	5.0
59140	BR+		5.0	59540	13.0	45	5.0
59160	4.0	15	3.0	59541	12.0	7	5.0
INTRODUCTION				59544	16.0	45	5.0
(For intrauterine fetal transfusion, see 36460)				59560	12.0	7	6.0
(For introduction of hypertonic solution and/or prostaglandins to initiate labor, see 59850)				59561	16.0	45	6.0
((59240 Introduction of hypertonic solution to initiate labor, abdominal approach) 2.0 0))				59580	12.0	7	6.0
REPAIR				59581	16.0	45	6.0
(For tracheloplasty, see 57700)				ABORTION			
59300	2.0	0	3.0	59800			
59305	BR+		3.0	59801	4.0	45	3.0
((For perineorrhaphy only, by other than delivering physician, see 57210))				59810			
59350	BR			59811	4.0	45	3.0
59351	BR			59820			
DELIVERY, ANTEPARTUM AND POSTPARTUM CARE				59820			
59400	8.0	45	3.0	59830			
59410	4.0	45	3.0	59830	6.0	45	3.0
59420	Sv. &			59850	6.0	45	5.0
59430	Sv. &			59851	6.0	45	5.0
CESAREAN SECTION				59852			
(For standby attendance of infant, see ((99040)) 99151)				59899			
				OTHER PROCEDURES			
				59899			

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-350 THYROID GLAND.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
*60000 Incision and drainage of thyroglossal cyst, infected.....	*0.6	0	3.0
EXCISION			
60100 Biopsy, thyroid, needle	1.2	7	
60200 ((Local excision)) Excision of ((small)) cyst or adenoma of thyroid, or transection of isthmus	9.5	45	5.0
60220 Total thyroid lobectomy, unilateral	14.0	45	5.0
60225* <u>with contralateral subtotal lobectomy, including isthmus</u>	<u>14.0</u>	<u>45</u>	<u>5.0</u>
60240 Thyroidectomy(;) total or complete	16.0	45	5.0
60242 near total	14.0	45	5.0
60245 Thyroidectomy, subtotal or partial;	14.5	45	5.0
60246 <u>with removal of substernal thyroid gland, cervical approach</u>	<u>BR</u>		
((60250 total or subtotal for malignancy with radical neck dissection	28.0	180	6.0
60255 with limited neck dissection	24.0	180	5.0
60252 Thyroidectomy, total or subtotal for malignancy; with limited neck dissection	24.0	180	5.0
60254 with radical neck dissection ..	28.0	180	6.0
(For parathyroid transplant, see 60510)			
60260 Thyroidectomy, secondary(;) unilateral	15.0	45	5.0
60261 bilateral	18.0	45	5.0
60270 Thyroidectomy, including substernal thyroid gland, sternal split or transthoracic approach ..	BR+		
60280 Excision of thyroglossal duct cyst or sinus	11.0	45	4.0

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-355 PARATHYROID, THYMUS, ADRENAL GLANDS AND CAROTID BODY.

	Unit Value	Follow-up Days=	Basic Anes@
EXCISION			
(For pituitary and pineal surgery, see Nervous System)			
60500 Parathyroidectomy or exploration of parathyroid(s);	18.0	45	5.0
60505 with mediastinal exploration, sternal split or transthoracic approach	24.0	60	12.0
60510 Transplantation of parathyroid gland(s) during thyroidectomy ..	BR		
60520 Thymectomy, partial or total (((independent))) separate procedure)	18.0	60	12.0
60540 Adrenalectomy, partial or complete, or exploration of adrenal with or without biopsy, transabdominal, lumbar or dorsal			

	Unit Value	Follow-up Days=	Basic Anes@
(((independent))) separate procedure, unilateral;	19.0	90	9.0
60545 with excision of adjacent retroperitoneal tumor	22.0	90	9.0
60550 (((bilateral, one stage))) Adrenalectomy, partial or complete, or exploration of adrenal gland with or without biopsy, transabdominal, lumbar or dorsal, bilateral; one stage	24.0	90	9.0
60555 two stages	BR+		9.0
60600 Excision of carotid body tumor(;) without excision of carotid artery	17.0	60	8.0
60605 with excision of carotid artery	24.0	60	8.0
60699 Unlisted procedure, endocrine system	BR		

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-365 SKULL, MENINGES, AND BRAIN.

	Unit Value	Follow-up Days=	Basic Anes@
(For injection procedure for cerebral angiography, see 36100-36220)			
(For injection procedure for ventriculography, see 61025, 61030, 61120, 61130)			
(For injection procedure for pneumoencephalography, see 61053, 62286)			
(((incision))) PUNCTURE FOR INJECTION, DRAINAGE OR ASPIRATION			
*61000 Subdural tap through fontanelle (infant) (((initial))) ; unilateral or bilateral; initial	*2.0	0	
*61001 subsequent taps (((unilateral or bilateral)))	*1.4	0	
*61020 Ventricular puncture through previous burr hole (((or))) , fontanelle, or implanted ventricular catheter/reservoir; without injection	*2.0	0	
61025 with gas injection procedure for ventriculography	5.0	7	7.0
61030 with injection procedure for positive contrast ventriculography (((or CSF flow study; including lumbar puncture for recovery of contrast material)))	5.6	7	7.0
61045* with injection procedure of dye or radioactive material for CSF flow study, including lumbar puncture	5.6	7	7.0
*61050 Cisternal puncture; (((independent))) separate procedure)	*1.8	0	
61051* with injection of dye or drug	2.5	0	6.0
61052* with injection of gas or contrast media for myelography ..	3.0	0	6.0
61053* with injection of gas or contrast media for cisternography or pneumoencephalography	4.5	0	6.0
61070* Puncture of shunt tubing or reservoir for aspiration or injection procedure	2.0	0	0

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
((61100 Burr hole(s), subdural exploratory, not followed by other surgery, unilateral	13.0	30	8.0	61321	infratentorial	28.0	90 13.0
((61101 bilateral	18.0	30	8.0	61330	((Orbital decompression, unilateral)) Exploration of decompression of orbit only, transcranial approach, unilateral	26.0	90 9.0
					bilateral	BR	
				61331	bilateral	BR	
				61332	Exploration or decompression of orbit (transcranial approach); with biopsy	BR	
				61333	with removal of lesion	BR	
				61334	with removal of foreign body	BR	
				61340	Other cranial decompression ((e.g.) eg, subtemporal), ((unilateral)) supratentorial; unilateral	16.0	90 9.0
61120 Burr hole(s) for ventricular puncture (including injection of ((air or contrast media;)) gas, contrast media, dye, or radioactive material); not followed by other surgery	10.0	30	7.0	61341	bilateral	24.0	90 9.0
61130 ((when)) followed by other surgery	7.0	0		61345	Other cranial decompression, posterior fossa	22.0	90 13.0
61140 Burr hole(s) or trephine; for biopsy of brain or intracranial lesion	20.0	0	5.0		(For orbital decompression by lateral wall approach, Kroenlein type, see 67440)		
61150 Burr hole(s) for drainage of brain abscess or cyst	24.0	90	9.0	61440	Craniotomy for section of tentorium cerebelli (separate procedure)	BR	
61151 subsequent tapping ((t)) aspiration((t)) of intracranial abscess ((in operating room or bedside)) or cyst	2.0	0	4.0				
((61170)) 61154 Burr ((holes only)) hole(s); for evacuation and/or drainage of hematoma, extradural((:)) or subdural ((or intracerebral))	26.0	90	9.0	((61350)) 61450 ((Surgery of sensory root of gasserian ganglion)) Craniectomy for section, compression, or decompression of sensory root of gasserian ganglion	28.0	90	10.0
61156 for aspiration of hematoma or cyst, intracerebral	25.0	90	9.0	((61360)) 61460 ((Sub-occipital;)) Craniectomy, suboccipital; for section of one or more cranial nerves	34.0	90	10.0
61210 for implanting ventricular catheter, reservoir, or pressure recording device	8.0	30	7.0	((61370)) 61470 ((Sub-occipital, for tractotomy (of medulla; mesencephalon)) for medullary tractotomy	40.0	90	11.0
61250 Burr hole(s) or trephine, supratentorial, exploratory, not followed by other surgery; unilateral	15.0	30	7.0	61480	for mesencephalic tractotomy or pedunculotomy	40.0	90 11.0
61251 bilateral	22.0	30	7.0	((61380)) 61490 ((Lobotomy, including cingulotomy)) Craniotomy for lobotomy, including cingulotomy; unilateral	24.0	90	9.0
61253 Burr hole(s) or trephine, infratentorial, unilateral or bilateral	BR			((61400 Removal of foreign body from brain	34.0	90	11.0
(If burr hole(s) or trephine followed by craniotomy at same operative session, use 61304-61321; do not use 61250, 61251, or 61253)				61491	bilateral	30.0	90 11.0
((Craniectomy or Bone Flap Craniotomy))							
CRANIECTOMY OR CRANIOTOMY							
((61300)) 61304 ((Exploratory; supratentorial)) Craniectomy or craniotomy, exploratory; supratentorial	34.0	90	9.0				
61305 infratentorial ((sub-occipital)) posterior fossa	40.0	90	10.0	61500	Craniectomy, trephination, bone flap craniotomy; for tumor of skull	BR+	8.0
61310 Craniectomy or craniotomy, evacuation of hematoma, extradural, subdural((:)) or intracerebral; supratentorial	28.0	90	13.0	61510	((Excision of brain tumor, abscess or cyst, supratentorial)) for excision of brain tumor, supratentorial; except meningioma	34.0	90 12.0
61311 infratentorial	26.0	90	13.0				
61320 ((Drainage of abscess)) Craniectomy or craniotomy, drainage of intracranial abscess; supratentorial	28.0	90	11.0	((61515 infratentorial (sub-occipital))	40.0	90	11.0
				61512	for excision of meningioma, supratentorial	40.0	90 11.0

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
61514							
61516	32.0		9.0				
61518	30.0		11.0	((61665))61548	34.0	90	10.0
61519	40.0	90	11.0				
61520	44.0	90	13.0				
61522	40.0	90	11.0	61550	18.0	90	9.0
				61552	22.0	90	9.0
61524	30.0	90	13.0	61553	BR		
				61555	BR		
61526	30.0	90	13.0				
				61570	BR		
61530	BR						
				SURGERY FOR ANEURYSM OR ARTERIOVENOUS MALFORMATION			
((61540))61532							
((61560))61565	40.0	90	13.0	61700	40.0	90	13.0
				61702	44.0	90	15.0
61565				61703	BR		
((61580))61534							
				61705	32.0	90	15.0
((61585))61536				61708	30.0	90	9.0
				61710	24.0	90	9.0
((61600))61538				61711	36.0	90	15.0
((61610))61539	38.0	90	9.0				
				61712	BR		
((61620))61542							
				STEREOTAXIS			
((61640))61544	48.0	90	9.0	61715	24.0	90	5.0
((61660))61546	30.0	90	11.0				

	Unit Value	Follow-up Days=	Basic Anes@
hole(s) and localizing and recording techniques, single or multiple stages((-for pallidotomy)); globus pallidus or thalamus	38.0	90	8.0
((61810 for thalamotomy	38.0	90	8.0
((61820) 61735 ((for other) subcortical structure(s) other than globus pallidus or thalamus	38.0	90	8.0
((61830 for ablation of pituitary	32.0	90	4.0
((61890) 61780 Stereotactic localization, including burr hole(s), ventriculography and introduction of subcortical electrodes	BR+		8.0
61790 Stereotactic lesion of gasserian ganglion, percutaneous, by neurolytic agent (eg, alcohol, thermal, electrical, radiofrequency)	18.0	90	7.0

NEUROSTIMULATORS, INTRACRANIAL

61850 Burr or twist drill hole(s) for implantation of neurostimulator electrodes; cortical	15.0	30	8.0
61855 subcortical	18.0	30	8.0
61860 Craniectomy or craniotomy for implantation of neurostimulator electrodes, cerebral; cortical	15.0	30	6.0
61865 subcortical	18.0	30	6.0
61870 Craniectomy for implantation of neurostimulator electrodes, cerebellar; cortical	18.0	30	7.0
61875 subcortical	19.0	30	7.0
61880 Revision or removal of intracranial neurostimulator electrodes ...	BR		
61885 Incision for subcutaneous placement of neurostimulator receiver, direct or inductive coupling ...	BR		
61888 Revision or removal of intracranial neurostimulator receiver ...	BR		
((Introduction			
(For injection procedure for cerebral angiography, see 36100-36120, 36210, 36220)			
(For ventriculography, see 61025, 61030, 61120, 61130)			
61900 Injection procedure for pneumoencephalography	3.6	7	5.0
(See WAC 296-22-010, item 2)			

REPAIR

62000 Elevation of depressed skull fracture(s); simple, extradural ...	18.0	90	9.0
62005 compound or comminuted, extradural	24.0	90	9.0
62010 with debridement of brain and repair of dura	29.0	90	11.0
62100 Repair of ((CSF/dural)) dural/CSF leak, including surgery for rhinorrhea/otorrhea ...	30.0	90	9.0
(For repair of spinal dural/CSF leak, see 63708)			

	Unit Value	Follow-up Days=	Basic Anes@
62120 Repair of encephalocele, including cranioplasty	BR+		9.0
62140 Cranioplasty for skull defect, up to ((two inches (5 cm))) 5 cm diameter	20.0	90	9.0
62141 larger than ((two inches (5 cm))) 5 cm diameter	BR+		9.0
62145 ((with reparative brain surgery)) Cranioplasty for skull defect with reparative brain surgery	BR+		11.0
((62160 Craniectomy for craniostenosis, single suture	24.0	90	9.0
62161 multiple sutures	30.0	90	9.0

CSF SHUNT

62180 Ventriculocisternostomy (Torkildsen type operation)	32.0	90	11.0
62190 Creation of shunt; subdural-atrial, -jugular, -auricular	24.0	90	9.0
62192 subdural-peritoneal, -pleural, -other terminus	22.0	90	9.0
62194 Replacement or irrigation, subdural catheter	6.0	90	5.0
62200 ((Third ventriculocisternostomy)) Ventriculocisternostomy, third ventricle	32.0	90	11.0
62220 ((Ventriculo-auricular shunt)) Creation of shunt; ventriculo-atrial, -jugular, -auricular	26.0	90	11.0
62223 ventriculo-peritoneal, -pleural, -other terminus	24.0	90	9.0
62225 Replacement or irrigation ((of)), ventricular catheter	10.0	90	5.0
62230 ((replacement or irrigation of obstructed valve or auricular catheter)) Replacement or revision of shunt, obstructed valve, or distal catheter in shunt system	20.0	90	11.0
((62235 replacement of entire system	26.0	90	11.0
((62240) 62256 ((removal of complete system without replacement)) Removal of complete shunt system; without replacement ...	10.0	90	11.0
((62300 Ventriculo-peritoneal-pleural-ureteral-fallopian or other shunt	26.0	90	11.0
62305 co-surgeon for shunt placement	13.0	90	
62258 with replacement by similar or other shunt at same operation	3.0	0	9.0
(For percutaneous irrigation or aspiration of shunt reservoir, see 61070)			

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-370 SPINE AND SPINAL CORD.

	Unit Value	Follow-up Days=	Basic Anes@
(For application of caliper or tongs, see 20660.)			
(For ((open reduction)) treatment of fracture or dislocation of spine, see 22325-22370.)			

((Incision)) PUNCTURE FOR INJECTION, DRAINAGE OR ASPIRATION

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
62270*	1.6	0					
62272*	2.0			((Other)) ((7-0))			
62273*	2.1			((When combined with arthrodesis, see 22550-22565))			
62274*	2.1	0		63050	38.0	90	8.0
62276*	3.5	0		63100	28.0	90	8.0
62277*	3.0			63105	BR+		8.0
62278*	2.1	0		63140	32.0	90	8.0
62279*	3.0			Cervical			
62280*	5.0			Thoracic			
62282*	5.0			7.0			
62284*	3.0	7		63145	40.0	90	8.0
62286*	4.0	7		Cervical			
62289*	2.8			Thoracic			
62290*	2.8			7.0			
62291*	2.8			7.0			
62294*	2.8			(When followed by arthrodesis, see 22550-22565)			
LAMINECTOMY OR LAMINOTOMY, FOR EXPLORATION OR DECOMPRESSION				63020	26.0	90	9.0
62295	32	90	8.0	63021	28.0	90	9.0
((63000))62296				63030	25.0	90	7.0
	32.0			63031	27.0	90	7.0
				63035	BR		9.0
				63040	BR		9.0
				63041	BR		8.0
((63005))62297	26.0	90	8.0	63042	BR		7.0
62301	BR		9.0	(Do not use both 63035 and 63040-63042 for same procedure)			
62302	BR		8.0	63060	28.0	90	8.0
62303	BR		7.0	63064	30.0	90	8.0
63001	30.0	90	9.0	63075	26.0	90	9.0
63003	30.0	90	8.0	63076	5.0		
63005	24.0	90	7.0	(For diskectomy with arthrodesis, see 22550-22566)			
63010	28.0	90	7.0	INCISION			
63015	BR+			63180	38.0	90	8.0
				63182	BR		

	Unit Value	Follow-up Days=	Basic Anes@
63185 Laminectomy for rhizotomy, one or two segments	28.0	90	8.0
63190 more than two segments	BR		8.0
63194 Laminectomy for cordotomy, unilateral, one stage; cervical	32.0	90	8.0
63195 thoracic	32.0	90	7.0
63196 Laminectomy for cordotomy, bilateral, one stage; cervical	32.0	90	8.0
63197 thoracic	32.0	90	7.0
63198 Laminectomy for cordotomy, bilateral, two stages within fourteen days; cervical	40.0	90	8.0
63199 thoracic	40.0	90	7.0

EXCISION FOR LESION OTHER THAN HERNIATED INTER-VERTEBRAL DISK

((63300))63210 Laminectomy, one or two segments, for excision of intraspinal lesion(??); cervical ((or thoracic))	34.0		((Cervical)) 90 8.0 ((Thoracic)) ((7-0))
63215 thoracic	34.0	90	7.0
((63305))63220 lumbar	30.0	90	7.0
((63310) extensive, any level	BR +		Cervical 8-0 Other 7-0

(When combined with arthrodesis, see 22550-22565)

63400 Laminotomy, one or two segments, for herniated intervertebral disc(s), and/or decompression of nerve root(s), unilateral, cervical or thoracic	26.0	90	Cervical 8-0 Thoracic 7-0
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63402 thoracic, costovertebral approach	32.0	90	9-0
63405 lumbar	24.0	90	7-0
63410 any level, bilateral, add	6.0	90	
63415 any level, extensive or re-exploration	BR +		Cervical 8-0 Other 7-0

(For anterior approach or for combination with arthrodesis, see 22550-22565)

Introduction

(For injection procedure for pneumoencephalography, see 61900)

63500 Injection, neurolytic substance (e.g., alcohol, phenol), subarachnoid	BR +		
63505 extradural (epidural)	BR +		
63510 Injection procedure for myelography, lumbar	2.4	7	3-0
63515 cervical	2.4	7	3-0
63520 posterior fossa	2.4	7	3-0

(See WAC 296-22-010, item 2)

63530 Injection procedure for discography, single or multiple levels, lumbar	3-2	0	3-0
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63535 cervical	3-2	0	3-0
63540 Chemolysis one or more disc levels			
63240 Laminectomy, more than two segments, for excision of intraspinal lesion; cervical	BR		9.0
63241 thoracic	BR		8.0
63242 lumbar	BR		7.0
63250 Laminectomy for excision or occlusion of arteriovenous malformation of cord; cervical	BR		9.0
63251 thoracic	BR		8.0

STEREOTAXIS

63600 Stereotactic lesion of spinal cord, percutaneous, any modality (including stimulation and/or recording)	18.0	90	
63610 Stereotactic stimulation of spinal cord, percutaneous, separate procedure not followed by other surgery	8.0	0	

NEUROSTIMULATORS, SPINAL

63650 Percutaneous implantation of neurostimulator electrodes; epidural	BR		
63652 intradural (spinal cord)	BR		
63655 Laminectomy for implantation of neurostimulator electrodes; epidural	BR		
63656 endodural	BR		
63657 subdural	BR		
63658 spinal cord (dorsal or ventral)	BR		
63660 Revision or removal of spinal neurostimulator electrodes	BR		
63685 Incision for subcutaneous placement of neurostimulator receiver, direct or inductive coupling	BR		
63688 Revision or removal of spinal neurostimulator receiver	BR		

REPAIR

63700 Repair of meningocele; less than 5 cm diameter	20.0	90	9.0
63702 larger than 5 cm diameter	BR		
63704 Repair of myelomeningocele; less than 5 cm diameter	BR		
63706 larger than 5 cm diameter	BR		
(For complex skin closure, see Integumentary System)			
63708 Repair dural/CSF leak	BR		
63710 Dural graft, spinal	BR		

(For laminectomy and section of dentate ligaments, with or without dural graft, cervical, see 63180-63182)

((63720) Repair of meningocele)	24.0	90	9-0
(For complex skin closure, see Integumentary System, 14000-15710))			

SHUNT, SPINAL CSF

63740 ((Lumbar)) Creation of shunt, lumbar, subarachnoid-peritoneal, -pleural, -ureteral, -fallopian or other ((shunt))	26.0	90	9.0
((63745) co-surgeon for shunt placement	13-0	90))	

	Unit Value	Follow-up Days=	Basic Anes@
63744 Replacement, irrigation or revision of lumbar-subarachnoid shunt . . .	10.0	90	5.0
63746 Removal of entire lumbar-subarachnoid shunt system without replacement	10.0	90	5.0

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-375 EXTRACRANIAL NERVES, PERIPHERAL NERVES AND AUTONOMIC NERVOUS SYSTEM.

	Unit Value	Follow-up Days=	Basic Anes@
(For intracranial surgery on cranial nerves, see 61450, 61460, 61790)			

**((Incision
Transection or Avulsion of Nerve**

	Unit Value	Follow-up Days=	Basic Anes@
(For intracranial surgery on cranial nerves, see 61350, 61360)			
64000 Supraorbital	7.0	30	3.0
64010 Infraorbital	7.0	30	3.0
64020 Mental	7.0	30	3.0
64030 Inferior alveolar by osteotomy . . .	10.0	30	3.0
64040 Facial, differential or complete . . .	BR+		3.0
64050 Greater occipital	7.0	30	3.0
64060 Phrenic	5.0	30	3.0
64070 Vagus (vagotomy), cervical	7.0	30	3.0
64071 transthoracic	14.0	45	11.0
64072 abdominal	14.0	45	6.0

	Unit Value	Follow-up Days=	Basic Anes@
(For vagotomy combined with gastric procedures, see 43635, 43640, 43825, 43855, 43865)			
64080 Obturator, extrapelvic, with or without adductor tenotomy, unilateral	6.0	45	3.0
64081 bilateral	9.0	45	3.0
64085 intrapelvic, unilateral	10.0	60	4.0
64086 bilateral	13.0	60	4.0
64090 Other spinal nerve, extradural . . .	BR+		3.0

Excision

	Unit Value	Follow-up Days=	Basic Anes@
(For excision of tender scar, skin and subcutaneous tissues with or without tiny neuroma, see 11400-11460, 13000-13300)			
(For neurectomy, intrinsic musculature foot, see 28030)			
(For Morton's neurectomy, see 28080)			
(For popliteal neurectomy, see 27320)			
64200 Neuroma, cutaneous nerve, surgically identifiable	3.0	30	3.0
64205 digital nerve, one or both, same digit	3.0	30	3.0
64210 hand or foot	6.0	30	3.0
64215 major peripheral nerve	10.0	30	3.0
64220 each additional nerve (except same digit): list separately by this number and value at 25% of the listed value for the appropriate nerve			
64240 Neurofibroma or neurilemmoma, cutaneous nerve	6.0	30	3.0
64245 major peripheral nerve	BR+		3.0
64250 extensive (including malignant type)	BR+		3.0

	Unit Value	Follow-up Days=	Basic Anes@
Surgical Sympathectomy			
64300 Cervical, unilateral	14.5	60	6.0
64301 bilateral	19.0	60	6.0
64320 Cervico-thoracic, unilateral, one stage	20.0	60	6.0
64321 bilateral or two stage unilateral	28.0	60	8.0
64330 Thoraco-lumbar, unilateral	20.0	60	6.0
64331 bilateral	28.0	60	8.0
64340 Hypogastric or presacral neurectomy (independent procedure) . . .	14.0	60	5.0
64350 Lumbar, unilateral	15.0	60	5.0
64351 bilateral	21.0	60	5.0

**Introduction (Independent Procedure))
INTRODUCTION/INJECTION OF ANESTHETIC AGENT (NERVE BLOCK), DIAGNOSTIC OR THERAPEUTIC SOMATIC NERVES**

((Nerve Block))

Anesthetic Agent (diagnostic or therapeutic)
(For anesthesia services in conjunction with surgical procedures, see Anesthesia section)

Somatic

64400 ((Trigeminal, any division or branch)) Injection, anesthetic agent; trigeminal nerve, any division or branch	((0-6))	0	
64402* facial nerve	3.0	0	
64405 greater occipital nerve	2.5	0	
64408* vagus nerve	2.5	0	
64410 phrenic nerve	2.5	0	
64412* spinal accessory nerve	2.5	0	
64415 brachial plexus	2.5	0	
64417* axillary nerve	2.5	0	
64420 ((Intercostal) intercostal nerve, single	2.0	0	
64421* intercostal nerves, multiple, regional block	2.5	0	
64425 ilioinguinal, iliohypogastric nerves	2.0	0	
64430 pudendal nerve	2.5	0	
64435 paracervical (uterine) nerve	2.5	0	
64440 ((Thoracic, lumbar, sacral, coccygeal (paravertebral)) paravertebral nerve (thoracic, lumbar, sacral, coccygeal), single	3.0	0	
64441* paravertebral nerves, multiple, regional block	3.2	0	
64445 sciatic nerve	2.5	0	
64450 other peripheral nerve or branch	2.0	0	
((64455 Myoneural junction, diagnostic block	0.8	0))	

(For phenol ((equivalent)) destruction, see ((64650)) 64600-64640)

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
(For subarachnoid or subdural, see 62274-62277)				64620 ((intercostal)) Destruction by neurolytic agent; intercostal nerve.....	((+4)) 4.0	7	
(For epidural or caudal, see 62278, 62279)				64630 pudendal nerve.....	((BR+)) 5.0		
((64460 Subarachnoid or subdural (spinal), simple.....	1.0	0		64640 Other peripheral nerve or branch.....	((BR+)) 5.0		
64465 differential.....	BR+			((64650 Myoneural junction (phenol equivalent).....	1.8	7))	
64470 Epidural, caudal or other level....	1.0	0))		SYMPATHETIC NERVES			
SYMPATHETIC NERVES				64680 Destruction by neurolytic agent, celiac plexus, with or without radiologic monitoring.....	6.0	7	
64505* Injection, anesthetic agent; sphenopalatine ganglion.....	3.0	0		((Repair))			
64508* carotid sinus (separate procedure).....	2.5	0		64702 Neurolysis; digital, one or both, same digit.....	4.8	90	3.0
64510 stellate ganglion (cervical ((sympathetics)) sympathetic).....	((+0)) 2.0	0		64704 nerve of hand or foot.....	8.0	90	3.0
64520 lumbar or thoracic (paravertebral sympathetic).....	((0+0)) 3.0	0		64708 Neurolysis, major peripheral nerve; arm or leg; other than specified.....	12.0	90	3.0
64530* celiac plexus, with or without radiologic monitoring.....	4.0			64712 sciatic nerve.....	BR+		3.0
NEUROSTIMULATORS, PERIPHERAL NERVE				64713 brachial plexus.....	BR+		3.0
64550 Application of surface (transcutaneous) neurostimulator.....	BR			64714 lumbar plexus.....	BR		3.0
64553 Percutaneous implantation of neurostimulator electrodes; cranial nerve.....	BR			64716 Neurolysis and/or transection; cranial nerve (specify).....	BR		
64555 peripheral nerve.....	BR			64718 ulnar nerve at elbow.....	15.0	90	3.0
64560 autonomic nerve.....	BR			64719 ulnar nerve at wrist.....	9.0	90	3.0
64565 neuromuscular.....	BR			64721 median nerve at carpal tunnel.....	10.0	90	3.0
64573 Incision for implantation of neurostimulator electrodes; cranial nerve.....	BR			64722 Decompression; unspecified nerve(s) (specify).....	BR		
64575 peripheral nerve.....	BR			64726 plantar digital nerve.....	6.0	90	3.0
64577 autonomic nerve.....	BR			64727 Internal neurolysis by dissection, with or without microdissection (list separately in addition to code for primary neuroplasty).....	BR		
64580 neuromuscular.....	BR			INTRODUCTION/INJECTION OF ANESTHETIC AGENT (NERVE BLOCK), DIAGNOSTIC OR THERAPEUTIC SOMATIC NERVES			
64585 Revision or removal of peripheral neurostimulator electrodes.....	BR			TRANSECTION OR AVULSION OF NERVES			
64590 Incision for subcutaneous placement of neurostimulator receiver, direct or inductive coupling.....	BR			64732 Transection or avulsion of; supraorbital nerve.....	7.0	30	3.0
64595 Revision or removal of peripheral neurostimulator receiver.....	BR			64734 infraorbital nerve.....	7.0	30	3.0
((Neurolytic Agent (alcohol, phenol, etc.)) DESTRUCTION BY NEUROLYTIC AGENT (EG, CHEMICAL, THERMAL, ELECTRICAL, RADIOFREQUENCY) SOMATIC NERVES				64736 mental nerve.....	7.0	30	3.0
64600 ((Trigeminal: supraorbital, infraorbital, mental, or inferior alveolar branch)) Destruction by neurolytic agent, trigeminal nerve; supraorbital, infraorbital, mental, or inferior alveolar branch.....	((2+0))	7		64738 inferior alveolar nerve by osteotomy.....	10.0	30	3.0
64605 ((2nd)) second and ((3rd)) third division ((of)) branches at foramen ovale.....	((3+0))	30		64740 lingual nerve.....	BR		
64610 second and third division branches at foramen ovale under ((X-ray control)) radiologic monitoring.....	((4+0)) 5.0	30		64742 facial nerve, differential or complete.....	BR+		3.0
				64744 greater occipital nerve.....	7.0	30	3.0
				64746 phrenic nerve.....	5.0	30	3.0
				64752 vagus nerve (vagotomy), transthoracic.....	14.0	45	11.0
				64760 vagus nerve (vagotomy), abdominal.....	14.0	45	6.0
				64761 pudendal nerve, unilateral....	BR		
				64762 pudendal nerve, bilateral....	BR		
				64763 Transection or avulsion of obturator nerve, extrapelvic, with or without adductor tenotomy; unilateral.....	6.0	45	3.0
				64764 bilateral.....	9.0	45	3.0
				64766 Transection or avulsion of obturator nerve, intrapelvic, with or without adductor tenotomy; unilateral.....	10.0	60	4.0
				64768 bilateral.....	13.0	60	4.0

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
64772	Transection or avulsion of other spinal nerve, extradural	BR+	3.0	((64706))64832	((for) each additional digit nerve((; add))	1.2	
<u>Excision</u>							
	(For excision of tender scar, skin and subcutaneous tissues with or without tiny neuroma, see 11400-11460, 13000-13300)			((64710))64834	((Hand or foot, common sensory nerve)) Suture of one nerve, hand or foot; common sensory nerve	8.0	90 3.0
<u>EXCISION-SOMATIC NERVES</u>							
	(For Morton neurectomy, see 28080)			((64715))64835	median motor thenar	10.0	90 3.0
				((64720))64836	ulnar motor	12.0	90 3.0
				((64725) other		8.0	90 3.0
64774	Excision of neuroma; cutaneous nerve, surgically identifiable	3.0	30 3.0	64730	Arm or leg (except sciatic)	12.0	90 3.0
64776	digital nerve, one or both, same digit	3.0	30 3.0	64837	Suture of each additional nerve, hand or foot	BR	
64778	digital nerve, each additional digit (list separately by this number)	2.0		64840	Suture of posterior tibial nerve	BR	
64782	hand or foot, except digital nerve	6.0	30 3.0	64856	Suture of major peripheral nerve, arm or leg, except sciatic; including transposition	14.0	90 3.0
64783	hand or foot, each additional nerve, except same digit (list separately by this number)	3.0	30 3.0	64857	without transposition	BR	90 3.0
64784	major peripheral nerve except sciatic	10.0	30 3.0	((64735))64858	Suture of sciatic nerve	BR+	3.0
64786	sciatic nerve	BR		64859	Suture of each additional major peripheral nerve	BR	
64787	Insertion of plastic cap on nerve end	BR		((64740))64861	((Brachial or lumbar plexus)) Suture of; brachial plexus	BR+	3.0
64788	Excision of neurofibroma or neurolemmoma, cutaneous nerve	6.0	30 3.0	64862	lumbar plexus	BR	
64790	major peripheral nerve	BR+	3.0	((64750))64864	((Facial, extracranial)) Suture of facial nerve; extracranial	BR+	3.0
64792	extensive (including malignant type)	BR+	3.0	64865	intratemporal, with or without grafting	BR	
64795	Biopsy of nerve	BR		((64755))64866	((Facial anastomosis with other cranial nerve (spinal accessory-facial, hypoglossal-facial, phrenic-facial, etc.)) Anastomosis; facial-spinal accessory	26.0	90 3.0
<u>EXCISION-SYMPATHETIC NERVES</u>							
64802	Sympathectomy, cervical; unilateral	14.5	60 6.0	64868	facial-hypoglossal	26.0	90 3.0
64803	bilateral	19.0	60 6.0	64870	facial-phrenic	26.0	90 3.0
64804	Sympathectomy, cervicothoracic; unilateral, one stage	20.0	60 6.0	((64770))64872	((Secondary or delayed suture: list separately from neurorrhaphy by this number and value at 25% of the listed value of the primary neurorrhaphy as an additional charge)) Suture of nerve; requiring secondary or delayed suture (list separately in addition to code for primary neurorrhaphy)	BR	
64806	bilateral or two stage unilateral	28.0	60 8.0				
64809	Sympathectomy, thoracolumbar; unilateral	20.0	60 6.0				
64811	bilateral	28.0	60 8.0				
64814	Sympathectomy, hypogastric or presacral neurectomy (separate procedure)	14.0	60 5.0				
64818	Sympathectomy, lumbar; unilateral	15.0	60 5.0				
64819	bilateral	21.0	60 5.0				
64824	periarterial	24.0	60 5.0				
((Neurorrhaphy Suture of Nerve))							
<u>NERVE REPAIR BY SUTURE (NEURORRHAPHY)</u>							
((64700))64830	Microdissection and/or microrepair of nerve((; list separately from the nerve repair using this number and value at 50% of the listed value of the nerve repair as an additional charge)) (list separately in addition to code for nerve repair)			64874	requiring extensive proximal mobilization, or transposition of nerve (list separately in addition to code for nerve suture)	BR	3.0
				64876	requiring shortening of bone of extremity (list separately in addition to code for nerve suture)	BR	
<u>NEURORRHAPHY WITH NERVE GRAFT</u>							
				64890	Nerve graft (includes obtaining graft), single strand, hand or foot; up to 4 cm length	BR	90 3.0
				64891	more than 4 cm length	BR	90 3.0
				64892	Nerve graft (includes obtaining graft), single strand, arm or leg; up to 4 cm length	BR	90 3.0
				64893	more than 4 cm length	BR	90 3.0
((64705))64831	((Digital (hand or foot); one nerve)). Suture of digital nerve, hand or foot; one nerve	4.8	90 3.0				

	Unit Value	Follow-up Days=	Basic Anes@
64895 Nerve graft (includes obtaining graft), multiple strands (cable), hand or foot; up to 4 cm length	BR	90	3.0
64896 more than 4 cm length	BR	90	3.0
64897 Nerve graft (includes obtaining graft), multiple strands (cable), arm or leg; up to 4 cm length	BR	90	3.0
64898 more than 4 cm length	BR	90	3.0
64901 Nerve graft, each additional nerve; single strand	BR	90	3.0
64902 multiple strands (cable)	BR	90	3.0
64905 Nerve pedicle transfer; first stage	BR	90	3.0
64907 second stage	BR	90	3.0

OTHER PROCEDURES

64999 Unlisted procedure, nervous system BR

((Neuroplasty—Decompression or freeing of scar tissue from intact nerve, including external neurolysis and transplantation

(For facial nerve decompression, see 69720, 69740)

64900 Digital, one or both, same digit	4.8	90	3.0
64910 Hand or foot	8.0	90	3.0
64920 Arm, radial	12.0	90	3.0
64925 ulnar at elbow	12.0	90	3.0
64930 median at carpal tunnel	8.0	90	3.0
64935 Leg, sciatic	BR+		3.0
64940 posterior tibial at tarsal tunnel	8.0	90	3.0
64945 Other	BR+		3.0
64950 Brachial or lumbar plexus	BR+		3.0
64960 Internal lysis by dissection, with or without microdissection: list separately from neuroplasty by this number and value at 50% of the listed value of the primary neuroplasty as an additional charge			

EYE AND OCULAR ADnexA

(For diagnostic ((eye examination, see 92000-92300)) and treatment ophthalmological services, see medicine, ophthalmology, page 18, and 92002 et seq)

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-405 EYEBALL.

	Unit Value	Follow-up Days=	Basic Anes@
((Incision))			
(For goniotomy, see 65820)			
((Excision)) REMOVAL OF EYE			
65091 Evisceration ocular contents; without implant	10.0	30	3.0
65093 with implant	12.0	30	3.0
((65100)) 65101 Enucleation of eye, ((with or)) without ((sphere)) implant	10.0	30	3.0
65103 with implant, muscles not attached to implant	11.0	30	3.0
65105 with ((integrated)), muscles attached to implant, muscles attached to implant	12.0	30	3.0
(For conjunctivoplasty after enucleation, see 68320 et seq)			

	Unit Value	Follow-up Days=	Basic Anes@
65110 Exenteration orbit (does not include skin graft), removal orbital contents; only	20.0	60	4.0
65112 with therapeutic removal of bone	BR		4.0
65114 with temporalis muscle transplant	25.0	60	4.0
(For skin graft to orbit (split skin), see 15120, 15121; free, full thickness, see 15260, 15261)			
(For eyelid repair involving more than skin, see 67930 et seq)			

SECONDARY IMPLANT PROCEDURES

An ocular implant is an implant inside muscular cone; an orbital implant is an implant outside muscular cone.

65130 Insertion ocular implant secondary; after evisceration, in scleral shell	8.0	30	4.0
65135 after enucleation, muscles not attached to implant	10.0	30	4.0
65140 after enucleation, muscles attached to implant	14.0	30	4.0
65150 Reinsertion ocular implant; with or without conjunctival graft	BR		4.0
65155 with use of foreign material for reinforcement and/or attachment of muscles to implant	BR		4.0
65175 Removal ocular implant	BR		4.0
(For orbital implant (implant outside muscle cone) insertion, see 67550; removal, see 67560)			

((65140 Secondary insertion of integrated implant	14.0	30	3.0
65160 Evisceration of eye	10.0	30	3.0
65165 with implantation in scleral shell	12.0	30	3.0

((Repair))

((65200 Suture of eye for wound or injury	BR+		3.0
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REMOVAL OF OCULAR FOREIGN BODY

(For removal of implanted material: Ocular implant, see 65175; anterior segment implant, see 65920; posterior segment implant, see 67120; orbital implant, see 67560)

(For diagnostic x-ray for foreign body, see 70030-70050)

(For diagnostic echography for foreign body, see 76529)

(For removal of foreign body from orbit: frontal approach, see 67413; lateral approach, see 67430; transcranial approach, see 61334)

(For removal of foreign body from eyelid, embedded, see 67938)

(For removal of foreign body from lacrimal system, see 68530)

65205* Removal foreign body, external eye; conjunctival superficial	0.2	0	4.0
65210* conjunctival embedded (includes concretions), subconjunctival, or scleral			

	Unit Value	Follow-up Days=	Basic Anes@
<u>65220*</u> nonperforating	0.6	0	4.0
<u>65220*</u> corneal, without slit lamp	0.6	0	4.0
<u>65222*</u> corneal, with slit lamp	0.8	0	4.0
(For repair of corneal laceration with foreign body, see 65275)			
<u>65230</u> Removal foreign body intraocular; from anterior chamber, magnetic extraction	12.0	45	6.0
<u>65235</u> from anterior chamber, nonmagnetic extraction	16.0	45	8.0
<u>65240</u> from lens (without extraction lens), magnetic extraction	12.0	30	6.0
<u>65245</u> from lens (without extraction lens), nonmagnetic extraction . . .	BR		
(For removal implanted material anterior segment, see 65920)			
<u>65260</u> from posterior segment, magnetic extraction, anterior or posterior route	12.0	30	6.0
<u>65265</u> from posterior segment, nonmagnetic extraction	18.0	30	8.0
(For removal implanted material posterior segment, see 67120)			
REPAIR OF LACERATION OF EYEBALL			
(For fracture of orbit, see 21380 et seq)			
(For repair wound of eyelid, skin, linear, simple, see 12011-12018; intermediate, layered closure, see 12051-12057; linear, complex, see 13150-13300; other, see 67930-67935)			
(For repair wound of lacrimal system, see 68700)			
(For repair operative wound, see 66250)			
<u>65270*</u> Repair laceration; conjunctiva, with or without nonperforating laceration sclera, direct closure	0.9	0	4.0
<u>65272</u> conjunctiva, by mobilization and rearrangement, without hospitalization	BR		4.0
<u>65273</u> conjunctiva, by mobilization and rearrangement, with hospitalization	BR		4.0
<u>65275</u> cornea, nonperforating, with or without removal foreign body	SV		4.0
<u>65280</u> cornea and/or sclera, perforating, not involving uveal tissue	5.0	30	5.0
<u>65285</u> cornea and/or sclera, perforating, with reposition or resection of uveal tissue	5.0	30	5.0
(Repair of laceration includes use of conjunctival flap and restoration of anterior chamber, by air or saline injection when indicated)			
(For repair of iris or ciliary body, see 66680)			
<u>65290</u> Repair wound extraocular muscle, tendon and/or Tenon's capsule	4.4	30	4.0

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)			
WAC 296-22-410 ANTERIOR SEGMENT—CORNEA.			
	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
<u>65300</u> Delimiting keratotomy ((any type))	2.0	15	3.0
(For paracentesis of cornea, see ((65840)) 65800-65815)			
(For removal of foreign body, cornea, see 65220-65222)			
((65320) Removal of imbedded foreign body	*0.4	0	3.0
*65325 under slit lamp	*0.6	0	3.0
EXCISION			
<u>65400</u> ((Keratotomy, lamellar, partial)) Excision lesion cornea (keratotomy, lamellar, partial), except pterygium	8.0	30	3.0
((65405) complete	10.0	30	3.0
<u>65410*</u> Biopsy cornea	1.0	0	3.0
<u>65420</u> ((Pterygium, simple)) Excision or transposition, pterygium; without graft	6.0	30	3.0
((65425)65426 ((complicated)) with graft	BR+		3.0
((65440) Curettage and cauterization of corneal ulcer	*1.0	0	3.0
Introduction))			
REMOVAL OR DESTRUCTION			
<u>65430*</u> Scraping cornea, diagnostic, for smear and/or culture	0.4	0	4.0
<u>65435*</u> Removal corneal epithelium; with or without chemocauterization (abrasion, curettage)	1.0	0	4.0
<u>65436</u> with application of chelating agent, eg, EDTA	BR		
<u>65445</u> Thermocauterization lesion of cornea	1.6	7	4.0
<u>65455</u> Cryotherapy lesion of cornea	1.6	7	4.0
<u>65600</u> Tattoo of cornea, mechanical or chemical	8.0	30	3.0
((Repair))			
KERATOPLASTY			
(Corneal transplant includes preparation of donor material)			
<u>65710</u> Keratoplasty (corneal transplant) lamellar; autograft	24.0	90	8.0
<u>65720</u> homograft, fresh	24.0	90	8.0
<u>65725</u> homograft, preserved	24.0	90	8.0
<u>65730</u> Keratoplasty (corneal transplant) penetrating (except in aphakia); autograft	30.0	90	8.0
<u>65740</u> homograft, fresh	30.0	90	8.0
<u>65745</u> homograft, preserved	30.0	90	8.0
<u>65750</u> Keratoplasty (corneal transplant) penetrating, in aphakia	30.0	90	8.0
OTHER PROCEDURES			
<u>65760</u> Keratomeliosis (refractive keratoplasty)	30.0	90	8.0
<u>65765</u> Keratophakia	30.0	90	8.0
<u>65770</u> Keratoprosthesis	32.0	90	8.0
(For fitting of contact lens for treatment of disease, see 92070)			

	Unit Value	Follow-up Days=	Basic Anes@
<u>(For unlisted procedures on cornea, see 66999)</u>			
((65700 Keratoplasty (corneal transplant), lamellar	24.0	90	8.0
65705 penetrating	30.0	90	8.0))
<u>((For lacerated cornea, see 65200))</u>			

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-413 ANTERIOR SEGMENT—ANTERIOR CHAMBER.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
*65800 Paracentesis anterior chamber eye (separate procedure); with diagnostic aspiration of aqueous ((diagnostic (e.g., protein analysis)))	*1.0	0	3.0
65805* with therapeutic release of aqueous	1.5	0	3.0
65810 ((Aspiration of vitreal prolapse;)) with removal of vitreous and/or dissection of anterior hyaloid membrane, with or without air injection	8.0	90	3.0
65815 with removal of blood, with or without irrigation and/or air injection	5.6	15	3.0
<u>(For injection, see 66020-66030)</u>			
<u>(For removal of blood clot, see 65930)</u>			
65820 Goniotomy; without goniopuncture	10.0	30	3.0
((65840 Paracentesis	2.0	15	3.0)
65860 Removal of intraocular foreign body, anterior chamber	12.0	45	6.0
65880 Severing (lysis) corneo-vitreous adhesions	BR		3.0))
65825 with goniopuncture	10.0	30	4.0
65830 Goniopuncture, without goniotomy	BR		
65850 Trabeculotomy ab externo	BR		
<u>(For trabeculectomy, see 66170)</u>			
OTHER PROCEDURES			
65865 Severing adhesions anterior segment eye (with or without injection air or liquid) (separate procedure); goniosynechia	10.0	30	6.0
65870 anterior synechia, except goniosynechia	9.0	30	6.0
65875 posterior synechia	9.0	30	6.0
65880 corneovitreous adhesions	BR		3.0
65900 Removal epithelial downgrowth anterior chamber eye	BR		6.0
65920 Removal implanted material anterior segment eye	BR		6.0
65930 Removal of blood clot, anterior segment eye	BR		
66020 Injection, anterior chamber (separate procedure); air or liquid	2.0	7	3.0
66030* medication	1.1	7	3.0
<u>(For unlisted procedures on anterior segment, see 66999)</u>			

	Unit Value	Follow-up Days=	Basic Anes@
<u>((Excision</u>			
65900 Removal of epithelial downgrowth	BR		6.0
<u>Introduction</u>			
66000 Irrigation of blood from anterior chamber (independent procedure)	5.0	15	3.0
66020 Air injection into anterior chamber (independent procedure)	2.0	7	3.0))

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-415 ANTERIOR SEGMENT—ANTERIOR SCLERA.

	Unit Value	Follow-up Days=	Basic Anes@
EXCISION			
<u>(For removal of intraocular foreign body, see 65230-65235)</u>			
<u>(For operations on posterior sclera, see 67250-67255)</u>			
66130 Excision lesion sclera	BR		
66150 Fistulization sclera for glaucoma; trephination with iridectomy	12.0	45	6.0
66155 thermocauterization with iridectomy	12.0	45	6.0
66160 sclerectomy with punch or scissors, with iridectomy	12.0	45	6.0
66165 iridencleisis or iridotaxis	12.0	45	6.0
66170 trabeculectomy ab externo	BR		
<u>(For trabeculectomy ab externo, see 65850)</u>			
<u>(For repair of operative wound, see 66250)</u>			
<u>((Incision</u>			
66100 Sclerotomy, posterior, with removal of intraocular foreign body by magnetic extraction	12.0	45	6.0
66105 by non-magnetic extraction	16.0	45	8.0
66120 Sclerotomy, posterior, with or without drainage of fluid (independent procedure)	8.0	15	3.0
<u>Excision))</u>			
REPAIR			
<u>(For scleral procedures in retinal surgery, see 67102 et seq)</u>			
((66200 Sclerectomy for glaucoma, with scissors, punch, trephine or cautery	12.0	45	6.0))
66220 ((Scleral resection, any type (independent procedure))) Repair scleral staphyloma; without graft	20.0	90	6.0
66225 with graft	24.0	90	6.0
<u>((Repair))</u>			
<u>(For scleral reinforcement, see ((66220, 66225)) 67250-67255)</u>			
REVISION OPERATIVE WOUND			
66250 Revision or repair operative wound anterior segment, any type, early or late, major or minor procedure	BR		

	Unit Value	Follow-up Days=	Basic Anes@
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OTHER PROCEDURES

(For unlisted procedures on anterior sclera, see 66999)

((Suture

(For suture of sclera for wound or injury, see 65200))

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-420 ANTERIOR SEGMENT—IRIS ((AND)), CILIARY BODY.

	Unit Value	Follow-up Days=	Basic Anes@
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((Incision)) IRIDOTOMY, IRIDECTOMY

66500 ((Iridotomy (independent procedure))) Iridotomy by stab incision (separate procedure); except transfixion 5.0 30 3.0

66505 ((with transfixion of iris (e.g., iris bombe) (independent procedure) (see also 66760)) with transfixion as for iris bombe 5.0 30 3.0

((Excision))

66600 ((Excision of lesion of iris)) Iridectomy, with corneoscleral or corneal section; for removal of lesion 14.0 45 3.0

66605 ((and/or ciliary body (iridocyclectomy)) with cyclectomy 20.0 45 3.0

((66620 Iridectomy, any type (independent procedure) 10.0 45 3.0

~~66640 Iridenclisis or comparable procedure, with or without sclerectomy 12.0 45 3.0)~~

66625 peripheral for glaucoma (separate procedure) 10.0 45 3.0

66630 sector for glaucoma (separate procedure) 10.0 45 3.0

66635 "optical" (separate procedure) . . . 10.0 45 3.0
(For "iridotomy" by photocoagulation, see 66761)

(For "coreoplasty" by photocoagulation, see 66762)

REPAIR

66680 Repair of iris, ciliary body (as for iridodialysis) 10.0 45 3.0

((For repair of prolapsed iris with suture of lacerated sclera or cornea, see 65200))

(For reposition or resection of uveal tissue with perforating wound of cornea or sclera, see 65285)

DESTRUCTION

66700 Cyclodiathermy(:); initial 8.0 30 3.0

66701 subsequent 4.0 30 3.0

66720 Cyclocryotherapy(:); initial ... 6.0 30 3.0

66721 subsequent 3.0 30 3.0

66740 Cyclodialysis(:); initial 12.0 45 3.0

66741 subsequent 6.0 45 3.0

	Unit Value	Follow-up Days=	Basic Anes@
((66760)) 66761 ((Iridotomy, performed by photocoagulator or laser (see also 66500-66505))) Coreoplasty ("iridotomy") by photocoagulation; for glaucoma 5.0 30 3.0			
66762 other than for glaucoma 5.0 30 3.0			
66770 Destruction of cyst or lesion iris or ciliary body (nonexcisional procedure) 9.0 45 3.0			

(For excision lesion iris, ciliary body, see 66600, 66605; for removal epithelial downgrowth, see 65900)

OTHER PROCEDURES

(For unlisted procedures on iris, ciliary body, see 66999)

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-425 ((CRYSTALLINE LENS)) ANTERIOR SEGMENT—LENS.

	Unit Value	Follow-up Days=	Basic Anes@
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INCISION

66800 Discission lens (needling of lens)(:); initial 5.0 45 3.0

66801 subsequent 2.4 45 3.0

66820 ((secondary membrane, simple)) Discission of secondary membranous cataract ("after cataract") and/or anterior hyaloid (Ziegler or Wheeler knife technique) 5.0 45 3.0

((66825 complicated (e.g., with scissors) 8.0 45 3.0

~~66840 Aspiration of lens material for cataract, one or more stages 12.0 30 3.0~~

Excision

~~66900 Extraction of lens, unilateral (e.g., cataract, dislocated lens) .. 20.0 90 8.0)~~

REMOVAL CATARACT

66830 Removal of secondary membranous cataract ("after cataract"), with corneoscleral section, with or without iridectomy (iridocapsulotomy, iridocapsulectomy) 12.0 90 3.0

66840 Removal of lens material; aspiration technique, one or more stages 12.0 30 3.0

66850 phacofragmentation technique (mechanical or ultrasonic, eg, phacoemulsification), with aspiration 16.0 90 3.0

66915 Expression lens, linear, one or more stages 20.0 90 3.0

66920 Extraction lens with or without iridectomy; intracapsular, with or without enzymes 20.0 90 3.0

66930 intracapsular, for dislocated lens 22.0 90 3.0

66940 extracapsular (other than 66840, 66850, 66915) 20.0 90 3.0

66945 in presence of fistulization bleb

	Unit Value	Follow-up Days=	Basic Anes@
and/or by temporal, inferior or inferotemporal route, intracapsular or extracapsular .	22.0	90	3.0

Preliminary iridectomy, done as a separate procedure prior to extraction of lens, is included in the listed extraction of lens

(For removal of intralenticular foreign body without lens extraction, see 65240-65245)

(For repair of operative wound, see 66250)

ANTERIOR SEGMENT—OTHER PROCEDURES

66980 Insertion intraocular lens prosthesis; with cataract extraction (any technique) one stage BR

66985 secondary, subsequent to cataract extraction BR

(For removal of implanted material from anterior segment, see 65920)

66999 Unlisted procedure, anterior segment of eye BR

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-427 ((VITREOUS)) POSTERIOR SEGMENT—VITREOUS.

	Unit Value	Follow-up Days=	Basic Anes@
67000 Transplantation of vitreous, including sclerotomy	12.0	60	8.0
67020 Discission of anterior hyaloid, (e.g., pupillary block)	5.0	45	3.0

((Introduction

~~(For aspiration of vitreous, see 66120)~~

~~(For removal of foreign body, see 65860, 66100, 66105))~~

67005 Removal of vitreous, anterior approach (open sky technique or limbal incision); partial removal BR

67010 subtotal removal with mechanical vitrectomy (such as VISC or rotoextractor) BR

(For removal of vitreous by paracentesis of anterior chamber, see 65810)

(For removal of corneovitreous adhesions, see 65880)

67015 Aspiration or release of vitreous, subretinal or choroidal fluid, pars plana approach (posterior sclerotomy) 9.0 15 3.0

67025 Injection of vitreous substitute, pars plana approach (separate procedure), excludes air or balanced salt solutions 12.0 30 3.0

67030 Discission of vitreous strands (without removal), pars plana approach BR

67035 Vitrectomy mechanical (such as VISC or rotoextractor) pars plana approach, with or without removal of lens by same technique BR

(For use of vitrectomy in retinal detachment surgery, see 67108)

(For associated removal of foreign body, see 65260-65265)

(For unlisted procedures on vitreous, see 67299)

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-430 ((RETINA)) POSTERIOR SEGMENT—RETINAL DETACHMENT.

	Unit Value	Follow-up Days=	Basic Anes@
<u>REPAIR</u>			
<u>(If diathermy, cryotherapy and/or photocoagulation are combined, report under principle modality used)</u>			
((67100))67102 <u>((Retachment; retinopexy;)) Repair retinal detachment (one or more stages, same hospitalization); diathermy, with or without drainage of subretinal fluid ((e.g., diathermy)) and/or ((cryotherapy), initial) injection of air or saline</u>	20.0	90	3.0
((67101))67103 <u>((subsequent)) cryotherapy, with or without drainage of subretinal fluid</u>	BR+		3.0
<u>67104 drainage of subretinal fluid with photocoagulation (one or more stages), xenon arc</u>	22.0	90	3.0
<u>67106 drainage of subretinal fluid with photocoagulation (one or more stages), laser</u>	22.0	90	3.0
((67105))67107 <u>((with)) scleral buckling((—scleral resection, encircling tube and/or scleral implant, initial)) (such as lamellar excision, imbrication, or encircling procedure), with or without implant, may include procedures 67102-67106</u>	30.0	90	8.0
((67110) subsequent <u>67108 with vitrectomy, any method, with or without air tamponade, may include procedures 67102-67107 and/or removal of lens by same technique</u>	30.0	120	5.0
<u>67109 by technique other than 67102-67108</u>	BR		
<u>67112 previously operated upon, any technique</u>	BR		
<u>(For aspiration or drainage of subretinal or subchoroidal fluid, see 67015)</u>			
<u>67120 Removal implanted material, posterior segment eye</u>	BR		3.0
<u>(For removal of foreign body, see 65260, 65265)</u>			
((67120) Removal of encircling tube <u>BR+ 3.0</u>			
67140 <u>Repair of retinal break(s) or schisis, one or more stages during same period of hospitalization, photocoagulation and/or cryotherapy</u>	10.0	30	3.0

PROPHYLAXIS

Repetitive services. The services listed below are often performed in

Follow-up
Unit up Basic
Value Days= Anes@

multiple sessions or groups of sessions. The methods of reporting vary. The following descriptors are intended to include all sessions in a defined treatment period.

<u>67142 Prophylaxis retinal detachment (eg, retinal break, lattice degeneration), without drainage, one or more stages; diathermy</u>	10.0	30	3.0
<u>67143 cryotherapy</u>	10.0	30	3.0
<u>67144 photocoagulation, xenon arc</u>	10.0	30	3.0
<u>67146 photocoagulation, laser</u>	10.0	30	3.0

((Destruction))

POSTERIOR SEGMENT—OTHER PROCEDURES

DESTRUCTION—RETINA, CHOROID

<u>67212 Destruction of localized lesion retina or choroid (eg choroidopathy), one or more stages; diathermy</u>	10.0	30	3.0
<u>67213 cryotherapy</u>	10.0	30	3.0
<u>67214 photocoagulation, xenon arc</u>	10.0	30	3.0
<u>67216 photocoagulation, laser</u>	10.0	30	3.0
<u>67218 radiation by implantation of source (includes removal of source)</u>	BR		
<u>67222 Destruction of progressive retinopathy (eg, diabetic), one or more stages; diathermy</u>	12.0	30	3.0
<u>67223 cryotherapy</u>	12.0	30	3.0
<u>67224 photocoagulation, xenon arc</u>	12.0	30	3.0
<u>67226 photocoagulation, laser</u>	12.0	30	3.0

(For unlisted procedures on retina, see 67299)

SCLERAL REPAIR

(For excision lesion sclera, see 66130)

<u>67250 Scleral reinforcement (separate procedure); without graft</u>	22.0	90	3.0
<u>67255 with graft</u>	24.0	90	3.0

(For repair scleral staphyloma, see 66220-66225)

<u>67299 Unlisted procedure, posterior segment</u>	BR		
((67200) Photocoagulation, for tumor, Eales disease, etc., initial <u>10.0 30 3.0</u>			
67201 subsequent <u>5.0 20 3.0</u>			
67220 Diathermy or cryotherapy, initial or subsequent, for tumor, Eales disease, etc. <u>BR+ 3.0</u>			

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-435 OCULAR ADNEXA—EXTRAOCULAR MUSCLES.

	Unit Value	Follow-up Days=	Basic Anes@
<u>67311 Strabismus surgery on patient not previously operated on, any procedure, any muscle, (may include minor displacement, eg, for A or V pattern); one muscle</u>	10.0	30	3.0
<u>67312 two muscles, one or both eyes</u>	10.0	30	3.0
<u>67313 three or more muscles, one or both eyes</u>	12.0	30	3.0
<u>67320 Transposition extraocular muscle (eg, for paretic muscle), one or more stages, one or more mus-</u>			

	Unit Value	Follow-up Days=	Basic Anes@
cles, with displacement of plane of action more than 5 mm	18.0	30	3.0
67331 <u>Strabismus surgery on patient previously operated on; not involving reoperation of muscles</u>	10.0	30	3.0
67332 <u>involving reoperation of muscles</u>	BR		

OTHER PROCEDURES

67350 <u>Biopsy extraocular muscle</u>	4.4	15	3.0
<u>(For repair of wound extraocular muscle, tendon or Tenon's capsule, see 65290)</u>			
67399 <u>Unlisted procedure, ocular muscle</u>	BR		

((Incision, Excision and Repair

67300 <u>Muscle surgery (resection, recession, advancement, etc.) any number of muscles, one or both eyes</u>	14.0	30	3.0
67301 <u>subsequent</u>	BR+		3.0
67320 <u>Muscle transplant (Hummelsheim type procedure, etc.), one or more stages</u>	18.0	30	3.0

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-440 OCULAR ADNEXA—ORBIT.

	Unit Value	Follow-up Days=	Basic Anes@
((Incision)) EXPLORATION, EXCISION			
67400 <u>((Orbitotomy with exploration)) Orbitotomy without bone flap (frontal approach); for exploration, with or without biopsy</u>	12.0	30	7.0
67405 <u>((with) drainage ((of intraorbital abscess)) only</u>	12.0	30	7.0
((67410)) 67412 <u>with removal ((of intraorbital foreign body or tumor)) lesion</u>	BR+		7.0
67413 <u>with removal foreign body</u>	BR		
67415 <u>Transconjunctival or aspirational biopsy</u>	2.2	15	3.0

(For exenteration, enucleation, and repair, see 65101 et seq)

67420 <u>((Excision of lesion of orbit, requiring bone flap)) Orbitotomy with bone flap, lateral approach (eg, Kroenlein); with removal of lesion</u>	22.0	30	7.0
67430 <u>with removal foreign body</u>	22.0	30	7.0
67440 <u>with drainage or decompression</u>	22.0	30	7.0
67450 <u>for exploration, with or without biopsy</u>	22.0	30	7.0

(For orbitotomy, transcranial approach, see 61330-61334)

(For orbital implant, see 67550, 67560)

(For removal of eyeball or for repair after removal, see 65091-65175)

((67440)) <u>Orbital decompression (Kroenlein type)</u>	20.0	30	7.0
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67460 <u>Exenteration of orbit, without skin graft</u>	20.0	60	7.0
<u>((For skin graft see 15100-15261))</u>			

((67465 including orbital bone BR+ 7.0))

((Introduction)) OTHER PROCEDURES

*67500 <u>Retrolbulbar injection((, therapeutic agents (prilocaine, procaine, etc.)); medication ((independent)) separate procedure, does not include supply of medication)</u>	*0.6	0	
67505 <u>alcohol ((injection))</u>	2.0	15	
67510 <u>air or opaque contrast medium for ((radiological procedure)) radiography</u>	1.0	7	
67515* <u>Injection therapeutic agent into Tenon's capsule</u>	0.7	0	3.0
<u>(For subconjunctival injection, see 68200)</u>			
67550 <u>Orbital implant (implant outside muscle cone); insertion</u>	15.0	30	3.0
67560 <u>removal or revision</u>	BR		

(For ocular implant (implant inside muscle cone), see 65093-65105, 65130-65175)

(For treatment of fractures of malar area, orbit, see 21350 et seq)

67599 <u>Unlisted procedure, orbit</u>	BR		
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((Repair

((For plastic repair of orbit, see 13000-15750, 21210, 21230)

(For blow-out fracture, see 21380-21395, 31030)

(For bone or cartilage graft, or alloplastic implant, see 21210, 21230))

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-445 OCULAR ADNEXA—EYELIDS.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION			
*67700 <u>Blepharotomy ((with)), drainage ((of) abscess eyelid</u>	*0.4	0	3.0
((67705 <u>with drainage of meibomian glands or hordeolum (stye)</u>	*0.4	0	3.0
67710 <u>Severing tarsorrhaphy</u>	0.4	0	3.0
67715 <u>Canthotomy (separate procedure)</u>	0.4	0	3.0

(For canthoplasty, see 67950)

(For division symblepharon, see 68340)

EXCISION OR REMOVAL OF LESION INVOLVING MORE THAN SKIN (IE, INVOLVING LID MARGIN, TARSUS AND/OR PALPEBRAL CONJUNCTIVA)

((For blepharotomy, see 11400-11660, 13000-15760)

Unit Follow-up Basic
Value Days= Anes@

Unit Follow-up Basic
Value Days= Anes@

(For excision of lesion of eyelid, malignant, see 11640-11660; 13000-15760)

(For excision of xantholasma, see 11400-11460, 13000-15760))

(For removal of lesion, involving mainly skin of eyelid, see 11440-11446; 11640-11646; 17000-17010)

(For repair wounds, blepharoplasty, grafts, reconstructive surgery, see 67930-67975)

67800	Excision ((of meibomian gland (s))chalazion(s)); single	1.2	15	3.0
67801	multiple, same lid	1.4	15	3.0
67805	multiple, different lids	1.6	15	3.0
67808	under general anesthesia and/or requiring hospitalization, single or multiple	3.2	30	3.0
67810*	Biopsy eyelid	1.0	37	3.0
*67820	((Epilation, simple)) Correction trichiasis; epilation, forceps only.	*0.4	0	
*67825	((by electrolysis)) epilation, electrosurgical	*1.0	0	3.0
67830	incision lid margin	BR		
67835	incision lid margin, with free mucous membrane graft	BR		
67840*	Excision of lesion of eyelid (except chalazion) without closure or with simple direct closure	1.6	0	3.0

(For excision and repair of eyelid by reconstructive surgery, see 67961-67966)

67850*	Destruction of lesion of lid margin (up to 1 cm)	1.6	0	3.0
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(For chemosurgery technique of malignancies of skin, see 17300-17302)

(For initiation or follow-up care of topical chemotherapy, eg, 5-FU or similar agents, see appropriate office visits)

TARSORRHAPHY

67880	Construction intermarginal adhesions, median tarsorrhaphy, or canthorrhaphy;	2.0	30	3.0
67882	with transposition of tarsal plate	14.0	60	3.0

(For severing of tarsorrhaphy, see 67710)

(For canthoplasty, reconstruction canthus, see 67950)

(For canthotomy, see 67715)

((Repair))

((For blepharoplasty, plastic repair of eyelid, with or without graft, any type, see 12020; 12240; 13000-15760)

(For canthoplasty, plastic repair of canthus, see 12020, 12240; 13000-15760)

(For plastic restoration of eyebrow, see 15240-15740)

(For tarsoplasty, plastic repair of tarsal plate, see 13020-14160)

(For reposition of ciliary base, see 13000-15760)

67900	Blepharoptosis repair, superior rectus, levator or frontalis methods, unilateral	16.0	60	3.0
67905	sling method (includes obtaining fascia)	12.0	60	3.0
67920	Cautery puncture for entropion or ectropion	1.2	15	3.0
67940	Ectropion repair (e.g., Kuhnt-Szymanowski type procedure)	10.0	30	3.0
67960	Entropion repair (e.g., Wheeler type procedure)	10.0	30	3.0

REPAIR BLEPHAROPTOSIS, LID RETRACTION

67901	Repair blepharoptosis; frontalis muscle technique with suture	12.0	60	3.0
67902	frontalis muscle technique with fascial sling (includes obtaining fascia)	16.0	60	3.0
67903	(tarso)levator resection, internal approach	16.0	60	3.0
67904	(tarso)levator resection, external approach	16.0	60	3.0
67906	superior rectus technique with fascial sling (includes obtaining fascia)	16.0	60	3.0
67907	superior rectus tendon transplant	16.0	60	3.0
67908	conjunctivo-tarso-levator resection (Fasanella-Servat type)	12.0	60	3.0
67909	Reduction of overcorrection of ptosis	BR		3.0
67911	Correction of lid retraction	12.0	60	3.0

REPAIR ECTROPION, ENTROPION

(For correction trichiasis by mucous membrane graft, see 67835)

67914	Repair ectropion; suture	1.6	15	3.0
67915	thermocauterization	1.4	15	3.0
67916	blepharoplasty, excision tarsal wedge	9.0	60	3.0
67917	blepharoplasty, extensive (eg, Kuhnt-Szymanowski operation)	11.0	60	3.0

(For correction everted punctum, see 68705)

67921	Repair entropion; suture	1.6	15	3.0
67922	thermocauterization	1.4	15	3.0
67923	blepharoplasty, excision tarsal wedge	9.0	60	3.0
67924	blepharoplasty, extensive (eg, Wheeler operation)	11.0	60	3.0

(For repair cicatricial ectropion or entropion requiring scar excision or skin graft, see also 67961 et seq.)

RECONSTRUCTIVE SURGERY, BLEPHAROPLASTY INVOLVING MORE THAN SKIN (I.E., INVOLVING LID

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
MARGIN, TARSUS, AND/OR PALPEBRAL CONJUNCTIVA				(For cicatricial ectropion or entropion requiring scar excision, skin graft, etc., see 15100-15260)			
67930				((Suture			
				(For blepharorrhaphy, suture of eyelids, see 12020, 13020-13260)			
67935	1.6	15	3.0	(For tarsorrhaphy, suture of tarsal plate, see 12020, 13020-13260)			
	3.4	30	3.0	(For canthorrhaphy, suture of palpebral fissure of canthus, see 12020, 13020-13260))			
67938	BR		3.0	AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)			
(For repair skin of eyelid, see 12011-12018; 12051-12057; 13150-13300)				WAC 296-22-450 OCULAR ADNEXA-CONJUNCTIVA.			
(For repair lacrimal canaliculi, see 68700)							
(For tarsorrhaphy, canthorrhaphy, see 67880-67882)							
(For repair blepharoptosis and lid retraction, see 67901-67911)							
(For blepharoplasty for entropion, ectropion, see 67916, 67917, 67923, 67924)							
(For correction blepharochalasis (blepharorhytidectomy), see 15820-15823)							
(For repair skin of eyelid, adjacent tissue transfer, see 14060, 14061; preparation for graft, see 15000; free graft, see 15120, 15121, 15260, 15261)							
(For excision lesion of eyelid, see 67800 et seq.)							
(For repair lacrimal canaliculi, see 68700)							
67950				(For removal of foreign body, see 65205 et seq)			
	BR		3.0	INCISION, DRAINAGE			
67961				((68000 Removal of surface foreign body *0.2 0))			
				((68005 embedded foreign body, including concretion(s) *0.4 0 3.0))			
				68020 ((Evacuation of cyst(s) (e.g., serous) (independent procedure)))			
				Incision conjunctiva, drainage cyst 0.4 15 3.0			
				68040 Expression conjunctival follicles, eg, for trachoma SV			
				EXCISION, DESTRUCTION			
				68100 Biopsy ((of) conjunctiva 1.0 15 3.0			
				68110 Excision lesion conjunctiva; up to 1 cm 1.0 15 3.0			
				68115 over 1 cm 2.0 15 3.0			
				68130 with adjacent sclera BR 3.0			
				68135* Destruction lesion conjunctiva 0.6 0 3.0			
				((68120 Excision of lesion of conjunctiva, benign (e.g., cyst) 1.0 15 3.0			
				68125 malignant BR+ 3.0))			
				(For nevus, see 11440-11460)			
				((Introduction)) INJECTION			
				68200 Subconjunctival injection((s) (e.g., antibiotics, steroids) (independent procedure))) 0.6 7			
				(For injection into Tenon's capsule or retrobulbar injection, see 67500-67515)			
				((Repair)) CONJUNCTIVOPLASTY			
				(For wound repair, see 65270-65273)			
				((68300 Suture of conjunctiva (independent procedure) 0.8 15 3.0))			
				68320 Conjunctivoplasty((; free graft using conjunctiva)); with conjunctival graft or extensive rearrangement 12.0 30 3.0			
				68325 ((using)) with buccal mucous membrane graft (includes obtaining graft) 14.0 30 5.0			
OTHER PROCEDURES							
67999	BR						
Unlisted procedure, eyelids							

	Unit	Follow-	Basic		Unit	Follow-	Basic
	Value	up	Anes@		Value	up	Anes@
		Days=				Days=	

68326 Conjunctivoplasty, reconstruction cul-de-sac; with conjunctival graft or extensive rearrangement **BR**

68328 with buccal mucous membrane graft (includes obtaining graft) **BR**

68330 Repair symblepharon; conjunctivoplasty, without graft **BR**

68335 with free graft conjunctiva or buccal mucous membrane (includes obtaining graft) **BR**

68340 division symblepharon with or without insertion of conformer or contact lens **BR**

OTHER PROCEDURES

68360 Conjunctival flap ((for corneal ulcer)); bridge or partial (separate procedure) 5.0 30 3.0

68362 total (such as Gunderson thin flap or purse string flap) 9.0 30 3.0

(For conjunctival flap for perforating injury, see 65280-65285)

(For repair of operative wound, see 66250)

(For removal of conjunctival foreign body, see 65205-65210)

68399 Unlisted procedure, conjunctiva **BR**
 ((68365) for perforating injuries or secondary closure of operative wound (independent procedure) 5.0 30 5.0)

(For repair of symblepharon without graft, see 11400-11460, 13000-14160)

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-455 OCULAR ADNEXA—LACRIMAL ((TRACT)) SYSTEM.

	Unit	Follow-	Basic
	Value	up	Anes@
		Days=	

INCISION

68400 Incision, drainage ((of)) lacrimal gland ((abscess or cyst)) 2.4 15 3.0

68420 Incision, drainage ((of)) lacrimal sac((—dacryocystotomy or dacryocystostomy)) 2.0 15 3.0

*68440 ((Punctum)) Snip ((with dilation of)) incision lacrimal punctum *0.4 0

EXCISION

68500 Excision of lacrimal gland: (dacryoadenectomy), except for tumor; total 12.0 45 3.0

68505 partial 12.0 45 3.0

68510 Biopsy lacrimal gland **BR**

68520 Excision of lacrimal sac((:)) (dacryocystectomy) 12.0 45 3.0

68525 Biopsy of lacrimal sac **BR**

68530 Removal or foreign body or dacryolith, lacrimal passages **SV**

68540 Excision of lacrimal gland tumor; frontal approach 15.0 45 3.0

68550 involving osteotomy **BR**

((Introduction

~~68600 Catheterization of nasolacrimal duct with implantation of tube or stent~~ 2.4 15 3.0

~~68610 Injection procedure for dacryocystography~~ 0.6 0

REPAIR

68700 Plastic ((operation on)) repair canaliculi **BR+** 3.0

68705 Correction everted punctum, cautery 1.0 60 3.0

68720 Dacryocystorhinostomy((:)) (fistulization of lacrimal sac ((into)) to nasal cavity((—with or without anterior ethmoidectomy)) 14.0 60 5.0

((68740))68745 ((Conjunctivocystorhinostomy:)) Conjunctivorhmostomy (fistulization of ((conjunctival sac)) conjunctiva to nasal cavity((; direct (e.g., Jones type procedure))); without tube 15.0 90 5.0

68750 with insertion of tube or stent 15.0 90 5.0

68760 Closure ((of punctum by cautery)) lacrimal punctum, thermocauterization 1.0 15 3.0

68770 Closure lacrimal fistula (separate procedure) 5.0 30 3.0

((Manipulation)) PROBING AND RELATED PROCEDURES

*68800 Dilation ((of)) lacrimal punctum, with or without irrigation, ((one or both eyes)) unilateral or bilateral *0.4 0 3.0

*68820 Probing ((of)) nasolacrimal duct, with or without irrigation, unilateral or bilateral; *0.6 0 3.0

68825 requiring hospitalization **BR**

(See also 92018)

68830 with insertion of tube or stent (without general anesthesia) 2.8 15 3.0

*68840 Probing ((and/or irrigation of canaliculus (e.g., stricture))) lacrimal canaliculi, with or without irrigation *0.4 0 3.0

68850* Injection contrast medium for dacryocystography 0.7 0 3.0

(For dacryocystography, see 70170, 70171)

OTHER PROCEDURES

68899 Unlisted procedure, lacrimal system **BR**

((EAR)) AUDITORY SYSTEM

(For diagnostic services, eg, audiometry, vestibular tests, see 92502 et seq)

AMENDATORY SECTION (Amending Order 74-4, filed 1/30/74)

WAC 296-22-465 EXTERNAL EAR.

	Unit	Follow-	Basic
	Value	up	Anes@
		Days=	

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
<p>((For audiometric, vestibular and speech tests, see 92500-92570 et seq.))</p>				69301			
<p><u>protruding ear, with or without size reduction; unilateral</u></p>					10.0	180	3.0
<p><u>bilateral</u></p>					16.0	180	3.0
<p><u>((Reconstruct)) Reconstruction external auditory canal for congenital atresia, single stage</u></p>				69320	16.0	180	3.0
<p>(For combination with middle ear reconstruction see ((69630) 69631, 69641))</p>							
<p><u>((Suture</u></p>							
<p><u>(For suture of wound or injury of ear, see 12000-14300))</u></p>							
<p>(For other reconstructive procedures with grafts (skin, cartilage, bone), see 13150-15760, 21230-21235)</p>							
<p><u>OTHER PROCEDURES</u></p>							
<p>(For otoscopy under general anesthesia, see 92502)</p>							
<p>69399 <u>Unlisted procedure, external ear.</u> BR</p>							
<p><u>AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)</u></p>							
<p><u>WAC 296-22-470 MIDDLE EAR.</u></p>							
<p>(For reconstruction of ear, see 15120 et seq.)</p>							
69100	0.6	7	3.0				
69105	0.6	7	3.0				
69110	3.0	30	3.0				
69120	8.0	90	3.0				
<p>(For resection of temporal bone, see 69535)</p>							
69140	12.0	90	3.0				
69145	0.6	90	3.0				
69150					0.3	0	
69155					0.3	0	
<p>(For skin grafting, see 15000-15261)</p>							
<p><u>((Endoscopy)) REMOVAL FOREIGN BODY</u></p>							
69200	*0.4	0					
69205	2.0	7	3.0				
69210	0.5	0	3.0				
<p><u>REPAIR</u></p>							
<p>((For otoplasty, plastic operation on ear, see 13000-15760))</p>							
<p>(For reconstruction of ear with graft of skin plus cartilage, bone or other implant, see 13000-15760, 21230, 21235))</p>							
<p>(For suture of wound or injury of external ear, see 12011-14300)</p>							
69300							
<p><u>protruding ear, with or without reduction in size, unilateral</u>)</p>							
<p>(For atticotomy, see 69601 et seq)</p>							
<p><u>EXCISION</u></p>							
<p><u>INTRODUCTION</u></p>							
69400							
<p><u>Eustachian tube ((catheterization and inflation; unilateral or bilateral) inflation; with catheterization</u></p>					0.3	0	
69401					0.3	0	
<p><u>without catheterization</u></p>							
<p><u>INCISION</u></p>							
*69420	*0.6	0	3.0				
<p><u>Myringotomy, ((with or without</u></p>							
<p><u>out)) including aspiration and/or eustachian tube inflation ((and with or without aspiration))</u></p>							
((69425) 69431							
<p><u>((with insertion of tube for serous otitis media; unilateral) Tympanostomy (requiring insertion of ventilating tube); in office, without operating microscope</u></p>					1.0	7	3.0
((69430							
<p><u>with insertion of collar button or ventilating tube for serous otitis media, unilateral or bilateral, requiring hospitalization</u></p>					3.0	7	3.0))
69432*					1.8	0	3.0
69435					3.0	7	3.0
69440							
<p><u>((Tympanotomy with elevation of tympano-meatal flap, for middle ear exploration)) Middle ear exploration through postauricular or ear canal incision</u></p>					10.0	30	3.0

	Unit Value	Follow-up Days=	Basic Anes@		Unit Value	Follow-up Days=	Basic Anes@
((69500))69501 ((Mastoidectomy, simple)) Transmastoid antrotomy ("simple" mastoidectomy)	12.0	180	5.0				
69502 Mastoidectomy; complete	18.0	180	5.0				
((69510))69505 modified radical ((or radical, without skin graft))	20.0	180	6.0				
69511 radical	20.0	180	6.0	69632	22.0	180	3.0
((69515 with skin graft (includes obtaining graft)	21.0	180	6.0	69633	22.0	180	3.0
(For skin graft, see 15000 et seq)							
69530 Petrous apicectomy including radical mastoidectomy	30.0	180	6.0	((69640 with mastoidectomy	24.0	180	6.0
69535 Resection temporal bone, external approach	BR	180	6.0	69635 Tympanoplasty with antrotomy or mastoidotomy (including canalplasty, atticotomy, middle ear surgery, and/or tympanic membrane repair); without ossicular chain reconstruction	22.0	180	6.0
(For middle fossa approach, see 69950-69970)				69636	24.0	180	6.0
69540 ((Removal of middle ear)) Excision aural polyp, ((simple))	1.0	15	3.0	69637	24.0	180	6.0
((69545 complicated	2.0	15	3.0	69641 Tympanoplasty with mastoidectomy (including canalplasty, middle ear surgery, tympanic membrane repair); without ossicular chain reconstruction	23.0	180	5.0
69550 Excision aural glomus tumor; transcanal	BR			69642	26.0	180	5.0
69552 transmastoid	BR			69643	26.0	180	5.0
69554 extended (extratemporal)	BR			69644	28.0	180	5.0
REPAIR				69645	24.0	180	5.0
((69600))69601 Revision ((of radical)) mastoidectomy ((or tympanoplasty, with or without skin graft, musculoplasty, etc., same surgeon)); resulting in complete mastoidectomy	15.0	180	6.0	69646	26.0	180	5.0
69602 resulting in modified radical mastoidectomy	20.0	180	5.0	69650	12.0	90	3.0
69603 resulting in radical mastoidectomy	20.0	180	5.0	69660	20.0	90	5.0
69604 resulting in tympanoplasty	BR			((69665 revision, same surgeon	10.0	90	5.0
(For planned secondary tympanoplasty after mastoidectomy, see 69631, 69632)							
69605 with apicectomy	BR						
(For skin graft, see 15120, 15121, 15260, 15261)							
((For revision by second surgeon, see 69510, 69630))							
*69610 ((Patching)) Tympanic membrane patching, with or without ((cauterization)) site preparation or perforation preparation for closure without patch	*0.6	0	3.0				
69620 Myringoplasty, ((uncomplicated)) (surgery confined to drumhead and donor area)	13.0	180	3.0	69666	20.0	180	5.0
((69630)) 69631 Tympanoplasty, without mastoidectomy ((may include change in contours of external auditory canal and be combined with middle ear, including ossicular chain reconstruction and/or attic surgery), post auricular or endaural approach))				69667	20.0	180	5.0
				69670	BR+		6.0
				69675	3.0	180	6.0
				((Suture)) OTHER PROCEDURES			
				69700	7.0	60	3.0
				69720	24.0	180	6.0
				69725	26.0	180	6.0
				69740			

	Unit Value	Follow-up Days=	Basic Anes@
<u>69745</u> <u>without graft or decompression; lateral to geniculate ganglion . . .</u>	30.0	180	6.0
<u>including medial to geniculate ganglion</u>	30.0	180	6.0
<u>(For extracranial suture of facial nerve, see 64864)</u>			
<u>69799</u> <u>Unlisted procedure, middle ear . . .</u>	<u>BR</u>		

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-22-475 ((INTERNAL)) INNER EAR.

	Unit Value	Follow-up Days=	Basic Anes@
INCISION, DESTRUCTION			
<u>((69800))69801</u> <u>Labyrinthotomy, ((any type (including cryo-otic-periotic shunt)) with or without cryosurgery or other nonexcisional destructive procedures or tack procedure; transcanal .</u>	20.0	180	6.0
<u>69802</u> <u>with mastoidectomy</u>	<u>BR</u>		
<u>69805</u> <u>Endolymphatic sac operation; without shunt</u>	<u>BR</u>		
<u>69806</u> <u>with shunt</u>	<u>BR</u>		
<u>69820</u> <u>Fenestration ((of)) semicircular canal</u>	22.0	180	6.0
<u>69840</u> <u>Revision ((of)) fenestration operation((, same surgeon))</u>	11.0	180	6.0
<u>((For revision by second surgeon, see 69820))</u>			

EXCISION

<u>((69900))69905</u> <u>Labyrinthectomy; transcanal</u>	<u>BR+</u>		<u>6.0</u>
<u>69910</u> <u>with mastoidectomy</u>	<u>BR</u>		<u>6.0</u>
<u>69915</u> <u>Vestibular nerve section, translabyrinthine approach</u>	<u>BR</u>	<u>180</u>	<u>6.0</u>
<u>(For transcranial approach, see 69950)</u>			
<u>69949</u> <u>Unlisted procedure, inner ear . . .</u>	<u>BR</u>		
<u>((69920)</u> <u>Removal of glomus jugulare or glomus tympanicus tumor, with or without valvectomy</u>	<u>BR+</u>		<u>9.0</u>

TEMPORAL BONE, MIDDLE FOSSA APPROACH

(For external approach, see 69535)

<u>69950</u> <u>Vestibular nerve section, transcranial approach</u>	<u>BR</u>
<u>69955</u> <u>Total facial nerve decompression and/or repair (may include graft)</u>	<u>BR</u>
<u>69960</u> <u>Decompression internal auditory canal</u>	<u>BR</u>
<u>69965</u> <u>Eustachian tuboplasty</u>	<u>BR</u>
<u>69970</u> <u>Removal of tumor</u>	<u>BR</u>

OTHER PROCEDURES

<u>69979</u> <u>Unlisted procedure, temporal bone, middle fossa approach . . .</u>	<u>BR</u>
<u>((For removal of acoustic nerve tumor, see 61520))</u>	

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-23-010 GENERAL INFORMATION—RADIOLOGY. Rules and billing procedures pertaining to all practitioners rendering services to injured workers are presented in the general instruction section beginning with WAC 296-20-010. Some of the commonalities are repeated here for the convenience of those doctors referring to the radiology section.

UNIT VALUE: The following values apply only when these services are performed by or under the responsible supervision of a ((physician)) doctor.

The unit value represents x-ray service units appropriate for billing charges for professional services plus expenses of nonradiologist personnel, materials, facilities and space used, for diagnostic or therapeutic services rendered, but excludes the cost of radio-isotopes. This value is applicable in any situation in which a single charge is made to include both professional services and the cost involved in providing that service.

PROFESSIONAL COMPONENT: The professional component (PC) represents the professional services of the ((physician)) doctor, including examination of the patient, when indicated, performance and/or supervision of the procedure, interpretation and reporting of the examination and consultation with the attending ((physician)) doctor. This component is applicable in any situation in which the ((physician)) doctor submits a charge for these professional services only. It is distinct from and does not include the time devoted by technicians, nor costs of materials, equipment and space.

Values for office and hospital visits, consultation and other ((medical)) services are listed in ((chapter 296-21 WAC, the Medicine)) the various sections of this fee schedule.

Practitioners should identify the appropriate section for their area of health care practice.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-23-01001 INJECTION PROCEDURES. Values for injection procedures include all usual pre- and post-injection care specifically related to the injection procedure, necessary local anesthesia, placement of needle or catheter, and injection of contrast media.

Vascular injection procedures are listed in the cardiovascular section((, WAC 296-21-066 and 296-22-125)). Other injection procedures are listed in the appropriate sections. The injection procedure is included in the unit value for radiographic procedures marked with a #.

AMENDATORY SECTION (Amending Order 77-27, filed 11/30/77, effective 1/1/78)

WAC 296-23-01002 CUSTODY OF X-RAYS. (1) Radiographs should not be sent to the Department or Self-Insurer unless they are ((required)) requested for comparison and interpretation in determining a permanent disability, administrative or legal decisions and for cases in litigation ((, and)). X-rays must be retained for a period of seven years by the radiologist or the attending doctor.

(2) X-rays must be made available upon request to consultants, to medical examiners, to the Department, to Self-Insurers and/or the Board of Industrial Insurance Appeals.

(3) In cases where the injured worker transfers from one ((physician)) doctor to another, the former attending ((physician)) doctor will immediately forward all films in his possession to the ((department in Olympia or to the self-insurer for access by the next)) new attending ((physician)) doctor.

(4) When a ((physician's)) doctor's office is closed because of death, retirement or upon leaving the state, Department approved custodial arrangements must be made to insure availability on request. If a radiological office is closed for any of the previously listed reasons or because the partnership or corporation is being dissolved, disposition of x-rays for industrial injuries will be handled in the same manner. In the event custodial arrangements are to be made, the Department must approve the arrangements prior to transfer of x-rays to the custodian so as to assure their availability to the Department or Self-Insurer upon request.

(5) Reports of x-ray findings must accompany bills for x-ray services. See WAC 296-20-125 for additional billing information.

AMENDATORY SECTION (Amending Order 77-27, filed 11/30/77, effective 1/1/78)

WAC 296-23-01004 BILLING PROCEDURES. (1) ~~((Bills must be itemized on department or self-insurer forms, as the case may be, specifying the date, number, type and size of the films taken and the charges for each))~~ Complete billing instructions appear in WAC 296-20-125.

~~(2) ((The bill form must be completed in detail to include the claim number, the account number and the name of the doctor rendering the service. Bills will be accepted when signed by other than the doctor rendering the service. When bills are prepared by someone else, responsibility for the completeness and accuracy of the description of services and charges, rests with the doctor rendering the service.~~

~~(3) For a bill to be considered for payment, it must be received in the department or by the self-insurer within ninety days from the end of the month in which the service was rendered.~~

~~(4) Bills for x-ray services must be in conformance with the fee schedule. A complete narrative interpretation of the x-rays must be submitted with the bill.~~

~~(5) Payment will not be made on closed or rejected claims, except those taken in conjunction with submission of an application to reopen a closed claim.~~

~~(6) The department or the self-insurer, may reject bills for services rendered in violation of the medical aid rules.~~

~~(7) The claim number must be placed on each bill and on each page of attached documents)) Listed values for x-ray services are for combined technical and professional components, except as otherwise indicated. Appropriate modifiers and charges should be used when billing for only technical or professional component. When billing for technical component only, the total value should be reduced by the professional component value.~~

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-23-01005 DUPLICATION OF X-RAYS AND EXTRA VIEWS. ~~((When an injured worker is hospitalized, films of the industrial injury taken before hospitalization shall be taken promptly to the hospital radiological department for review in order to preclude any unnecessary duplication. The attending physician shall make available all radiographs on the injured worker to consulting physicians.~~

~~When recent radiographs of the spine have been taken and are available for review, duplicate radiographs should not be taken at the time of a myelogram)) Every attempt should be made to minimize number of x-rays taken for injured workers. The attending doctor or any other person or institution having possession of x-rays which pertain to the injury and are deemed to be needed for diagnostic or treatment purposes should make these x-rays available upon request.~~

~~The department or self-insurer will not authorize or pay for additional x-rays when recent x-rays are available except when presented with adequate information regarding the need to re-x-ray.~~

~~Extra views - may be billed under modifier code '-22'. However, such billing must be supported by an explanation of why extra views were necessary. When description of procedure indicates "minimum of views" usually no additional amount will be paid for extra views.~~

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-23-01006 RADIOLOGY, RADIATION THERAPY, NUCLEAR MEDICINE AND ((PATHOLOGY)) MODIFIERS. Listed ~~((values for most))~~ services and procedures may be modified under certain circumstances ~~((as listed below)).~~ When applicable, the modifying circumstance(s) should be identified by the addition of the appropriate ~~((#))~~ modifier code ~~((number--(including the hyphen)))~~ which is a two digit number placed after the usual procedure number from which it is separated by a hyphen. The value should be listed as a single modified total for the procedure. ~~((When multiple modifiers are applicable to a single procedure, see modifier -99.))~~ If more than one modifier is used, the "multiple modifiers" code placed first after the procedure code indicates that one or more additional modifier codes will follow. All modifiers and their respective codes are listed in Appendix A. Modifiers commonly used in RADIOLOGY (INCLUDING NUCLEAR MEDICINE AND DIAGNOSTIC ULTRASOUND) are as follows:

- 22 UNUSUAL SERVICES: When the service(s) provided ~~((are))~~ is greater than ~~((those))~~ that usually required for the listed procedure, ~~((identify))~~ it may be identified by adding ~~((this))~~ modifier ~~(((-22)))~~ '-22' to the usual procedure number. List modified value. ~~((May require))~~ A report may also be appropriate.
- 26 PROFESSIONAL COMPONENT: ~~((The listed values of))~~ Certain procedures (e.g., laboratory, ~~((x-ray))~~ radiology, electrocardiogram, specific diagnostic services, ~~((etc.))~~) are a combination of a physician component and a technical component. When the physician component is billed separately, ~~((identify))~~ the procedure may be identified by adding ~~((this))~~ the modifier ~~(((-26)))~~ '-26' to the usual procedure number and value as appropriate. The total cost of procedure cannot exceed the Basic Unit Value.
- 50 MULTIPLE OR BILATERAL ~~((VASCULAR))~~ PROCEDURES: When multiple or bilateral ~~((vascular radiographic))~~ procedures ~~((which add significant time and complexity))~~ are ~~((performed))~~ provided at the same operative session, ~~((identify and value))~~ the first major ~~((radiographic))~~ procedure(s) may be reported as listed. ~~((Identify))~~ The secondary or lesser ~~((radiographic))~~ procedure(s) may be identified by adding ~~((this))~~ the modifier ~~(((-50)))~~ '-50' to the usual procedure number(s) and value at 50 percent of the listed values unless otherwise indicated.
- 52 REDUCED ~~((VALUES))~~ SERVICES: Under certain circumstances ~~((, the listed value))~~ a service or procedure is partially reduced or eliminated ~~((because of ground rules, common practice, or))~~ at the physician's election ~~((, e.g., a physician may elect to reduce the listed values in a patient with multiple injuries requiring extensive radiographic examination.))~~. Under these ~~((or similar))~~ circumstances ~~((;))~~ the service(s) provided can be identified by ~~((their))~~ its usual procedure number(s) and the ~~((use))~~ addition of ~~((a reduced value indicated by adding this))~~ the modifier ~~(((-52)))~~ '-52' ~~((to the procedure number))~~ signifying that the service is rendered. ~~((Use of))~~ This ~~((modifier))~~ provides a means of reporting reduced services at reduced charge without disturbing ~~((usual relative values.))~~ the identification of the basic service.
- 75 CONCURRENT CARE, SERVICES RENDERED BY MORE THAN ONE PHYSICIAN: When the patient's condition requires the additional services of more than one physician, each physician may identify his or her services by adding the modifier '-75' to the basic service performed.
- 76 REPEAT PROCEDURE BY SAME PHYSICIAN: The physician may need to indicate that a procedure or service was repeated subsequent to the original service. This may be reported by adding the modifier '-76' to the procedure code of the repeated service.
- 77 REPEAT PROCEDURE BY ANOTHER PHYSICIAN: The physician may need to indicate that a basic procedure performed by another physician had to be repeated. This may be reported by adding modifier '-77' to the repeated service.
- 90 REFERENCE (OUTSIDE) LABORATORY: When laboratory procedures are performed by a party other than the ~~((billing))~~ treating or reporting physician the procedure(s) ~~((shall))~~ may be identified by ~~((this))~~ adding the modifier ~~(((-90)))~~ '-90' to the usual ~~((single or panel))~~ procedure number and shall be billed as charged to the physician.
(For collection and handling charges, see 99000, Medicine section.)
- 99 MULTIPLE MODIFIERS: Under certain circumstances ~~((multiple))~~ two or more modifiers may be ~~((applicable (e.g., a physician may perform multiple or bilateral vascular procedures (modifier -50) and bill the professional component (modifier -26)).~~ Under these circumstances, identify by adding this modifier ~~((-99))~~ to the usual procedure number and briefly indicate the circumstance) necessary to completely delineate a service. In such situations modifier '-99' should be added to the basic procedure, and other applicable modifiers may be listed as a part of the description of the service. Value in accordance with appropriate modifiers.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-23-01007 UNLISTED SERVICE OR PROCEDURE. A service or procedure may be provided that is not listed in this Fee Schedule. When reporting such a service, the appropriate "Unlisted Procedure" code may be used to indicate the service, identifying it by "Special Report" as discussed in WAC 296-23-01008 below. The "Unlisted Procedures" and accompanying codes for RADIOLOGY (Including Nuclear Medicine and Diagnostic Ultrasound) are as follows:

- ~~(76499)~~ Unlisted diagnostic radiologic procedure
- ~~76999~~ Unlisted diagnostic ultrasound examination
- ~~77999~~ Unlisted radiotherapy procedure
- ~~79999~~ Unlisted nuclear medicine procedure))
- 76499 Unlisted diagnostic radiologic procedure
- 76629 Unlisted echocardiography procedure
- 76999 Unlisted diagnostic ultrasound procedure
- 77299 Unlisted procedure, radiation therapy planning
- 77399 Unlisted procedure, external radiation dosimetry
- 77499 Unlisted procedure, radiation therapy treatment management
- 77699 Unlisted procedure, radiation therapy treatment aid
- 77749 Unlisted procedure, internal radiation dosimetry
- 77799 Unlisted procedure, radium and radioisotope therapy
- 77999 Unlisted procedure, radiation therapy special service
- 78099 Unlisted endocrine procedure, diagnostic nuclear medicine
- 78199 Unlisted hematopoietic, R-E and lymphatic procedure, diagnostic nuclear medicine
- 78299 Unlisted gastrointestinal procedure, diagnostic nuclear medicine
- 78399 Unlisted musculoskeletal procedure, diagnostic nuclear medicine
- 78499 Unlisted cardiovascular procedure, diagnostic nuclear medicine
- 78599 Unlisted respiratory procedure, diagnostic nuclear medicine
- 78699 Unlisted nervous system procedure, diagnostic nuclear medicine
- 78799 Unlisted genitourinary procedure, diagnostic nuclear medicine
- 78999 Unlisted miscellaneous procedure, diagnostic nuclear medicine
- 79999 Unlisted radionuclide therapeutic procedure.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76)

WAC 296-23-015 HEAD AND NECK.

- | | Unit Value | Professional Component |
|---|------------|------------------------|
| ((70000)) <u>70002</u> Pneumoencephalography, ((limited)) supervision and interpretation only | 30.0 | 12.0 |
| ((70002)) <u>70003</u> complete, ((including posterior fossa studies, laminography, etc.)) procedure | 40.0 | 16.0 |
| (For injection procedure only for pneumoencephalography, see ((61900)) 62286) | | |
| <u>70010</u> Myelography, posterior fossa supervision and interpretation only | | BR+ |
| <u>70011</u> complete procedure | | BR |
| (For injection procedure, see ((63520)) 61052) | | |
| <u>70015</u> Cisternography, positive contrast; supervision and interpretation only | | BR |
| <u>70016</u> complete procedure | | BR |
| (For injection procedure only for cisternography, see 61053) | | |

	Unit Value	Professional Component
<u>70020</u> Ventriculography, air or positive contrast supervision and interpretation only	24.0	8.0
<u>70021</u> positive contrast, supervision and interpretation only	24.0	8.0
(For injection procedures for ventriculography, see 61025, 61030, 61120)		
<u>70022</u> Stereotaxic localization		BR+
<u>70030</u> Radiologic examination, eye, for detection of foreign body	8.8	3.5
<u>70040</u> for localization of foreign body ((70030 not included)) (does not include detection)	14.0	6.4
<u>70050</u> ((combined 70030 and 70040)) for detection and localization of foreign body	18.0	8.0
<u>70100</u> Radiologic examination, mandible, limited or unilateral, less than four views	6.0	2.4
<u>70110</u> complete, minimum of four views	10.0	4.0
<u>70120</u> Radiologic examination, mastoid(s) limited or unilateral, less than three views per side	6.0	2.4
<u>70130</u> complete ((and bilateral)) minimum of three views per side	12.0	4.8
<u>70134</u> Radiologic examination, internal auditory ((meatuses)) meati, complete	12.0	4.8
<u>70140</u> Radiologic examination, facial bones, ((limited)) less than three views	6.0	2.4
<u>70150</u> complete, ((and/or orbits)) minimum of three views	10.0	4.0
((70154) with nasal bones	12.0	4.8
<u>70160</u> Radiologic examination, nasal bones complete, minimum of three views	6.4	2.6
<u>70170</u> Nasolacrimal duct (dacryocystography) supervision and interpretation only	10.0	4.0
<u>70171</u> complete procedure	16.0	5.3
(For injection procedure for dacryocystography, see 68850)		
<u>70190</u> Radiologic examination, optic foramina, ((minimum of four views))	6.0	2.4
<u>70200</u> orbits, complete, minimum of four views	8.0	3.2
<u>70210</u> Paranasal sinuses, ((limited)) less than three views	5.0	2.0
<u>70220</u> Radiologic examination, sinuses, paranasal, complete, minimum of three views without contrast studies	8.8	3.5
<u>70230</u> with contrast studies, supervision and interpretation only	10.0	4.0
<u>70231</u> with contrast studies, complete procedure	16.0	5.3
<u>70240</u> Radiologic examination, sella turcica	5.0	2.0
<u>70250</u> Radiologic examination, skull, limited, less than four views, with or without stereo	6.0	2.4
<u>70260</u> complete, minimum of four views, with or without stereo	12.0	4.8
<u>70300</u> Radiologic examination, teeth, single view	2.0	0.8
<u>70310</u> partial examination, less than full mouth	4.0	1.6
<u>70320</u> complete examination, full mouth	8.0	3.2
((70330)) <u>70328</u> Radiologic examination, temporomandibular joints, ((bilateral)) unilateral, open and closed mouth	6.0	2.4
<u>70330</u> bilateral	8.8	3.5
<u>70350</u> Cephalogram (orthodontic)	4.0	1.6
<u>70355</u> Orthopantomogram	10.0	4.0

	Unit Value	Professional Component
70360 Radiologic examination, neck for soft tissues	4.0	1.6
70370 pharynx or larynx, including fluoroscopy	8.0	3.2
70373 Laryngography, contrast; supervision and interpretation only	22.0	8.8
#70374 ((Laryngography, contrast)) complete procedure	#24.0	9.6
(For injection procedure only for laryngography, see 31708)		
70380 Radiologic examination, salivary gland for calculus	6.4	2.6
70390 Sialography supervision and interpretation only	8.0	3.2
70391 complete procedure	10.0	4.0
(For injection procedure only for sialography, see 42550)		
70400 Orbitography, air or positive contrast; supervision and interpretation only		BR
70401 complete procedure		BR
(For injection procedure only for orbitography, see 67510)		
70450 Computerized tomography, head; without intravenous contrast	58.0	13.0
70460 with intravenous contrast	64.0	13.0
70470 without intravenous contrast, followed by intravenous contrast and further sections	71.0	13.0

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76)

WAC 296-23-020 CHEST.

	Unit Value	Professional Component
71000 Chest, "Minifilm"	1.7	0.7
71010 single view, posteroanterior	4.0	1.6
71015 stereo, posteroanterior	5.0	2.0
71020 two views, posteroanterior and lateral	6.0	2.4
71021 apical lordotic procedure	7.2	2.9
71022 oblique projections	7.2	2.9
71030 complete, minimum of four views	8.0	3.2
71034 including fluoroscopy	10.0	4.0

(For independent chest fluoroscopy, see 76000)

71035 Radiologic examination, chest, special views, e.g., lateral decubitus, Bucky studies		BR
71036 Fluoroscopic localization for needle biopsy of intrathoracic lesion, including follow-up films		BR+
71038 Fluoroscopic localization for transbronchial biopsy or brushing		BR

(For biopsy procedure, see 32420)

71040 Bronchography, unilateral; supervision and interpretation only	14.0	5.6
71041 complete procedure	16.0	6.4
71060 bilateral	22.0	8.8
71061 complete procedure	24.0	9.6

(For injection procedure only for bronchography, see ((31655)) 31715, 31710)

71090 Insertion pacemaker, fluoroscopy and radiography, supervision and interpretation		
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	Unit Value	Professional Component
71100 Ribs, unilateral, minimum of two views	7.2	2.9
71110 bilateral, minimum of three views	10.0	4.0
71120 Sternum, minimum of two views	6.0	2.4
71130 Sternoclavicular joint(s), minimum of three views	6.0	2.4
71250 Computerized tomography, thorax; without intravenous contrast	77.0	22.0
71260 with intravenous contrast	84.0	22.0
71270 without intravenous contrast, followed by intravenous contrast and further sections	90.0	22.0

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76)

WAC 296-23-025 SPINE AND PELVIS.

	Unit Value	Professional Component
72010 Spine, entire, survey study (A-P & lateral)	16.0	6.4
72020 Radiologic examination, spine, single view, specify level		BR
72040 cervical, A-P and lateral	6.0	2.4
72050 complete, minimum of four views including oblique and flexion and extension views	10.0	4.0
72052 including oblique and flexion and extension views	13.2	5.3
72070 thoracic, A-P and lateral	7.0	2.8
72080 thoraco-lumbar ((junction)), A-P and lateral	7.0	2.8
72090 scoliosis study, including supine and erect studies	6.0	2.4
72100 ((lumbar, limited)) lumbo-sacral, A-P and lateral	7.0	2.8
72110 lumbosacral, complete, with oblique views	13.0	5.2
72114 including bending views	16.0	6.4
72120 bending views only, minimum of four views	8.0	3.2
72145 Computerized tomography, spine	70.0	21.0
72170 Pelvis, ((limited)) A-P only	5.0	2.0
72180 stereo	6.4	2.6
72190 complete, minimum of three views	8.0	3.2

(For pelvimetry, see 74710)

72200 Sacro-iliac joints, ((limited)) less than three views	5.0	2.0
72202 complete, minimum of three views	8.0	3.2
72220 Sacrum and coccyx, minimum of two views	6.4	2.6
72240 Myelography, cervical supervision and interpretation only	18.0	7.2
72241 complete procedure	20.0	8.0
72255 thoracic supervision and interpretation only	18.0	7.2
72256 complete procedure	20.0	8.0
72265 lumbosacral supervision and interpretation only	18.0	7.2
72266 complete procedure	20.0	8.0
72270 entire spinal canal supervision and interpretation only	30.0	12.0
72271 complete procedure	32.0	14.0

(For injection procedures for myelography, see ((63510-63520)) 62284)

72285 Diskography, cervical supervision and interpretation only	20.0	8.0
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	Unit Value	Professional Component
72286 complete procedure	22.0	10.0
72295 lumbar supervision and interpretation only	20.0	8.0
72296 complete procedure	22.0	10.0

(For injection procedures for diskography, see ((63530; 63535)) 62290, 62291)

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76)

WAC 296-23-030 UPPER EXTREMITIES.

	Unit Value	Professional Component
73000 Clavicle	4.8	1.9
73010 Scapula	6.0	2.4
73020 Shoulder, limited, one view	4.0	1.6
73030 complete, minimum of two views	6.0	2.4
73040 arthrography supervision and interpretation only	10.0	4.0
73041 complete procedure	12.0	5.0

(For injection procedure for arthrography, see 23350)

73050 Acromio-clavicular joints, bilateral, with or without weighted distraction	7.0	2.8
73060 Humerus, ((including one joint;)) minimum of two views	4.8	1.9
73070 Elbow, limited, A-P and lateral	4.8	1.9
73080 complete, minimum of three views	6.0	2.4
73085 Radiologic examination, elbow, arthrography; supervision and interpretation only	8.0	3.2
73086 complete procedure	10.0	4.0

(For injection procedure only for arthrography, see 24220)

73090 Forearm, including one joint, A-P and lateral	4.8	1.9
73092 upper extremity, infant, minimum of two views	3.6	1.4
73100 Wrist, limited, A-P and lateral	4.0	1.6
73110 complete, minimum of three views	6.0	2.4
73115 Radiologic examination, wrist, arthrography; supervision and interpretation only	8.0	3.2
73116 complete procedure	10.0	4.0

(For injection procedure only for arthrography, see 25246)

73120 Hand, limited, minimum of two views	4.0	1.6
73130 complete, minimum of three views	6.0	2.4
73140 Finger(s), minimum of two views	3.6	1.4

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76)

WAC 296-23-035 LOWER EXTREMITIES.

	Unit Value	Professional Component
73500 Radiologic examination, hip, unilateral, ((limited;)) one view	5.0	2.0
73510 complete, minimum of two views	7.0	2.8
73520 Radiologic examination, hips, bilateral, complete minimum of two views of each hip (including A-P of pelvis)	9.6	3.8

	Unit Value	Professional Component
73525 Radiologic examination, hip, arthrography; supervision and interpretation only		BR
73526 complete procedure		BR

(For injection procedure only for arthrography, see 27093, 27094)

73530 Radiologic examination, hip, during operative procedure, up to four studies	16.0	5.3
73531 each additional study, over four	3.0	1.2
73540 Radiologic examination, hip and pelvis, infant or child, ((complete;)) minimum of two views	6.4	2.6
73550 Radiologic examination, femur (thigh), ((including one joint;)) A-P and lateral	6.0	2.4
73560 Radiologic examination, knee, limited, A-P and lateral	4.4	1.8
73570 complete, minimum of three views	6.4	2.6
73580 Radiologic examination, knee, arthrography supervision and interpretation only	16.0	6.4
73581 complete procedure	18.0	8.0

(For injection procedure for arthrography, see 27370)

73590 Radiologic examination, tibia and fibula (leg), including one joint, A-P and lateral	4.8	1.9
73592 lower extremity, infant, minimum of two views	4.0	1.6
73600 Radiologic examination, ankle, limited, A-P and lateral	4.4	1.8
73610 complete, minimum of three views	6.0	2.4
73615 Radiologic examination, ankle, arthrography; supervision and interpretation only		BR
73616 complete procedure		BR

(For injection procedure only for arthrography, see 27648)

73620 Radiologic examination, foot, limited, A-P and lateral	4.0	1.6
73630 complete, minimum of three views	5.6	2.2
((73640 Foot and ankle, minimum of three views	9.6	3.8
73650 Radiologic examination, calcaneus, ((Os calcis (heel))) minimum of two views	4.4	1.8
73660 Toe(s), minimum of two views	3.6	1.4

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76)

WAC 296-23-040 ABDOMEN.

	Unit Value	Professional Component
74000 Abdomen, single view (KUB) A-P	4.0	1.6
74010 with additional oblique or cone view	6.0	2.4
74020 complete, includes ducubitus and/or erect views	8.0	3.2
74150 Computerized tomography, abdomen; without intravenous contrast	77.0	22.0
74160 with intravenous contrast	84.0	22.0
74170 without intravenous contrast, followed by intravenous contrast and further sections	90.0	22.0

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76)

WAC 296-23-045 GASTROINTESTINAL TRACT.

	Unit Value	Professional Component
74210 Pharynx and/or cervical esophagus	8.8	4.8
74220 Esophagus	8.8	4.8
74230 Pharynx and/or esophagus, by cineradiography	12.0	6.6
74240 Upper gastrointestinal tract, with or without delayed films, without KUB	14.0	7.7
with KUB	15.2	8.0
74245 with small bowel, includes multiple serial films, with or without fluoroscopy	17.6	8.8
74250 Small bowel, includes multiple serial films with or without fluoroscopy or KUB, independent study	14.0	7.0
74260 Duodenography, hypotonic	BR	
74270 Colon, barium enema	12.0	6.6
74275 with air contrast	17.6	8.8
74280 Air contrast ((<u>enema</u>)), only	14.0	7.0
74285 <u>high kilovoltage technique for polyp study</u>	BR	
74290 Cholecystography, oral	9.6	3.8
74291 repeat examination, same study	4.8	1.9
74300 Cholangiography, operative	10.0	4.0
#74305 postoperative	#12.0	6.0

(For biliary duct stone extraction, percutaneous, see 47630; via basket catheter, see 74327)

#74310 intravenous	#16.0	6.4
74315 oral	12.0	4.8
74320 percutaneous, transhepatic <u>supervision and interpretation only</u>	16.0	6.4
74321 <u>complete procedure</u>	18.0	7.2

(For injection procedure for percutaneous transhepatic cholangiography, see 47500)

74325 <u>Diagnostic pneumoperitoneum; supervision and interpretation only</u>	BR	
74326 <u>complete procedure</u>	BR	

(For injection procedure only for pneumoperitoneum, see 49400)

74327 <u>Postoperative biliary duct stone removal, fluoroscopic monitoring and radiography</u>	BR	
74328 <u>Endoscopic catheterization of the biliary ductal system, fluoroscopic monitoring and radiography</u>	BR	
74329 <u>Endoscopic catheterization of the pancreatic ductal system, fluoroscopic monitoring and radiography</u>	BR	
74330 <u>Combined endoscopic catheterization of the biliary and pancreatic ductal systems, fluoroscopic monitoring and radiography</u>	BR	
74331 <u>with endoscopic sphincterotomy</u>	BR	
74340 <u>Introduction of long gastrointestinal tube (e.g., Miller-Abbott), with multiple fluoroscopies and films</u>	BR	

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76)

WAC 296-23-050 URINARY TRACT.

	Unit Value	Professional Component
#74400 Urography, excretory (IVP)	15.2	6.1

(For kidney, ureter and bladder, see 74000-74020)

	Unit Value	Professional Component
#74405 hypertensive	#16.0	5.8
#74410 infusion (DIP)	#20.0	8.0
#74415 with nephrotomography	#26.0	10.4
74420 retrograde, with or without KUB	12.0	4.8
74425 <u>Urography, antegrade, (pyelostogram, nephrostogram, loopogram); supervision and interpretation only</u>	BR	
74426 <u>complete procedure</u>	BR	
(For injection procedure only, see 50394, 50684, 50690)		
74430 Cystography, contrast or chain	8.8	3.5
(For injection procedure for cystography, see 51600)		
74440 Vasography, vesiculography, or epididymography <u>supervision and interpretation only</u>	8.8	3.5
74441 <u>complete procedure</u>	10.0	4.0
(For injection procedure, see 52010, 52110, 55300)		
74450 Urethrocytography, retrograde	9.6	3.8
74451 <u>complete procedure</u>	11.6	4.4
74455 voiding	14.0	5.6
74456 <u>complete procedure</u>	16.0	5.8
(For injection procedure for urethrocytography, see 51610)		
74460 Retroperitoneal pneumography	12.0	4.8
74461 <u>complete procedure</u>	14.0	5.6
(For injection procedure for retroperitoneal pneumography, see 49430)		
74470 Translumbar renal cyst study (contract visualization) or antegrade urography ...	10.0	4.0
74471 <u>complete procedure</u>	12.0	6.0
(For injection procedure only for translumbar renal cyst study, see 50390)		

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76)

WAC 296-23-055 FEMALE GENITAL TRACT.

	Unit Value	Professional Component
(For abdomen and pelvis, see 74000-((74020))74170, 72170-72190)		
74710 Pelvimetry with or without placental localization	10.0	4.0
74720 Abdomen for fetal age, fetal position and/or placental localization, single view	4.0	1.6
74725 multiple views	6.0	2.4
74730 <u>Placentography with contrast cystography; supervision and interpretation only</u>	BR	
74731 <u>complete procedure</u>	BR	
74740 <u>Hysterosalpingography supervision and interpretation only</u>	10.8	4.3
74741 <u>complete procedure</u>	12.0	4.8

(For injection procedure for hysterosalpingography, see 58340)

74760 Pelvic pneumography	10.0	4.0
74761 <u>complete procedure</u>	12.0	4.8

(For injection procedure for pelvic pneumography, see 49440)

	Unit Value	Professional Component	Unit Value	Professional Component
74770 Radiologic examination, fetal study, intrauterine contrast visualization; supervision and interpretation only			30.0	11.0
74771 complete procedure	BR		40.0	16.0
AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76)				
WAC 296-23-065 VASCULAR SYSTEM.				
(For vascular injection procedures, see 36000--((36250)) 36299.)				
(((For injection procedures for lymphangiography, see 38790, 38791-)))				
(For injection procedure for splenoportography, see 38200-))				
(For cardiac fluoroscopy, see 93280)				
(For cardiac catheterization, see ((93500-93566)) 93501-93599.)				
When multiple vascular radiographic procedures are performed at the same time (e.g., aortic arch study plus renal arteriogram), the total value shall be the value for the major procedure plus 50% of the value for the lesser procedure(s) unless otherwise indicated. See modifier -5. The cost of catheters, drugs and contrast media is included in the listed value for the radiographic procedure.				
	Unit Value	Professional Component		
75605 by serialography supervision and interpretation only			((40-0))	((+6-0))
75606 complete procedure			30.0	11.0
75620 Abdominal, including lower extremities, without serialography			32.0	11.2
75625 Aortography, abdominal, translumbar, by serialography; supervision and interpretation only			((40-0))	((+5-2))
			32.2	12.2
75626 complete procedure			40.0	15.2
75627 Aortography, abdominal, catheter, by serialography; supervision and interpretation only			42.0	16.0
75628 complete procedure			48.0	17.0
((Arteriography				
75700 Cerebral (carotid, vertebral or retrograde brachial), two projections, unilateral			40.0	17.2
75701 bilateral			50.0	17.5))
75650 Angiography, cervicocerebral, catheter, including vessel origin; supervision and interpretation only			32.0	11.2
75651 complete procedure			40.0	17.2
75652 Angiography, cervicocerebral, selective catheter, including vessel origin; one vessel, supervision and interpretation only			32.0	11.2
75653 one vessel, complete procedure			36.0	12.6
75654 two vessels, supervision and interpretation only			34.0	11.9
75655 two vessels, complete procedure			38.0	13.3
75656 three or four vessels, supervision and interpretation only			36.0	12.6
75657 three or four vessels, complete procedure			40.0	17.2
75658 Angiography, brachial, retrograde; supervision and interpretation only			36.0	12.6
75659 complete procedure			40.0	17.2
75660 Angiography, carotid, cerebral, unilateral, selective external; supervision and interpretation only			36.0	12.6
75661 complete procedure			40.0	17.2
75662 Angiography, carotid, cerebral, bilateral, selective external; supervision and interpretation only			42.0	18.0
75663 complete procedure			50.0	21.5
75665 Angiography, carotid, cerebral, unilateral; supervision and interpretation only			36.0	12.6
75667 direct puncture, complete procedure			40.0	17.2
75669 catheter, complete procedure			46.0	19.7
75671 Angiography, carotid, cerebral, bilateral; supervision and interpretation only			42.0	18.0
75672 direct puncture, complete procedure			50.0	21.5
75673 catheter, complete procedure			54.0	23.2
75676 Angiography, carotid, cervical, unilateral; supervision and interpretation only			36.0	12.6
75677 direct puncture, complete procedure			40.0	17.2
75678 catheter, complete procedure			46.0	19.7
75680 Angiography, carotid, cervical, bilateral; supervision and interpretation only			42.0	18.0
75681 direct puncture, complete procedure			50.0	21.5
75682 catheter, complete procedure			54.0	23.2
75685 Angiography, vertebral; supervision and interpretation only			36.0	12.6
75686 direct puncture, complete procedure			40.0	17.2
75687 catheter, complete procedure			46.0	19.7
75690 Angiography, vertebral, cervical, unilateral; supervision and interpretation only			36.0	12.6
75691 direct puncture, complete procedure			40.0	17.2
75692 catheter, complete procedure			46.0	19.7
75695 Angiography, vertebral, cervical, bilateral; supervision and interpretation only			42.0	18.0

HEART

75500 Angiocardiography, by cineradiography supervision and interpretation only	BR+	—
75501 complete procedure (including catheterization)		BR
75505 Angiocardiography by serialography (single ((projection)) plane); supervision and interpretation only	BR+	—
75506 complete procedure (including catheterization)		BR
75507 Angiocardiography by serialography, multi-plane; supervision and interpretation only		BR
75509 complete procedure (including catheterization)		BR
#75510 CO ₂ angiocardiography for pericardial effusion or atrial wall thickness; intravenous, supervision and interpretation only	#20.0	8.0
75511 complete procedure		BR
75520 Cardiac radiography, selective cardiac catheterization; right side, complete procedure		BR
75524 left side, complete procedure		BR
75528 Cardiac radiography, selective cardiac catheterization, right and left side, complete procedure		BR

AORTA AND ARTERIES

(For injection procedure only, see 36100-36299)

Aortography

75600 ((Arch;)) thoracic or abdominal, without serialography supervision and interpretation only	20.0	8.0
75601 complete procedure	22.0	9.0

	Unit Value	Professional Component
projection(s) for items 75500-75835; over and above the usual projections obtained may warrant an additional charge in accordance with the same supplies required BR+ ==))		
75840 Venography, adrenal, unilateral, selective; supervision and interpretation only	26.0	9.8
75841 complete procedure	30.0	10.8
75842 Venography, adrenal, bilateral, selective; supervision and interpretation only	28.0	10.6
75843 complete procedure	32.0	12.2
75845 Venography, azygos; selective or nonselective, supervision and interpretation only	26.0	9.8
75846 selective, complete procedure	30.0	10.8
75847 nonselective, complete procedure	28.0	10.6
75850 Venography, intraosseous; supervision and interpretation only	30.0	10.8
75851 complete procedure	32.0	12.2
75860 Venography, sinus or jugular, catheter; supervision and interpretation only	30.0	10.8
75861 complete procedure	32.0	12.2
75870 Venography, superior sagittal sinus; supervision and interpretation only	30.0	10.8
75871 complete procedure, including direct puncture	32.0	12.2
75880 Venography, orbital; supervision and interpretation only	34.0	12.9
75881 complete procedure	36.0	13.7
75885 Percutaneous transhepatic portography with hemodynamic evaluation; supervision and interpretation only	32.0	12.2
75886 complete procedure	36.0	13.7
75887 Percutaneous transhepatic portography without hemodynamic evaluation; supervision and interpretation only	30.0	10.8
75888 complete procedure	34.0	12.9
75889 Hepatic venography wedged or free, with hemodynamic evaluation; supervision and interpretation only	36.0	13.7
75890 complete procedure	38.0	14.4
75891 Hepatic venography, wedged or free, without hemodynamic evaluation; supervision and interpretation only	32.0	12.2
75892 complete procedure	34.0	12.9
75893 Venous sampling thru catheter without angiography (e.g., for parathyroid hormone, renin)	5.0	1.9

TRANSCATHETER THERAPY

75894 Transcatheter therapy, embolization, including angiography; supervision and interpretation only	36.0	13.7
75895 complete procedure	40.0	15.2
75896 Transcatheter therapy, infusion, including angiography; supervision and interpretation only	38.0	14.4
75897 complete procedure	42.0	15.9
75898 Angiogram through existing catheter for follow-up study for transcatheter therapy, embolization or infusion	10.0	3.8

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76)

WAC 296-23-079 MISCELLANEOUS.

	Unit Value	Professional Component
(For arthrography of shoulder, see 73040, 73041; elbow, see 73085, 73086; wrist, see 73115, 73116; hip, see 73525, 73526; knee, see 73580, 73581; ankle, see 73615, 73616)		
76000 Fluoroscopy (independent procedures) ...	3.0	3.0
((76001 extended room time with periodic fluoroscopy, per 30 minutes	((BR+))	—
76020 Bone age studies	6.0	2.4
76040 Bone length studies (orthoroentgenogram)	10.0	4.0
76060 Bone survey (long bone or for metastases)	15.2	6.1
76065 osseous survey, infant	13.2	5.3
#76080 Fistula or sinus tract study supervision and interpretation only	#12.0	4.8
76081 complete procedure	14.0	5.6
76090 Mammography, unilateral	8.8	3.5
76091 bilateral	13.2	5.3
76100 Laminography (tomography, planigraphy, body section radiography) (independent procedure)	13.2	9.2
76105 to complement routine examination ...	7.0	2.8
76120 Cineradiography (independent procedure)	13.2	5.3
76125 to complement routine examination ...	7.0	2.8
76127 Procedures using Polaroid or similar photographic media	0.8	0.3
76130 Radiologic examination; at bedside or in operating room, not otherwise specified ..	BR	BR
76135 in home	BR	BR
76137 after regular hours	BR	BR
76140 Written consultation on x-ray examination made elsewhere	BR+	—
76150 Xeroradiography	6.0	BR
76300 Thermography	BR	BR
76499 Unlisted diagnostic radiologic procedure ..	BR	BR
((76160 Polaroid film (in addition to value of procedure), per film	0.8	0.3
76180 Transportation of portable x-ray equipment and personnel to home or nursing home, at cost to physician	—	—))

AMENDATORY SECTION (Amending Order 75-39, filed 11/28/75)

WAC 296-23-07901 DIAGNOSTIC ULTRASOUND.

Notes:

A-mode: Implies a one-dimensional ultrasonic measurement procedure.

M-mode: Implies a one-dimensional ultrasonic measurement procedure with movement of the trace to record amplitude and velocity of moving echo-producing structures.

((scan))

B-((mode))scan: Implies a two-dimensional ultrasonic scanning procedure with a two-dimensional display.

Real-time scan: Implies a two-dimensional ultrasonic scanning procedure with display of both two-dimensional structure and motion with time.

AMENDATORY SECTION (Amending Order 75-39, filed 11/28/75)

WAC 296-23-07902 HEAD AND NECK.

	Unit Value
76500 Echoencephalography, diencephalic midline, A-mode	7.7
76505 Echoencephalography, complete (diencephalic midline and ventricular size), A-mode	11.4
((76510) Echography ophthalmic, A-mode	15.4))
76511 Echography ophthalmic, spectral analysis with amplitude quantitation, A-mode	22.9
76512 contact scan B-mode	22.9
((76513) immersion scan B-mode	28.6)
76514 immersion M-mode	28.6))
76515 tomography, ((serial scan B-mode;)) with or without A-mode and/or M-mode	57.2
76516 Echography ophthalmic ultrasonic biometry, A-mode	15.4
76517 scan B-mode	28.6
76529 Ophthalmic ultrasound foreign body locatization .	BR
76530 Echography thyroid, A-mode	8.0
76535 scan B-mode	11.4
76550 Carotid imaging	15.6

(For Doppler see 76900)

AMENDATORY SECTION (Amending Order 75-39, filed 11/28/75)

WAC 296-23-07903 HEART.

	Unit Value
((76600) Echocardiography, pericardial effusion M-mode	9.7)
76605 Pericardiocentesis, by ultrasonic guidance	BR)
76610 Echocardiography, cardiac valve(s), M-mode	11.4))
76601 Echography, chest; A-mode	9.7
76604 B-scan (includes mediastinum)	11.4
76620 Echocardiography, M-mode, complete ((76600 and 76610 combined and chamber dimensions)) .	15.4
76625 limited, e.g., follow-up or limited study	7.7
76627 Echocardiography, real-time scan; complete	11.4
76628 limited	9.7

AMENDATORY SECTION (Amending Order 75-39, filed 11/28/75)

WAC 296-23-07904 THORAX.

	Unit Value
((76630) Echography, pleural effusion, A-mode	9.7)
76635 Thoracentesis, by ultrasonic guidance	BR))
76640 Echography breast, A-mode	9.7
76645 scan B-mode	19.2

AMENDATORY SECTION (Amending Order 75-39, filed 11/28/75)

WAC 296-23-07905 ABDOMEN AND RETROPERITONEUM.

	Unit Value
76700 Echography, scan B-mode, abdominal, complete ((survey study)) .	22.9
76705 limited, e.g., follow-up or limited study	15.4
((76710) Echography, scan B-mode hepatic	22.9)
76720 gallbladder	22.9)
76730 renal	22.9)
76735 Ultrasonic guidance, for renal cyst aspiration	BR)
76738 for renal biopsy	BR)
76740 Echography, scan B-mode, pancreas	22.9
76750 spleen	22.9
76760 Echography, abdominal aorta, A-mode	9.7
76765 scan B-mode	21.2))

76770 Echography, scan B-mode, retroperitoneal (e.g., renal, aorta, nodes), complete	22.9
((76780) urinary bladder	15.4))
76775 limited	19.2

AMENDATORY SECTION (Amending Order 75-39, filed 11/28/75)

WAC 296-23-07906 OBSTETRICS, GYNECOLOGY AND PELVIS.

	Unit Value
((76800))76805 Echography, pelvic scan B-mode, ((pregnancy diagnosis)) (e.g., obstetrics, gynecology, or transplants); complete	((11.4))
21.2	21.2)
((76810) fetal age determination (biparietal diameter	15.4))
76815 fetal growth rate ((series of 76810)) only ...	9.7
((76820) placenta localization	15.4)
76825 pregnancy, complete (76800, 76810 and 76820 combined	21.2
76830 molar pregnancy diagnosis	15.4
76835 ectopic pregnancy diagnosis	22.9
76840 intrauterine contraceptive device (IUCD)	15.4
76850 pelvic mass diagnosis	21.2
76860 Amniocentesis, by ultrasonic guidance	BR))
76855 Echography, pelvic area (Doppler)	11.4

AMENDATORY SECTION (Amending Order 75-39, filed 11/28/75)

WAC 296-23-07907 PERIPHERAL VASCULAR SYSTEM.

	Unit Value
76900 Peripheral flow study (Doppler), arterial only	17.1
76910 venous only	17.1
76920 arterial and venous (76900 and 76910 combined)	21.2
76925 Peripheral imaging, B-scan, Doppler or real-time scan	BR
76930 Pericardiocentesis; supervision and interpretation	BR
76931 complete procedure	BR

ULTRASONIC GUIDANCE PROCEDURES

76934 Ultrasonic guidance for thoracentesis; supervision and interpretation only	3.0
76935 complete procedure	5.0
76938 Ultrasonic guidance for cyst aspiration; supervision and interpretation only	1.0
76939 complete procedure	2.0
76942 Ultrasonic guidance for needle biopsy; supervision and interpretation only	4.0
76943 complete procedure	6.0
76946 Ultrasonic guidance for amniocentesis; supervision and interpretation only	4.0
76947 complete procedure	6.0
76950 Echography for placement of radiation therapy fields, B-scan	17.1
76960 Ultrasonic guidance for placement of radiation therapy fields except for B-scan echography	14.3

AMENDATORY SECTION (Amending Order 75-39, filed 11/28/75)

WAC 296-23-07908 MISCELLANEOUS.

	Unit Value
((76950) Echography for placement of radiation therapy fields, scan B-mode	17.1)
76960 Ultrasonic guidance for placement of radiation therapy fields (not listed above)	14.3))

	Unit Value
76970 Ultrasound study follow-up ((not listed above)) specify	10.0
76980 Ultrasound examination outside regular hours	8.6
76985 Ultrasound examination at bedside or in operating room	5.7
76990 Special ultrasonic display or imaging techniques (e.g., color)	
76999 Unlisted ultrasound examination (see guidelines)	BR

	Unit Value
77310 intermediate (three or more therapy beams)	4.0
77315 complex (one or more beams plus additional procedures)	6.0
77320 Radiation therapy isodose plan; wedge fields	5.0
77325 arc field	5.0
77330 rotation field	6.0
77335 moving strip field	6.0
77340 isocentric (in addition to above)	2.0
77345 Radiation therapy; tissue and geometric inhomogeneity correction (in addition to above)	2.0
77350 electron beam (in addition to above)	2.0
77355 neutron beam (in addition to above)	2.0
77360 special beam considerations (in addition to above)	2.0
77399 Unlisted procedure, external radiation dosimetry	BR

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-23-080 RADIOTHERAPY—GENERAL INFORMATION AND INSTRUCTIONS. (1) Radiation therapy as listed in this section includes teletherapy (i.e., the use of X-ray and other high-energy modalities, radium, cobalt, etc.) and brachytherapy ((~~for~~; ~~the~~) for surface, intracavitary or interstitial application ((~~of contained radioactive sources~~))). For treatment by injectable or ingestible radioactive isotopes, see section on Nuclear Medicine.

The services listed do not include the provision of radium or other radioelements. Those materials supplied by the physician should be listed separately and identified by the code 79900.

Where the radiologist renders full medical care (in addition to radiotherapy management) of a patient while in the hospital, such additional care may be identified by the appropriate procedure from the **MEDICINE or SURGERY** section.

~~((2) The listed values include normal follow-up care during the course of treatment and for a period of one year for malignant disease and 60 days for benign disease. Preliminary consultation and/or initial evaluation of the patient prior to radiation therapy are not included in the listed values. Complications or other circumstances requiring additional or unusual services concurrent with the therapy or during the follow-up period may warrant additional charges. For these diagnostic or therapeutic services, see appropriate sections.~~

~~((3) Values for treatment for benign conditions, or those malignant conditions which are treated on a short-term basis, are listed on a "per treatment" basis. Values for the treatment of malignant disease treated on a long-term basis are listed on a "per treatment week" basis.~~

DEFINITIONS

For the purposes of this section, the following definitions apply:

~~Simple Treatment: Treatment of benign or malignant disease requiring simple field localization or beam shaping devices; single field treatment or the use of prefabricated surface or intracavitary applicators applied for less than 8 hours.~~

~~Complex Treatment: Treatment for malignant disease requiring complex field localization and/or beam-shaping devices (i.e., treatment of eyelids or mantle fields in Hodgkins disease), two or more fields per treatment, massive single dose treatment, intracavitary cone therapy or interstitial or intracavitary applicator therapy applied for more than 8 hours:))~~

	Unit Value
TREATMENT PLANNING PROCESS (EXTERNAL AND INTERNAL SOURCES)	
77260 Radiation therapy treatment planning; inclusive service (including interpretation of special testing, patient contour and localization of internal structures)	BR
77265 interpretation of special testing ordered by the radiation therapist	BR
77270 patient contour and localization of internal structures	BR
77275 setting of each treatment port	BR
77280 Radiation therapy simulator aided field setting; simple	BR
77285 intermediate	BR
77290 complex	BR
77299 Unlisted procedure, radiation therapy planning	BR

DOSIMETRY (EXTERNAL SOURCE FIELDS) RADIATION PHYSICS

77300 Radiation therapy, central axis depth dose computation	4.0
77305 Radiation therapy, isodose plan; simple (one or two therapy beams)	3.0

TREATMENT MANAGEMENT	
Except as specified, assumes treatment on daily (usually 5 per week) basis and use of supervoltage/megavoltage or high energy particle sources	
77400 Daily radiation therapy treatment management; simple	2.0
77405 intermediate	3.0
77410 complex	4.0
77415 Radiation treatment port verification films	3.0
77420 Weekly radiation therapy treatment management; simple	4.0
77425 intermediate	5.0
77430 complex	6.0
77435 Course of radiation therapy treatment management; simple	6.0
77440 intermediate	8.0
77445 complex	10.0
77450 Daily transvaginal external radiation treatment	2.0
77455 Daily per oral external radiation treatment	1.0
77460 Daily superficial external radiation treatment, auxiliary shielding	1.0
77465 Daily orthovoltage external treatment	2.0
77499 Unlisted procedure, radiation therapy treatment management	BR

TREATMENT AIDS

77600 Radiation therapy treatment aid(s); wedge filter design and fabrication	2.0
77605 bolus design and fabrication	2.0
77610 field block design and fabrication	2.0
77615 compensating filter design and fabrication	2.0
77620 moulds or casts for immobilization	2.0
77625 stents or bite blocks	2.0
77630 Provision of external compensating shield; for radium sources	3.0
77635 for radioisotope sources	3.0
77699 Unlisted procedure, radiation therapy treatment aid	BR

DOSIMETRY (INTERNAL SOURCES) RADIATION PHYSICS

77700 Radium therapy dosimetry and interpretation of application	BR
77705 Radioisotope therapy dosimetry and interpretation of application	BR
77749 Unlisted procedure, internal radiation dosimetry	BR

RADIUM AND RADIOISOTOPE THERAPY

(Professional service component only)

77750 Infusion of radioactive materials for therapy (includes handling and loading)	5.0
77755 Supervision and consultation of radioelement application only	5.0
77760 Intracavitary radium application (includes handling and loading)	5.0
77765 Intracavitary radioisotope application (includes handling and loading)	5.0

	Unit Value
77770 <u>Interstitial radium application (includes handling and loading)</u>	5.0
77775 <u>Interstitial radioisotope therapy (includes handling and loading)</u>	5.0
77780 <u>Radium handling and loading</u>	5.0
77785 <u>Radioisotope handling and loading</u>	5.0
77799 <u>Unlisted procedure, radium and radioisotope therapy</u>	BR

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-23-115 SPECIAL ADJUNCTIVE SERVICES.

	Unit Value
((77900 Special treatment planning, including complex dosage calculation, dosimetry measurements, and/or design of special beam shaping devices, per hour	BR+
77910 <u>Simulation and tumor localization, per hour</u>	BR+))
77800 <u>TLD or microdosimetry</u>	BR
77805 <u>Consultation, computer dosimetry and isodose chart; brachytherapy</u>	BR
77810 <u>teletherapy</u>	BR
77850 <u>Professional physics consultation service</u>	BR
77860 <u>Continuing radiation physics consultation in support of radiation therapist</u>	BR
77999 <u>Unlisted procedure, radiation therapy special service</u>	BR

(For hyperbaric pressurization, see 96200, 96201)

(For chemotherapy of malignant disease, see 96030-96050)

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-23-120 NUCLEAR MEDICINE—GENERAL INFORMATION AND INSTRUCTIONS. (1) The listed procedures may be performed independently or in the course of the overall medical care of the patient. ((When) If the physician providing these Nuclear Medicine services is also responsible for the preliminary diagnostic work-up and/or follow-up care of the patient, see appropriate sections ((for office or hospital visits, consultations and other medical, surgical, radiological and pathology services)) also.

((2) The listed values do not include the cost of radioisotopes. To identify cost of isotopes or other drugs and materials, use 99070.))

The services listed do not include the provision of radium or other radioelements. Those materials supplied by the physician should be listed separately and identified by the code 78990 for diagnostic radionuclide(s) and 79900 for therapeutic radionuclide.

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-23-125 DIAGNOSTIC.

	Unit Value
((Thyroid Studies)) ENDOCRINE SYSTEM	
78000 <u>Thyroid uptake, single determination</u>	6.0
78001 <u>multiple determinations (as 6 and 24 hours, etc.)</u>	8.0
78003 <u>Thyroid stimulation, suppression or discharge (not including initial uptake studies)</u>	9.0
78006 <u>Thyroid imaging, with uptake; single determination</u>	16.0
78007 <u>multiple determinations</u>	18.0
((78005 with scan or imaging	16.0))
78010 <u>Thyroid ((scanning or)) imaging only</u>	10.0
78015 <u>Thyroid carcinoma metastases, imaging, neck and chest; only</u>	20.0
78016 <u>with additional studies (e.g., imaging other body areas urinary recovery, etc.)</u>	25.0

(For resin uptake T-3 or T-4 (RT3U), see 84250)

(For triiodothyronine (true T-3), RIA, see 84480)

(For T-4 thyroxine, see 84441)

	Unit Value
(For calcitonin, RIA, see 82308)	
78070 <u>Parathyroid imaging</u>	BR
(For parathormone (parathyroid hormone), RIA, see 83970)	
78075 <u>Adrenal imaging</u>	BR
(For cortisol, RIA, plasma, see 82533)	
(For cortisol, RIA, urine, see 82534)	
(For aldosterone, double isotope technique, see 82087)	
(For aldosterone, RIA, blood, see 82088)	
(For aldosterone, RIA, urine, see 82089)	
(For insulin, RIA, see 83525)	
(For proinsulin, RIA, see 84206)	
(For glucagon, RIA, see 82943)	
(For adrenocorticotrophic hormone (ACTH), RIA, see 82024)	
(For human growth hormone (HGH), (somatotropin), RIA, see 83003)	
(For thyroid stimulating hormone (TSH), RIA, see 84443)	
(For thyrotropin releasing factor, RIA, see 84444)	
(For plus long-acting thyroid stimulator (LATS), see 84445)	
(For follicle stimulating hormone (FSH component of pituitary gonadotropin), RIA, see 83001)	
(For luteinizing hormone (LH component of pituitary gonadotropin), (ICSH), RIA, see 83002)	
(For prolactin level (mammatropin), RIA, see 84146)	
(For oxytocin level, (oxytocinase), RIA, see 83949)	
(For vasopressin level (antidiuretic hormone), RIA, see 84588)	
(For estradiol, RIA, see 82670)	
(For progestosterone, RIA, see 84144)	
(For testosterone, blood, RIA, see 84403)	
(For testosterone, urine, RIA, see 84405)	

78099 <u>Unlisted endocrine procedure, diagnostic nuclear medicine</u>	BR
((78025 Radioiodine uptake study, with thyroid suppression	12.0
78030 with thyroid stimulation	12.0
78040 <u>Protein bound radio-iodine plasma, or conversion ratio</u>	6.0
(For T-3 or T-4, (in vitro) uptake, see 83440-83465))	

((Circulation and Blood Studies)) HEMATOPOIETIC, RETICULO-ENDOTHELIAL AND LYMPHATIC SYSTEM

((78100 Radiocobalt B-12 Schilling test, part 1	10.0
78101 Part 2	20.0))
78102 <u>Bone marrow imaging; limited area</u>	BR
78103 <u>multiple areas</u>	BR
78104 <u>whole body</u>	BR
((78105 Pernicious anemia radionuclide studies, other than 78100, 78101	BR+))
78110 <u>Blood or plasma volume, radioisotope technique; single sampling</u>	8.0
78111 <u>multiple sampling</u>	BR+
(For dye method, see 84605, 84610)	
78120 <u>Red cell mass determination, single sampling</u>	12.0
78121 <u>multiple sampling</u>	BR+

	Unit Value
78130 Red cell survival study (e.g., ((radiochromate) radiochromium)	20.0
((78131 other methods	BR+)
78135 plus splenic and/or hepatic sequestration	30.0
78140 Red cell splenic and/or hepatic sequestration	20.0
((78150 Gastrointestinal blood loss study	16.0))
78160 Plasma radio-iron turnover rate	16.0
78170 Radio-iron red cell utilization ((and body distribution))	24.0
78180 Radio-iron ((red cell utilization,)) body distribution and storage pools	BR+
((78190 Cardiac output (see also 93565)	12.0
78200 Circulation time (see also 93780)	12.0
78210 Tissue clearance studies	10.0))
(For cyanocobalamin (vitamin B-12), RIA, see 82607)	
(For folic acid (folate) serum, RIA, see 82746)	
(For human hepatitis antigen, nepatitis associated agent (Australian antigen) (HAA), RIA, see 86287)	
78185 Spleen imaging only; static	20.0
(If combined with liver study, use procedures 78215 and 78216)	
78186 with vascular flow	25.0
78195 Lymphatics and lymph glands imaging	BR
78199 Unlisted hematopoietic, R-E and lymphatic procedure, diagnostic nuclear medicine	BR
GASTROINTESTINAL SYSTEM	
78201 Liver imaging; static	20.0
78202 with vascular flow	25.0
(For spleen imaging only, use 78185 and 78186)	
78215 Liver and spleen imaging; static	25.0
78216 with vascular flow of liver and/or spleen	30.0
78220 Liver function (e.g., with radioiodinated rose bengal); with serial images	20.0
78221 with probe technique	25.0
78225 Liver-lung study, imaging (e.g., subphrenic abscess)	BR
78230 Salivary gland imaging; static	14.0
78231 with serial views	16.0
78240 Pancreas imaging	20.0
78270 Vitamin B-12 absorption studies (e.g., Schilling test); without intrinsic factor	10.0
78271 with intrinsic factor	20.0
78272 Vitamin B-12 absorption studies combined, with and without intrinsic factor	25.0
78280 Gastrointestinal blood loss study	16.0
78282 Gastrointestinal protein loss (e.g., radiochromium albumin)	12.0
78285 Gastrointestinal fat absorption study (e.g., radioiodinated triolein)	12.0
78286 Gastrointestinal fatty acid absorption study (e.g., radioiodinated oleic acid)	10.0
(For gastrin, RIA, see 82941)	
(For intrinsic factor level, see 84231)	
(For carcinoembryonic antigen level (CEA), RIA, see 86151)	
78290 Bowel imaging (e.g., ectopic gastric mucosa, Meckel's localization, volvulus)	20.0
78299 Unlisted gastrointestinal procedure, diagnostic nuclear medicine	BR
((Scanning or Imaging)) MUSCULOSKELETAL SYSTEM	
(For positron method or other complex instrumentation, see WAC 296-20-010, Item 10.)	
78300 Bone, imaging limited area (e.g., spine, pelvis, or skull, etc.)	30.0
78305 multiple areas	BR+
78306 whole body ((profile))	BR+

	Unit Value
((78310 Brain, two views	24.0
78311 more than two views	30.0
78315 including vascular flow	BR+
78320 Heart, pericardial effusion	20.0
78325 myocardial infarction	BR+
78330 other	BR+
78340 Kidney	18.0
78345 including dynamic studies	BR+
78350 Liver, one view	18.0
78351 more than one view	20.0
78360 Lung, perfusion studies	26.0
78365 ventilatory studies	BR+
78370 Pancreas (not including preliminary liver scan)	20.0
78390 Parathyroid	24.0
78400 Placenta (see also 78550)	14.0
78410 Salivary glands	14.0
78420 Spleen	20.0
78430 Whole body, other than bone	BR+
Miscellaneous	
78500 Liver function (e.g., radioiodinated rose bengal)	14.0
78510 Renal function (e.g., radio-iodhippurate sodium renogram)	16.0
78520 Gastrointestinal absorption (or excretion) study with radioactive fat, first phase	12.0
78521 second phase	10.0
78530 Gastrointestinal protein loss, I ₁₃₁ P.V.P.	12.0
78540 Tumor localization, ocular	14.0
78545 other	BR+
78550 Placenta localization (e.g., radioiodinated HSA) (see also 74720, 74725)	12.0))
78380 Joint imaging; limited area	BR
78381 multiple areas	BR
78399 Unlisted musculoskeletal procedure, diagnostic nuclear medicine	BR
CARDIOVASCULAR SYSTEM	
78401 Cardiac blood pool imaging; static (e.g., pericardial effusion)	20.0
78402 with vascular flow	25.0
78403 with determination of regional ventricular function (e.g., gated blood pool images)	BR
78405 Myocardium imaging; regional myocardial perfusion	BR
78406 myocardial infarction	BR
78435 Cardiac flow study, imaging (i.e., angiocardigraphy)	BR
78445 Vascular flow study, imaging (i.e., angiography, venography)	BR
78455 Venous thrombosis study (e.g., radioactive fibrinogen)	BR
78470 Cardiac output	BR
78490 Tissue clearance studies	BR
(For digoxin, RIA, see 82643)	
(For digitoxin (digitalis), RIA, see 82640)	
78499 Unlisted cardiovascular procedure, diagnostic nuclear medicine	BR
RESPIRATORY SYSTEM	
78580 Pulmonary perfusion imaging; particulate	26.0
78581 gaseous	BR
78582 gaseous, with ventilation, rebreathing and washout	BR
78586 Pulmonary ventilation imaging, aerosol; single projection	BR
78587 multiple projections (e.g., anterior, posterior, lateral views)	BR
78591 Pulmonary ventilation imaging, gaseous, single breath, single projection	BR
78593 Pulmonary ventilation imaging, gaseous, with rebreathing and washout with or without single breath; single projection	22.0
78594 multiple projections (e.g., anterior, posterior,	

	Unit Value	
78599	BR	lateral views)
	BR	Unlisted respiratory procedure, diagnostic nuclear medicine
NERVOUS SYSTEM		
78600	26.0	Brain imaging, limited procedure; static
78601	31.0	with vascular flow
78605	30.0	Brain imaging, complete; static
78606	35.0	with vascular flow
78610	10.0	Brain imaging, vascular flow study only
78630	35.0	Cerebrospinal fluid flow, imaging; cisternography (not including introduction of material)
		(For cisternal puncture, see 61053)
78635	35.0	ventriculography (not including introduction of material)
		(For ventricular puncture, see 61045)
78640	BR	myelography (not including introduction of material)
		(For lumbar puncture, see 62284)
78645	35.0	shunt evaluation
78650	32.0	CSF leakage
78655	BR	Eye tumor identification with radiophosphorus
78660	BR	Dacryocystography (lacrima flow study)
78699	BR	Unlisted nervous system procedure, diagnostic nuclear medicine
GENITOURINARY SYSTEM		
78700	18.0	Kidney imaging; static
78701	20.0	with vascular flow
78704	23.0	with function study (i.e., imaging renogram)
78707	30.0	with vascular flow and function study
		(For introduction of radioactive substance in association with renal endoscopy, see 50558, 50559, 50578)
78715	BR	Kidney vascular flow
78720	15.0	Kidney function study (i.e., renogram)
78725	BR	Kidney function study, clearance
		(For renin (angiotensin I), RIA, see 84244)
		(For angiotensin II, RIA, see 82163)
78730	BR	Urinary bladder residual study
		(For introduction of radioactive substance in association with cystotomy or cystostomy, see 51020; in association with cystourethroscopy, see 52250)
78740	BR	Ureteral reflux study
		(For estradiol, RIA, see 82670)
		(For progesterone, RIA, see 84144)
		(For testosterone, blood, RIA, see 84403)
		(For testosterone, urine, RIA, see 84405)
		(For introduction of radioactive substance in association with ureteral endoscopy, see 50958, 50959, 50978)
78770	14.0	Placenta imaging
78775	12.0	Placenta localization (e.g., radioiodinated HSA)
		(For lactogen, placental (HPL) chorionic somatomammotropin, RIA, see 83632)
		(For chorionic gonadotropin, RIA, see 82998)
78799	BR	Unlisted genitourinary procedure, diagnostic nuclear medicine
MISCELLANEOUS STUDIES		
78800	BR	Tumor localization (e.g., gallium, selenomethionine); limited area
		(For specific organ, see appropriate heading)

		Unit Value
	(For radiophosphorus tumor identification, ocular, see 78655)	
78801	multiple areas	BR
78802	whole body	BR
78990	Provision of diagnostic radionuclide(s)	BR
78999	Unlisted miscellaneous procedure, diagnostic nuclear medicine	BR
AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)		
WAC 296-23-130 THERAPEUTIC.		
Preliminary and follow-up diagnostic tests not included. For these services, see appropriate sections.		
The listed values do not include the cost of radioisotopes. Use 99070 to identify cost of isotopes.		
(For procedures involving radioactive sealed sources and surface application of radioactive material, see Radiation Therapy)		
		Unit Value
79000	Radionuclide therapy, hyperthyroidism, initial including evaluation of patient	48.0
79001	subsequent, each	20.0
79020	Radionuclide therapy, thyroid suppression, ((initial)) (euthyroid cardiac disease), including evaluation of patient	48.0
	((79021) subsequent, each)	20.0
	((79040) 79030 Radionuclide ablation of gland for thyroid carcinoma	BR+
79035	Radionuclide therapy for metastases of thyroid carcinoma	BR
	((79110) 79100 Radionuclide therapy, polycythemia vera, chronic leukemia, etc., ((per)) each treatment	16.0
79200	Intracavitary radioactive colloid therapy	24.0
79300	Interstitial radioactive colloid therapy	60.0
79400	((intravenous therapy)) Radionuclide therapy, nonthyroid, nonhematologic e.g., for metastases to bone	BR+
79420	Intravascular radionuclide therapy, particulate	BR
79440	Intra-articular radionuclide therapy	BR
79900	Provision of therapeutic radionuclide(s)	BR
79999	Unlisted radionuclide therapeutic procedure	BR
(((For other chemotherapy procedures, see 96030-96050)))		

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-23-200 PATHOLOGY GENERAL INFORMATION AND INSTRUCTION. Rules and billing procedure pertaining to all practices rendering service to injured workers are presented in General information section beginning with WAC 296-20-010. Some commonalities are repeated here for convenience of those doctors referring to Pathology section. Definitions and rules to Pathology are also included here.

(1) The following values apply only when these services are performed by or under the responsible supervision of a physician. Unless otherwise specified, the listed values include the collection and handling of the specimens by the laboratory performing the procedure.

(2) ((Necessary laboratory procedures and tissue examinations of a routine nature will be allowed provided justification is substantiated in the monthly progress report)) Lab reports must be attached to bills for lab services. See WAC 296-20-125 for further billing instruction.

(3) ((Bills for laboratory work must be accompanied by the laboratory reports and must be submitted within sixty days of the date service is rendered. No payment will be made unless the bill has been received by the department within the sixty day period.

((*) Laboratory procedures performed by other than the billing physician shall be billed at the value charged that physician by the reference (outside) laboratory under the individual procedure number or the panel procedure number listed under "PANEL OR PROFILE TESTS" (see modifier -90).

(4) The department or self-insurer may deny payment for lab procedures which are determined to be excessive or unnecessary for management of the injury or conditions.

(5) ((Laboratory procedures billed to the department may be denied if they are not determined to be reasonably necessary in the management of the industrial illness or injury.

(6)) Panel (Profile) Tests: Panel (Profile) tests are defined as certain multiple tests performed on a single specimen of blood or urine. They are distinguished from the single or multiple test(s) performed on an "individual," "immediate" or "stat" reporting basis.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-23-201 UNLISTED SERVICE OR PROCEDURE. A service or procedure may be provided that is not listed in this Fee Schedule. When reporting such a service, the appropriate "Unlisted Procedure" code may be used to indicate the service, identifying it by "Special Report" as discussed in WAC 296-23-20101 below. The "Unlisted Procedures" and accompanying codes for **PATHOLOGY AND LABORATORY ((is))** are as follows:

- ~~((89399 Unlisted pathological or laboratory service or procedure.))~~
- 81099 Unlisted urinalysis procedure
- 84999 Unlisted chemistry or toxicology procedure
- 85999 Unlisted hematology procedure
- 86999 Unlisted immunology procedure
- 87999 Unlisted microbiology procedure
- 88099 Unlisted necropsy (autopsy) procedure
- 88199 Unlisted cytopathology procedure
- 88299 Unlisted cytogenetic study
- 88399 Unlisted surgical pathology procedure
- 89399 Unlisted miscellaneous pathology test.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-23-20101 SPECIAL REPORT. A service that is rarely provided, unusual, variable or new may require a special report in determining medical appropriateness of the service. Pertinent information should include an adequate definition or description of the nature, extent, and need for the procedure; and the time, effort, and equipment necessary to provide the service. Additional items which may be helpful might include: Complexity of symptoms, final diagnosis, pertinent physical findings, diagnostic and therapeutic procedures, concurrent problems, and followup care. For report requirements see WAC 296-20-01002.

NEW SECTION

WAC 296-23-20102 PATHOLOGY MODIFIER. MODIFIERS: Listed services and procedures may be modified under certain circumstances. When applicable, the modifying circumstance should be identified by the addition of the appropriate modifier code, which is a two digit number placed after the usual procedure number from which it is separated by a hyphen. If more than one modifier is used, the "multiple modifiers" code placed first after the procedure code indicates that one or more additional modifier codes will follow. All modifiers and their respective codes are listed in Appendix A. Modifiers commonly used in **PATHOLOGY AND LABORATORY** are as follows:

- 22 **UNUSUAL SERVICES:** When the service(s) provided is greater than that usually required for the listed procedure, it may be identified by adding modifier '-22' to the usual procedure number. A report may also be appropriate. BR
- 26 **PROFESSIONAL COMPONENT:** Certain procedures (e.g., laboratory, radiology, electrocardiogram, specific diagnostic services) are a combination of a physician component and a technical component. When the professional component is reported separately, the service may be identified by adding the modifier '-22' to the usual procedure number.
- 52 **REDUCED SERVICES:** Under certain circumstances a service or procedure is partially reduced

or eliminated at the doctor's election. Under these circumstances the service provided can be identified by its usual procedure number and the addition of the modifier '-52', signifying that the service is reduced. This provides a means of reporting reduced services without disturbing the identification of the basic service.

- 90 **REFERENCE (OUTSIDE) LABORATORY:** When laboratory procedures are performed by a party other than the treating or reporting doctor, the procedure may be identified by adding the modifier '-90' to the usual procedure number. The procedure shall be billed as charged to the ordering doctor. BR

AMENDATORY SECTION (Amending Order 74-39, filed 11/22/74)

WAC 296-23-204 PANEL OR PROFILE TESTS.

The following list contains those tests that can be and are frequently done as groups and combinations ("profiles") on automated multi-channel equipment. For reporting two tests, regardless of method of testing, use appropriate single test code numbers. For any combination of three or more tests among those listed immediately below, use the appropriate number 80003-80019. Groups of the tests listed here are distinguished from multiple tests performed individually for immediate or "stat" reporting.

The following unit values apply when three or more of the tests listed below are performed on the same blood or urine specimen under the conditions described under item 6, page 188.

((Collection and handling of specimen is not included. (See 99000; Medicine section.))

(For collection and handling of specimen, see 99000 and 99001)

- Albumin
- Albumin/globulin ratio
- Bilirubin, direct
- Bilirubin, total
- Calcium
- Carbon dioxide content
- ((Cephalin flocculation))
- Chloride((s))
- Cholesterol
- Creatinine
- Globulin
- Glucose (sugar)
- Lactic dehydrogenase (LDH)
- Phosphatase, acid
- Phosphatase, alkaline
- Phosphorus
- Potassium
- Protein, total
- Sodium
- ((Sugar (Glucose)
- Thymol turbidity))
- Transaminase, ((glut)) glutamic, ((oxalic)) oxaloacetic (SGOT)
- Transaminase, ((glut)) glutamic, pyruvic (SGPT)
- Urea Nitrogen (BUN)
- Uric Acid

		Unit Value
80003	3 tests	28.0
80004	4 tests	32.0
80005	5 tests	36.0
80006	6 tests	40.0
80007	7 tests	44.0
80008	8 tests	48.0
80009	9 tests	52.0
80010	10 tests	56.0
80011	11 tests	60.0
80012	12 tests	64.0
((80013 Over 12 tests	68.0)	
80016	13-16 clinical chemistry tests	28

80018	17-18 clinical chemistry tests	30
80019	19 or more clinical chemistry tests (indicate instrument used and number of tests performed)...	32

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-23-208 URINALYSIS.

(For specific analyses, see appropriate section)

		Unit Value
81000	Urinalysis, routine, complete	12.0
81002	routine, without microscopy	8.0
81004	components, single, not otherwise listed, specify	5.0
81005	chemical, qualitative any number of constituents	8.0
81006	urine volume measurement	5.0
81010	concentration and dilution test	14.0
81015	microscopic	10.0
81020	two or three glass test	10.0
81030	Quantitative sediment analysis and quantitative protein (Addis count)	40.0
81099	Unlisted urinalysis procedure	BR

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-23-212 CHEMISTRY AND TOXICOLOGY.

((f))The material for examination can be from any source((f)). Examination is quantitative unless specified. (For list of automated, multichannel tests, see 80003-80019).

		Unit Value
82000	Acetaldehyde, blood	40.0
82003	Acetaminophen, urine	40.0
	(Acetic anhydride, see volatiles, 84600)	
82005	Acetoacetic acid, serum	40.0
((82010))82009	Acetone, ((serum)) qualitative	((40.0))
	quantitative	12.0
82010	quantitative	12.0
	(For acetone bodies, see 82009-82010, 82635, 83947)	
82011	Acetylsalicylic acid; quantitative	32.0
82012	qualitative	32.0
((82020))82013	((Acetyl choline esterase)) Acetylcholinesterase, ((red blood cell))	40.0
((82025) serum		40.0))
	(Acid, gastric, see gastric acid, 82926-82932)	
	(Acid phosphatase, see 84060-84065)	
82015	Acidity, titratable, urine	30.0
	(ACTH, see 82024)	
	(Adrenalin-Noradrenalin, see catecholamines, 82382-82384)	
82024	Adrenocorticotrophic hormone (ACTH), RIA	120.0
82030	Adenosine((-)5'-diphosphate and 5'-monophosphate, (AMP), cyclic, RIA blood	40.0
82035	5'-triphosphate, blood	40.0
((*)82040	Albumin, serum	20.0
82042	urine, quantitative (specify method, e.g., Esbach)	20.0
	(For albumin/globulin ratio, albumin/globulin ratio by electrophoretic method, see 84155-84200.)	
82055	Alcohol (ethanol), blood, chemical	30.0
82060	by gas-liquid chromatography	40.0
82065	urine, chemical	30.0
82070	by gas-liquid chromatography	40.0

	((see also 83580, 83585, 83850, 83855))	
82072	Alcohol (ethanol) gelation	30.0
82075	breath	60.0
82076	Alcohol; isopropyl	60.0
82078	methyl	60.0
82085	Aldolase, blood, kinetic ultraviolet method	26.0
((82090))82086	colorimetric	20.0
82087	Aldosterone; double isotope technique	120.0
82088	RIA blood	100.0
82089	RIA urine	100.0
	(Alkaline phosphatase, see 84075-84080)	
82095	Alkaloids, tissue, screening	80.0
82096	quantitative	120.0
82100	urine, screening	80.0
82101	quantitative	120.0
	(See also 82486, 82600, 82662, 82755, 84231)	
	(Alpha amino acid nitrogen, see 82126)	
	(Alpha-hydroxybutyric (HBD) dehydrogenase, see 83485, 83486)	
	(Alphaketoglutarate, see 83584)	
	(Alpha tocopherol (Vitamin E), see 84446)	
((82105))82126	Alpha amino acid nitrogen((urine))	50.0
((82110))82115	Alpha hydroxy butyric (AHB) dehydrogenase; blood, kinetic ultraviolet method	22.0
82115	colorimetric	20.0
82120	Alpha oxoglutarate (ketoglutarate), blood	40.0))
82128	Amino acids, qualitative	40.0
82130	Amino acids, urine, chromatographic fractionation and quantitation	((BR+))
		180.0
82134	Aminohippurate, para (PAH)	30.0
	(For administration, see 36410, 99070)	
82135	Aminolevulinic acid, delta (ALA)	50.0
82137	Aminophylline	60.0
82138	Amitriptyline	60.0
82140	Ammonia, blood	40.0
82141	urine	40.0
82142	Ammonium chloride loading test	40.0
82143	Amniotic fluid scan (spectrophotometric)	50.0
	(For L/S ratio, see 83661)	
	(Amobarbital, see 82205-82210)	
82145	Amphetamine, ((urine)) or methamphetamine, chemical, quantitative	80.0
82150	Amylase, ((blood)) serum	30.0
82155	((isozymes;)) isoenzymes electrophoretic	BR +
((82160))82156	urine (diastase)	30.0
82157	Androstenedione RIA	80.0
82159	Androsterone	50.0
	(See also 83593-83596)	
	(Angiotensin I, see renin, 84244)	
82163	Angiotensin II, RIA	BR
82165	Aniline	BR
82168	Antihistamines	BR
82170	Antimony, urine	80.0
	(Antimony, screen, see 83015)	
	(Antitrypsin, alpha-1-, see 86329)	
82175	Arsenic, blood, urine, gastric contents, hair or nails, quantitative	80.0
((82177) Reinsch test (screening)		30.0))
	(For heavy metal screening, see 83015)	
82180	Ascorbic acid, blood	40.0

	Unit Value		Unit Value
((82190) Atherogenic index, blood, ultra-centrifugation, quantitative)	100.0	((82385) Cephalin flocculation, blood)	20.0
82200 Barbiturates, blood, qualitative	40.0	(Carotene plus Vitamin A, see 84595)	
(Aspirin, see acetylsalicylic acid, 82011, 82012)		82382 Catecholamines (dopamine, norepinephrine, epinephrine); total urine	BR
(Atherogenic index, blood, ultracentrifugation, quantitative, see 83717)		82383 blood	BR
82205 Barbiturates quantitative	60.0	82384 fractionated	BR
82210 quantitative and identification	80.0	(For urine metabolites, see 83835, 84585)	
((82215) tissue, qualitative)	100.0	82390 Ceruloplasmin (copper oxidase), blood	40.0
82220 quantitative	100.0	(For gel diffusion technique, see ((86340)) 86331; immunodiffusion technique, see 86329)	
(For qualitative screen, see 82486, 82660, 82662, 82755, 84231)		82400 Chloral hydrate, blood	60.0
82225 Barium	BR	82405 urine	40.0
(Bence-Jones protein, 84185)		82415 Chloramphenicol, blood	40.0
82230 Beryllium, urine	80.0	82418 Chlorazepate dipotassium	40.0
82235 Bicarbonate excretion, urine	BR	82420 Chlordiazepoxide, blood	60.0
82236 Bicarbonate loading test	BR	82425 urine	60.0
(Bicarbonate, see 82374)		*82435 Chlorides, blood, ((chemical)) (specify chemical or electrometric)	20.0
82240 Bile acids, blood, fractionated	120.0	((82440) electrometric)	20.0
82245 Bile pigments, urine	8.0	((82445) 82436 urine, ((chemical)) (specify chemical, electrometric or Fantus test))	20.0
*82250 Bilirubin, blood, total or direct	24.0	((82450) electrometric)	20.0
82251 blood, total AND direct	30.0	82437 sweat (without iontophoresis)	20.0
82252 feces, qualitative	BR	(For iontophoresis, see 89360)	
82260 urine, quantitative	12.0	((82455) 82438 spinal fluid	20.0
82265 amniotic fluid, quantitative	30.0	82441 Chlorinated hydrocarbons, screen	20.0
82268 Bismuth	80.0	82443 Chlorothiazide-hydrochlorothiazide	60.0
82270 Blood, feces, occult, screening ((see also 89120))	8.0	(Chlorpromazine, see 84021, 84022)	
82273 duodenal, gastric contents, qualitative	BR	*82465 Cholesterol, ((blood)) serum; total	22.0
(Blood urea nitrogen (BUN), see 84520-84525, 84545)		82470 total and esters	30.0
(Blood volume, see 84605-84610, 78110, 78111)		82480 Cholinesterase, serum	40.0
82280 Boric acid, blood	100.0	82482 RBC	60.0
82285 urine	100.0	82484 ((combined)) serum and RBC	80.0
82286 Bradykinin	BR	82485 Chondroitin B sulfate, quantitative	BR
82290 Bromides, blood	24.0	(Chorionic gonadotropin, see gonadotropin, 82996-83002)	
((82295)) 82291 urine	40.0	82486 Chromatography; gas-liquid, compound and method not elsewhere specified	BR
(For bromsulphthalein (BSP), see ((84390)) 84382)		82487 paper, 1-dimensional, compound and method not elsewhere specified	BR
82300 Cadmium, urine	100.0	82488 paper, 2-dimensional, not elsewhere specified	BR
82305 Caffeine	60.0	82489 thin layer, not elsewhere specified	BR
82308 Calcitonin, RIA	80.0	82490 Chromium, blood	100.0
*82310 Calcium, blood, chemical	22.0	82495 urine	100.0
*82315 fluorometric	22.0	82505 Chymotrypsin, duodenal contents	30.0
82320 emission flame photometry	22.0	82507 Citric acid	80.0
82325 atomic absorption flame photometry	24.0	(Cocaine, screen, see 82486, 82660, 82662, 82755, 84231)	
82330 fractionated, diffusible	60.0	(Codeine, quantitative, see 82096, 82101)	
82335 urine, qualitative (Sulkowitch)	11.0	(Complement, see 86159-86162)	
82340 ((24 hour)) quantitative timed specimen	32.0	(Compound S, see 82634)	
82345 feces, ((24 hour)) quantitative timed specimen	80.0	((82515) Congo red, blood (includes dye and injection))	16.0
82355 Calculus (stone) qualitative, chemical	40.0	82525 Copper, blood	60.0
82360 quantitative, chemical	60.0	((82530)) 82526 urine	60.0
82365 infrared spectroscopy	60.0	(Coproblinogen, feces, 84575)	
82370 X-ray defraction	50.0	(Coproprophyrins, see 84118-84121)	
((For carbon dioxide, see 82830, 82835, 82840, 82845))		(Corticosteroids, see 83492-83496)	
(Carbamates, see individual listings)		82528 Corticosterone, RIA	BR
82372 Carbamazepine, serum	BR	(See also 83593-83597)	
82374 Carbon dioxide, combining power or content	10.0	82529 Cortisol; fluorometric, plasma	36.0
(See also 82801-82803, 82817)		82531 CPB, plasma	75.0
82375 Carbon monoxide, ((blood (see also 83025))) (carboxyhemoglobin); quantitative	48.0	82532 CPB, urine	75.0
82376 qualitative	48.0	82533 RIA, plasma	90.0
(Carbon tetrachloride, see 84600)			
(Carboxyhemoglobin, see 82375, 82376)			
82380 Carotene, blood ((see also 84595))	40.0		

	Unit Value		Unit Value
82534 RIA, urine	90.0	82660 Drug screen (amphetamines, barbiturates, alkaloids)	80.0
82540 Creatine, blood	24.0		
82545 urine	40.0	(See also 82486-82489, 82662, 82755, 84231)	
82546 Creatine and creatinine	50.0	(Duodenal contents, see individual enzymes; for intubation and collection, see 89100)	
82550 Creatine phosphokinase (CPK), blood, timed kinetic ultraviolet method	26.0		
	30.0	82662 Enzyme immunoassay technique for drugs, EMIT ..	30.0
82552 isoenzymes	20.0	82664 Electrophoretic technique, not elsewhere specified ..	45.0
82555 colorimetric	20.0	82666 Epiandrosterone	BR
82565 Creatinine, blood	20.0		
82570 urine	20.0	(See also 83593, 83596)	
82575 clearance	40.0	(Epinephrine, see 82382-82384)	
82585 Cryofibrinogen, blood	40.0	82668 Erythropoietin, bioassay	BR
82595 Cryoglobulin, blood	40.0		
(Crystals, pyrophosphate vs. urate, see 84208)		(For HI method, see 86280)	
82600 Cyanide, blood	80.0	82670 Estradiol, RIA (placental)	90.0
((82605)82601 tissue	80.0	82671 Estrogens; fractionated	85.0
82606 Cyanocobalamin (Vitamin B-12); bioassay	BR	82672 total	60.0
82607 RIA	BR	82673 Estriol, placental; fluorometric	54.0
(Cyclic AMP, see 82030)		82674 GLC	45.0
(Cyclic GMP, see 83008)		82676 Estriol, nonpregnancy; chemical	75.0
82614 Cystine, blood, qualitative	BR	82677 RIA	105.0
82615 Cystine, and homocystine, urine, qualitative	30.0	82678 Estrone; chemical	75.0
82620 quantitative	40.0	82679 RIA	90.0
((82630-Delta-aminolevulinic acid (ALA), urine (see also 84120)	60.0)	(Ethanol, see 82055-82075)	
82624 Cystine aminopeptidase	BR	((82655-Diphenothydantoin (Dilantin), blood	80.0
(D hemoglobin, see 83053)		82665 Duodenal contents, enzyme determination, each enzyme	30.0
(Delta-aminolevulinic acid (ALA), see 82135)		(For chymotrypsin, see 82505)	
82626 Dehydroepiandrosterone, RIA	BR	(For intubation, see 89100)	
(See also 83593-83596)		82675 pH	10.0
82628 Desipramine	BR	82680 bicarbonate, quantitative	20.0)
82633 Desoxycorticosterone, 11-RIA	BR	82690 Ethchlorvynol (Placidyl), blood	60.0
(See also 83593-83596)		((82695)82691 urine	60.0
82634 Desoxycortisol, 11-(compound S), RIA	80.0	82692 Ethosuximide	BR
(See also 83492)		(Ethyl alcohol, see 82055-82075)	
82635 Diacetic acid	18.0	82694 Etiocholanolone	BR
(Diagnex Blue, tubeless gastric, see 82939)		(See also 83593, 83596)	
(Diastase, urine, see 82156)		(Evans Blue, see blood volume, 84605-84610)	
82636 Diazepam	50.0	82705 Fat or lipids, feces, screening ((see also 89120)) ..	10.0
82638 Dibucaine number	34.0	82710 quantitative, 24 or 72 hour specimen	100.0
82639 Dicumarol	BR	82715 Fat differential, feces, quantitative	BR
(Dichloroethane, see 84600)		82720 Fatty acids, blood, esterified	40.0
(Dichloromethane, see 84600)		82725 nonesterified	40.0
(Diethylether, see 84600)		82727 Ferric chloride, urine	BR
82640 Digitoxin digitalis, blood RIA	BR+	(Fetal hemoglobin, see hemoglobin 83020, 83033, and 85460)	
((82645)82641 urine	BR+	(Fetoprotein, alpha-1, see 86329)	
82643 Digoxin, RIA	36.0	82730 Fibrinogen, quantitative	21.0
82646 Dihydrocodinone	BR	(See also 85371, 85377)	
(Dihydrocodinone screen, see 82486-82489, 82662, 82755, 84231)		82735 Fluoride, blood	100.0
82649 Dihydromorphinone, quantitative	75.0	82740 urine	100.0
(Dihydromorphinone screen, see 82486, 82489, 82662, 82755, 84231)		82742 Flurazepam	BR
82651 Dihydrotestosterone (DHT)	BR	82745 Folic acid, (folate), blood bioassay	BR+
82654 Dimethadione	BR	82746 RIA	45.0
(Diphenylhydantoin, see 84045)		(Follicle stimulating hormone (FSH), see 83000, 83001)	
(Dopamine, see 82382-82384)		82750 Formimino-glutamic acid (FIGLU), urine	100.0
82656 Doxepin	BR	82755 Free radical assay technique for drugs (FRAT)	BR
		82756 Free thyroxine index (T-7)	BR
		82757 Fructose, semen	BR
		(Fructose, TLC screen see 84375)	
		82759 Galactokinase, RBC	BR

	Unit Value		Unit Value
82760 Galactose, blood	40.0		
82763 tolerance test	75.0		
82765 urine	40.0		
82775 Galactose-1-phosphate uridyl transferase	60.0		
(For TLC screen, see 84375)			
82776 screen	18.0		
82780 Gallium	BR		
82784 Gammaglobulin, A, D, G, M nephelometric, each ..	12.0		
82785 Gammaglobulin, E, RIA	75.0		
82786 Gammaglobulin, salt precipitation method	21.0		
(Gammaglobulin by gel (immuno) diffusion, see 86329)			
(Gamma-glutamyl transpeptidase (GGT), see 82977)			
82790 Gases, blood, oxygen saturation; by calculation from pO ₂	40.0		
82791 by manometry	40.0		
82792 by oximetry	20.0		
82793 by spectrophotometry	40.0		
82795 by calculation from pCO ₂	6.0		
82800 Gases, blood, pH, ((arterial)) only	20.0		
82801 pCO ₂	24.0		
82802 pH, pCO ₂ , by electrode	42.0		
82803 pH, pCO ₂ , pO ₂ simultaneous	54.0		
82804 pO ₂ by electrode	40.0		
82812 pO ₂ by manometry	24.0		
82817 pH, pCO ₂ , by tonometry	24.0		
(For arterial puncture, see 36600)			
(For blood gas studies as a part of pulmonary function studies, see 94700-94710)			
(82805 venous	20.0		
82820 pCO ₂ , arterial or venous by electrode	40.0		
82825 subsequent, same study, each	20.0		
82830 carbon dioxide content, volumetric method (Van Slyke)	30.0		
82835 subsequent, same study, each	20.0		
82840 by titration	20.0		
82845 subsequent, same study, each	12.0		
82850 O ₂ saturation, arterial blood, manometric method (Van Slyke)	40.0		
82855 subsequent, same study, each	30.0		
82860 spectrophotometric	40.0		
82865 subsequent, same study, each	30.0		
82870 by oximeter	20.0		
82875 subsequent, same study, each	16.0		
82880 PO ₂ , arterial blood, by electrode	40.0		
82885 subsequent, same study, each	30.0		
82890 PO ₂ , pCO ₂ and pH, arterial blood, by electrode ..	100.0		
82892 subsequent, same study, each	70.0		
82895 pCO ₂ , pH, (Astrup type), arterial or venous blood ..	90.0		
82900 subsequent, same study, each	60.0		
82910 pH, pCO ₂ and plasma bicarbonate, arterial or ve-	90.0		
82915 subsequent, same study, each	60.0		
82925 Gastric analysis, chemical, single determination ..	16.0		
82926 Gastric acid, free and total; single specimen	11.2		
82927 each additional specimen	9.0		
82928 Gastric acid, free or total; single specimen	9.0		
82929 each additional specimen	7.5		
82931 Gastric acid, pH titration; single specimen	24.0		
82932 each additional specimen	18.0		
82939 Gastric analysis, tubeless (Diagnex blue)	BR		
(Gastric analysis, with stimulation, see 89140, 89141)			
(Gastric analysis, pepsin, see 83974)			
(For gastric intubation, see 89130, 74340)			
(For aspiration of specimens with insulin administration (Hollander test), see 91075)			
82941 Gastrin, RIA	48.0		
(GGT, see 82977)			
		(GLC, gas liquid chromatography, see 82486)	
		82942 Globulin, serum	10.5
		(See also 82784, 82786, 84155-84200, 86329)	
		82943 Glucagon, RIA	BR
		82944 Glucosamine	6.0
		82947 Glucose; except urine (e.g., blood, spinal fluid, joint fluid)	10.5
		82948 blood, stick test	8.2
		82949 fermentation	22.5
		82950 post glucose dose (includes glucose)	13.5
		82951 tolerance test (GTT), three specimens (includes glucose)	37.5
		82952 tolerance test, each additional beyond three speci-	10.5
		mens	
		(For intravenous glucose tolerance test, use 36410, 99070)	
		(For GTT with medication, use 36410, 90730, 99070)	
		82953 tolbutamide tolerance test	15.0
		(For insulin tolerance test, see 82937)	
		82954 urine	20.0
		(For intubation, see 89130, 79340)	
		(82930 fractional, 5 specimens	44.0
		82935 with histamine or histalog	64.0
		82940 pepsin	60.0
		82945 analysis, tubeless (Diagnex Blue)	40.0
		(For globulin, see 84155-84200)	
		(For glucose, see 84330))	
		82955 Glucose-6-phosphate dehydrogenase, erythrocyte ..	60.0
		82960 screen	56.0
		82965 Glutamate dehydrogenase, blood	40.0
		82975 Glutamine (glutamic acid amide), spinal fluid	80.0
		82977 Glutamyl transpeptidase, gamma (GGT)	BR
		82978 Glutathione	BR
		82979 Glutathione reductase, RBC	BR
		82980 Glutethimide	56.2
		82985 Glycoprotein((- blood, electrophoretic method))	60.0
		82995 Gold, blood	100.0
		82996 Gonadotropin, chorionic, bioassay; qualitative	30.0
		82997 quantitative	30.0
		82998 Gonadotropin, chorionic, RIA	BR
		(For immunoassay, qualitative, see 86006, 86007)	
		(For quantitative titer, see 86008, 86009)	
		83000 Gonadotropin, pituitary FSH; bioassay	90.0
		83001 RIA	90.0
		83002 (LH)(ICSH)RIA	90.0
		83003 Growth hormone (HGH), (somatotropin) RIA	48.0
		83005 Guanase, blood	40.0
		83008 Guanosine monophosphate, cyclic, RIA	BR
		83010 Haptoglobin, ((blood)) chemical	60.0
		83011 quantitative, electrophoresis	30.0
		83012 phenotypes, electrophoresis	60.0
		83015 Heavy metal screen (arsenic, bismuth, mercury, anti-	30.0
		mony); chemical (e.g., Reinsch, Gutzeit)	BR
		83018 chromatography, DEAE column	BR
		83020 Hemoglobin, ((electrophoretic separation))	80.0
		electrophoresis (includes A ₂ , S, C, etc.)	
		(((For hemoglobin, colorimetric, see 85050)	
		83022 A₂	60.0
		83025 carbon monoxide, quantitative	30.0
		(Hemoglobin, carboxyhemoglobin (CO), see 82375, 82376; colorimetric, see 85018, 85031)	
		83030 F (fetal), chemical	40.0
		(83032 plasma	50.0

	Unit Value		Unit Value		
83035	S (sickle), chemical	50.0))	83300	with etiocholanolone fraction	160.0
83033	F (fetal), qualitative (APT) test, fecal	56.0	83310	pituitary gonadotropins (FSH) bio-assay	120.0
83040	methemoglobin, electrophoretic separation	80.0	83320	pregnanediol, urine, chemical	60.0
83045	qualitative	20.0	83325	chromatographic	60.0
83050	quantitative	40.0	83340	pregnantriol, urine, chemical	60.0
83051	plasma	40.0	83345	chromatographic	60.0
83052	sickle, turbidimetric	34.0	83350	progesterone, blood	BR+
83053	solubility, S-D, etc.	40.0	83360	renin, blood	BR+
83055	sulfhemoglobin, qualitative	20.0	83370	angiotensin, blood	BR+
83060	quantitative	40.0	83380	growth hormone, blood	60.0
83065	thermolabile	BR	83390	insulin, blood	40.0
83068	unstable, screen	BR	83405	testosterone, blood	BR+
83069	urine	BR	83410	urine	BR+
83070	Hemosiderin, urine	12.0	83420	thyroid, protein-bound iodine (PBI), blood	16.0
((83080	Heroin, blood or urine, screening	80.0	83425	butanol extractable iodine (BEI), blood	28.0
83085	quantitative	120.0))	83430	total iodine, blood	16.0
	(Heroin, screening, see 82660, 82486, 82662, 82755, 84231; quantitative, see 82096, 82101)		83435	urine-24 hour quantitative	20.0
	(HIAA, see 83497)		83440	tri-iodo-thyronine (T-3) or thyroxine (T-4) uptake, radioactive	20.0
83086	Histidine; blood, qualitative	BR	83450	thyroxine (T-4), by column	28.0
83087	urine, qualitative	BR	83455	Murphy-Pattee or Nakajima	68.0
83088	Histamine	100.0	83460	free	BR+
	(Hollander test, see 91075)		83465	index (includes thyroxine by column and T-3 or T-4 uptake)	48.0
	(Homocystine, qualitative, see 82615)		83470	binding globulin	64.0
	(Homocystine, quantitative, see 82620)		83480	stimulating hormone (TSH)	BR+
83093	Homogentisic acid; blood, qualitative	BR	83490	long-acting stimulator (LATS)	BR))
((83090)	83094 Homogentisic acid, urine, qualitative	20.0	83485	Hydroxybutyric dehydrogenase, alpha (HBD), blood; kinetic ultraviolet method	22.0
83095	quantitative	40.0	83486	colorimetric method	20.0
((83100	Hormones, adrenocorticotropin (ACTH), blood	BR+	83492	Hydroxycorticosteroids, 17- (17-OHCS); gas liquid chromatography (GLC)	82.0
83110	adosterone, urine, double isotope dilution	240.0	83493	blood, Porter-Silber type	45.0
83115	other methods	200.0	83494	blood, fluorometric	38.0
83120	catecholamines, blood	100.0	83495	urine, Porter-Silber type	52.0
83125	urine, total	64.0	83496	urine, fluorometric	52.0
83130	fractionated into epinephrine and norepinephrine	100.0		(See also 82531-82534, 82634, 84409)	
83140	vanillyl mandelic acid (VMA), urine	60.0	83497	Hydroxyindolacetic acid, 5- (HIAA), urine	60.0
83145	metanephrines, urine	60.0))		(For HIAA, blood, see 84260)	
	(Hormones, see individual alphabetic listings in chemistry section)		83498	Hydroxyprogesterone, 17-d, RIA	105.0
83150	homo-vanillic acid (HVA), urine	80.0	83499	Hydroxyprogesterone, 20-	BR
((83160	chorionic gonadotropin, pregnancy test, blood or urine, immunologic technic, qualitative	34.0	83500	Hydroxy-proline, urine, free only	100.0
83165	quantitative	60.0	83505	total only	100.0
83170	animal test, mouse, rat, frog, qualitative	40.0	83510	free and total	180.0
83171	rabbit	60.0	83523	Imipramine	67.0
83175	bioassay, quantitative	120.0		(Immunoglobulines, see 82784, 82785, 82786, 86329, 86335)	
83185	corticoids (17-OH corticosteroids), blood, fluorometric method, initial	60.0	83524	Indican, urine	35.0
83190	subsequent specimens, each, same study	24.0	83525	Insulin, RIA	40.0
83195	spectrophotometric method, initial	100.0	83526	Insulin tolerance	80.0
83200	subsequent specimens, each, same study	24.0		(For proinsulin, see 84206)	
83210	urine (17-OH corticosteroids)	60.0	((83520	Icterus index, blood	16.0))
83215	estrogens, blood, total, nonpregnant state	BR+	83530	((H ₂ m) Insulin clearance	40.0
83220	fractionated into estrone, estradiol and estriol by chromatography	BR+		(For administration, see 36410, 99070)	
83230	urine, total, nonpregnant state	60.0	83533	Iodine; protein bound (PBI)	45.0
83235	fractionated into estrone, estradiol and estriol	140.0	83534	total	60.0
83240	estriol, pregnancy, blood	70.0		(For thyroxine, see 84441)	
83245	urine	70.0		(For triiodothyronine (true T-3), RIA, see 84480)	
83255	ketogenic steroids, urine	60.0		(For T-3 or T-4 radioactive resin uptake, see RT3U, 84250; for RT3U+thyroxine, see 84251)	
83260	tetra-hydro "S"	120.0	83540	Iron, serum, chemical	20.0
83270	17-ketosteroids, blood, total	100.0	83545	automated	12.0
83275	fractionated	200.0	83546	radioactive uptake method	30.0
83280	urine, total	50.0	83550	binding capacity, serum chemical	20.0
83285	chromatographic separation and quantitation	200.0	83555	automated	12.0
83290	alpha-beta separation	100.0	83565	radioactive uptake method	30.0
83295	dehydro-epi-androsterone fraction	100.0			

	Unit Value		Unit Value
83570 Isocitric dehydrogenase (IDH), blood, kinetic ultra- violet	26.0		
((83575))83571 colorimetric	20.0		
(Isopropyl alcohol, see alcohol 82076)			
83576 Isonicotinic acid hydrazide (INH)	105.0		
83582 Ketogenic steroids, urine; 17-(17-KGS)	45.0		
83583 11-desoxy: 11-oxy ratio	75.0		
83584 Ketoglutarate, alpha	40.0		
(Ketone bodies, see 82005-82010; urine, see 81000-81005)			
83586 Ketosteroids, 17-(17-KS), blood; total	38.0		
83587 fractionation, alpha/beta	75.0		
87589 Ketosteroids, 17-(17-KS), urine; total	36.0		
83590 fractionation, alpha/beta	60.0		
83593 chromatographic fractionation	75.0		
83596 D/A/E ratio	BR		
83597 11-desoxy: 11-oxy ratio	75.0		
(See also 82528, 82632, 82633, 82666, 82694)			
83600 Kynurenic acid	90.0		
((83580) Isopropyl alcohol, blood	60.0		
83585 urine	60.0		
(For ketoglutarate, see 82120)			
83595 Ketone bodies, blood, quantitative	40.0		
83605 Lactate, ((blood)) lactic acid	40.0		
83615 Lactic dehydrogenase (LDH), blood, kinetic ultravi- olet method	26.0		
^o 83620 colorimetric or fluorometric	^o 20.0		
83624 heat or urea inhibition (total not included)	24.0		
83625 isozymes, electrophoretic separation and quan- titation	60.0		
((83630))83626 chemical separation	20.0		
83628 Lactic dehydrogenase, liver (LLDH)	20.0		
((83635))83629 Lactic dehydrogenase (LDH), urine	20.0		
83631 Lactic dehydrogenase (LDH), CSF	20.0		
(For hydroxybutyric dehydrogenase (HBD), see 83485)			
83632 Lactogen, placental (HPL) chorionic somatomam- motropin, RIA	30.0		
83633 Lactose, urine; qualitative	20.0		
83634 quantitative	20.0		
(For tolerance, see 82951-82952)			
(For TLC screen, see 84375)			
83645 Lead, screening, blood	20.0		
83650 urine	20.0		
83655 quantitative, blood	60.0		
83660 urine	60.0		
83661 Lecithin-sphingomyelin ratio (L/S ratio), amniotic fluid	75.0		
83670 Leucine amino-peptidase (LAP), blood, kinetic ul- traviolet method	26.0		
83675 colorimetric	20.0		
83680 urine	26.0		
83681 Leucine tolerance test	26.0		
83685 Lidocaine	20.0		
83690 Lipase, blood	30.0		
83700 Lipids, blood, total	30.0		
83705 ((and)) fractionated (cholesterol, triglycerides, phospholipids)	60.0		
(For feces, see 82705-82715)			
83715 Lipoprotein, blood, electrophoretic separation and quantitation	60.0		
83717 ultracentrifugation, analytic, (atherogenic index) ..	100.0		
83718 precipitation test	80.0		
(((For ultracentrifugation, analytic, see 82190)))			
83725 Lithium, blood, quantitative	60.0		
		(Luteinizing hormone (LH), see 83002)	
		83728 Lysergic acid diethylamide (LSD) RIA	BR
		83730 (Macroglobulins (sia test))	30.0
		83735 Magnesium, blood, chemical	20.0
		83740 fluorometric	20.0
		83750 atomic absorption	40.0
		83755 urine, chemical	40.0
		83760 fluorometric	40.0
		83765 atomic absorption	40.0
		83775 Malate dehydrogenase, kinetic ultraviolet method ..	30.0
		(Maltose tolerance, see 82951, 82952)	
		(Mammotropin, see 84146)	
		83785 Manganese, blood or urine	60.0
		83790 Mannitol clearance	BR
		(Marijuana, see tetrahydrocannabinol THC, 84408)	
		83795 Melanin, urine, quantitative	60.0
		83799 Meperidine, quantitative	54.0
		(For screen, see 82486, 82489, 82662, 82755, 84231)	
		83805 Meprobamate, blood or urine	60.0
		(For screen, see 82486, 82489, 84231)	
		((83815 Mercury, screening, blood	20.0
		83820 urine	20.0
		83825 Mercury quantitative, blood	70.0
		83830 urine	70.0
		(Mercury screen, see 83015)	
		83835 Metanephrines, urine	52.0
		(For catecholamines, see 82382-82384)	
		83840 Methadone	60.0
		(Methamphetamine, see 82145)	
		(Methanol, see 82078)	
		83842 Methapyrilene	50.0
		83845 Methaqualone	90.0
		(For metals, heavy, screening (Reinsch test), see 82177)	
		((83850 Methanol, blood	60.0
		83855 urine	60.0
		83857 Methemalbumin	32.0
		(Methemoglobin, see hemoglobin 83045-83050)	
		83858 Methsuximide, serum	90.0
		(Methyl alcohol, see 82078)	
		83859 Methyprylon	90.0
		83860 Morphine, screening	80.0
		83861 quantitative	120.0
		83862 RIA	82.0
		83864 Mucopolysaccharides, acid, blood	60.0
		83865 Mucopolysaccharides, acid, urine quantitative	60.0
		83866 screen	21.0
		83870 Mucoprotein, blood (seromuroid)	40.0
		83872 Mucin, synovial fluid (rope test)	21.0
		83874 Myoglobin, electrophoresis	30.0
		83875 Myoglobin, urine	40.0
		83880 Nalorphine	60.0
		83885 Nickel, urine	100.0
		83887 Nicotine	75.0
		83895 Nitrogen, urine, total, 24 hour specimen	60.0
		83900 feces, 24 hour specimen	100.0
		83910 Nonprotein nitrogen, blood	20.0
		(Norepinephrine, see 82382-82384)	
		83915 Nucleotidase 5'-	25.0
		83917 Organic acids; screen, qualitative	30.0
		83918 quantitative	30.0

	Unit Value		Unit Value
83920 Ornithine carbonyl transferase, ((colorimetric) (OCT)	24.0	(Phosphates, inorganic, see 84100-84105)	
83930 Osmolality, blood	20.0	(Phosphates, organic, see 82480-82484)	
83935 urine	20.0		
83938 Ouabain	BR	84083 Phosphoglucomutase, isoenzymes	60.0
83945 Oxalate, urine	40.0	84085 Phosphogluconate, 6-, dehydrogenase, RBC	18.0
(For alpha oxoglutarate, see 82120)		84087 Phosphohexose isomerase	30.0
		84090 Phospholipids, blood	30.0
83946 Oxazepam	40.0	(See also 83705)	
83947 Oxybutyric acid, beta	40.0	(For lecithin/sphingomyelin ratio, see 83661)	
83948 Oxycodine	52.0		
(Oxygen, see gases, blood, 82790-82817)		°84100 Phosphorus, blood	°24.0
83949 Oxytocinase, RIA	52.0	°84105 urine	°24.0
(Para-aminohippuric acid, see 82134)		(Pituitary gonadotropins, see 83000-83002)	
((For oxygen, see 82850-82900)		(PKU, see 81005, 84030, 84031)	
83955 Para- amino hippuric acid (PAH), urine	20.0)	84106 Porphobilinogen, urine; qualitative	20.0
83965 Paraldehyde, blood, quantitative	60.0	84110 Porphobilinogen, urine, quantitative	20.0
83970 Parathormone (parathyroid hormone), RIA	165.0	84118 Porphyrins, copro-, urine; quantitative	30.0
(PBI, see 83533)		84119 qualitative	24.0
83971 Penicillin, urine	50.0	84120 Porphyrins, urine, fractionated (uroporphyrin and coproporphyrin)	64.0
83972 Pentazocine	60.0	84121 uro-, copro-, and porphobilinogen, urine	80.0
83973 Pentose, urine, qualitative	13.5	(For porphyrin precursors, see 82630)	
(For TLC screen, see 84375)		((84130)84126 feces, quantitative	100.0
83974 Pepsin, gastric	23.0	84128 Porphyrins, plasma	82.0
83975 Pepsinogen, blood	40.0	(For protoporphyrin, RBC, see 84202, 84203)	
83985 Pesticide, other than chlorinated hydrocarbons, blood, urine or other material (((see also 82480; 82482, 82484)))	BR+	((84140)84132 Potassium, blood	°24.0
(Pesticide, chlorinated hydrocarbons, see 82441)		((84145)84133 urine	°24.0
83986 pH, body fluid, except blood	BR	84136 Pregnanediol	54.0
(For blood, see 82800, 82802, 82803, 82817)		84139 Pregnatriol	54.0
83992 Phencyclidine (PCP)	38.0	84141 Primidone	60.0
83995 Phenol, blood or urine	60.0	84142 Procainamide	60.0
84005 Phenolsulphonphthalein (PSP), urine ((2 specimens))	20.0	84144 Progesterone, any method	105.0
((84010 specimens	40.0))	(For proinsulin, RIA, see 84206)	
(For injection procedure, see 36410 for provision of materials, see 99070)		84146 Prolactin (mammotropin), RIA	225.0
((84020)84021 Phenothiazine, urine	100.0	84147 Propoxyphene	60.0
(See also 82486 et seq.)		(For screen, see 82486 et seq.)	
84022 quantitative, chemical	BR	84149 Propranolol	BR
(For also individual drugs)		84150 Prostaglandin, any one, RIA	BR
84030 Phenylalanine, blood, Guthrie ((fluorometric))	12.0	°84155 Protein, total, serum, chemical	°20.0
(Phenylalanine-tyrosine ratio, see 84030, 84510)		84160 refractometric	12.0
84031 fluorometric	12.0	84165 electrophoretic fractionation and quantitation	60.0
84033 Phenylbutazone	20.0	°84170 total and albumin/globulin ratio	°40.0
84035 Phenylketones; blood, qualitative	20.0	(For serum albumin, see 82040, for serum globulin, 82942)	
84037 urine, qualitative	20.0	84175 other sources, quantitative	24.0
84038 Phenylpropanolamine	20.0	84176 Protein, special studies (e.g., monoclonal protein analysis)	BR
84039 Phenylpyruvic acid; blood	20.0	84180 urine, quantitative, 24 hour specimen	24.0
((84040 Phenylketone, urine	10.0))	84185 Bence-Jones	12.0
((84050)84040 Phenylpyruvic acid, urine	20.0	84190 electrophoretic fractionation and quantitation	80.0
(For qualitative chemical tests, urine, see 81005)		84195 spinal fluid semi-quantitative (Pandy)	20.0
84045 Phenytoin	80.0	84200 electrophoretic fractionation and quantitation	80.0
°84060 Phosphatase, acid, blood	°24.0	(For protein bound iodine (PBI), see 83533)	
84065 ((tartrate)) (prostatic) fraction	40.0	84202 Protoporphyrin, RBC; quantitative	30.0
°84075 alkaline, blood	°24.0	84203 screen	20.0
84078 heat stable (total not included)	BR+	84205 Protiptylene	68.0
84080 ((fractionated)) isoenzymes, electrophoretic method	BR+	84206 Proinsulin, RIA	60.0
84082 Phosphates, tubular reabsorption of (TRP)	60.0	84207 Pyridoxine (Vitamin B-6)	BR
		84208 Pyrophosphate vs. urate, crystals (polarization)	12.0
		84210 Pyruvate, blood	30.0
		84220 Pyruvic-kinase, ((blood)) RBC	30.0
		84228 Quinine	30.0
		84230 Quinidine, blood	40.0
		84231 Radioimmunoassay (RIA) not elsewhere specified	BR

	Unit Value		Unit Value
<u>(Reinsch test, see 83015)</u>		84420	Theophylline, blood or saliva 60.0
84232	Releasing factor BR	84425	Thiamine (Vitamin B-1) BR
84244	Renin (RIA) 60.0	84430	Thiocyanate, blood 30.0
<u>(See also 82163, angiotensin II)</u>		((84440) Thymol turbidity, blood 20.0)	
84250	Resin uptake T-3, or T-4 (RT3U); 42.0	84434	Thioridazine 40.0
84251	with total thyroxine, any method BR	84441	Thyroxine (T-4), specify method (e.g., CPB, RIA) 40.0
84252	Riboflavin (Vitamin B-2) BR	84442	Thyroxine binding globulin (TBG) 52.0
<u>(Salicylates, see 82011, 82012)</u>		<u>(Thyroxine, free thyroxine index, T-7, see 82756)</u>	
<u>(Secretin test, see 99070, 89100 and appropriate analyses)</u>		<u>(Thyroid hormones, PBI, thyroxine, etc., see 84480, 84441, 84250)</u>	
((84240) Salicylates, blood 30.0)		84443	Thyroid stimulating hormone (TSH), RIA 60.0
84245 urine 60.0)		84444	Thyrotropin releasing factor, RIA; BR
84255	Selenium, blood, urine or tissue 100.0	84445	plus long acting (LATS) BR
84260	Serotonin, blood 120.0	84446	Tocopherol alpha (Vitamin E) 38
<u>(For urine metabolites, see 83497)</u>		<u>(Tolbutamide tolerance, see 82951-82952)</u>	
((84265) urine (5 hydroxy indole acetic acid), 24 hour specimen 60.0)		84447	Toxicology, screen; general BR
84275	Sialic acid, blood 50.0	84448	sedative (acid and neutral drugs, volatiles) 45.0
<u>(Sickle hemoglobin, see 83020, 83052, 83053, 85660)</u>		84450	Transaminase, blood, glutamic oxaloacetic (SGOT), timed kinetic ultraviolet method 24.0
84285	Silica, blood, urine or tissue 100.0	*84455	colorimetric or fluorometric *20.0
*84295	Sodium, blood *24.0	84460	glutamic pyruvic (SGPT), blood timed kinetic ultraviolet 24.0
*84300	urine *24.0	*84465	colorimetric or fluorometric *20.0
<u>(Somatomammotropin, see 83632)</u>		<u>(Transferrin, see 86329)</u>	
<u>(Somatotropin, see 83003; chorionic, see 83632)</u>		84472	Trichloroethanol 60.0
84310	Sorbitol dehydrogenase, serum 26.0	84474	Trichloroacetic acid 36.0
84315	specific gravity (except urine) 8.0	<u>(Trichloroacetaldehyde, see 82400-82405)</u>	
((84320) 84317 Starch, feces, screening ((see also 89120)))		84476	Trifluoperazine 36.0
84318	Stercobilin, qualitative, feces BR	((84475) 84478 Triglycerides, blood 30.0)	
<u>(For stone analysis see 82355-82370)</u>		((84477) automated 20.0)	
84324	Strychnine 75.0	<u>(See also 83705)</u>	
<u>(Sugar, see under glucose)</u>		84480	Triiodothyronine (true T-3), RIA 36.0
((84330) Sugar (glucose), blood *20.0)		84483	Trimethadione 36.0
84335 stick test 8.0)		84485	Trypsin, duodenal fluid 30.0
84340 tolerance, up to 5 specimens, 3 hours 60.0)		((84490) 84488 Trypsin, feces, quantitative, 24 hour specimen 30.0)	
84345 up to 9 specimens, 7 hours 80.0)		84490	quantitative 30.0
84350 tolbutamide tolerance (includes injection) 60.0)		<u>(Tubular reabsorption of phosphate, blood and urine, see 84082)</u>	
84355 insulin tolerance (includes injection) 60.0)		((84500) Tubular reabsorption of phosphate, blood and urine (see also 84100, 84105) 60.0)	
84360 intravenous tolerance (includes injection) 100.0)		84510	((Tyrosin)) Tyrosine, blood 40.0
84365 urine, quantitative, 24 hour specimen 20.0)		<u>(Ultracentrifugation, lipoprotein, see 82190)</u>	
84370 fermentation 20.0)		<u>(Urate vs. pyrophosphate crystals, see 84208)</u>	
84375 sugars chromatographic separation 80.0)		*84520	Urea nitrogen, blood (BUN); quantitative *22.0
((84380) spinal or joint fluid 20.0)		84525	stick test 8.0
<u>(Sulfhemoglobin, see hemoglobin, 83055-83060)</u>		*84540	urine *20.0
((84390) 84382 Sulfobromophthalein (BSP)((-blood)) 32.0		*84545	clearance *40.0
<u>(For injection ((procedure)), see 36410, 99070)</u>		*84550	Uric acid, blood, chemical *20.0
((84400) 84395 Sulfonamide, blood chemical 20.0		84555	uricase, ultraviolet method 26.0
84397	crystals, qualitative 20.0	84560	urine((-chemical)) 20.0
<u>(T-3, see 84480, 84250)</u>		84565	Urobilin, urine, qualitative 12.0
<u>(T-4, see 84441)</u>		84570	quantitative, timed specimen 24.0
84401	Testosterone, blood; double isotope BR	84575	feces, quantitative((-24 hour specimen)) 60.0
84403	RIA 105.0	84577	Urobilinogen, feces, quantitative 30.0
84404	Testosterone, urine; double isotope BR	84578	Urobilinogen, urine, qualitative 24.0
84405	RIA 120.0	84580	((Urobilinogen, urine,)) quantitative, timed specimen 24.0
84406	Testosterone, binding protein BR	84583	semiquantitative 20.0
84407	Tetracaine BR	84584	Uropepsin, urine 24.0
84408	Tetrahydrocannabinol THC (marijuana) BR	<u>(Uroporphyrins, see 84120, 84121)</u>	
84409	Tetrahydrocortisone or tetrahydrocortisol 105.0	84585	Vanillylmandelic acid (VMA), urine 24.0
<u>(See also 83492-83497)</u>		84588	Vasopressin (antidiuretic hormone), RIA BR
84410	Thallium, blood or urine 100.0	84589	Viscosity, fluid 10.0

	Unit Value
84590 Vitamin A, blood	40.0
84595 including carotene (see also 82380)	60.0
<u>(Vitamin B-1, see 84425)</u>	
<u>(Vitamin B-2, see 84252)</u>	
<u>(Vitamin B-6, see 84207)</u>	
<u>(Vitamin B-12, blood, see 82606, 82607)</u>	
<u>(Vitamin B-12, absorption (Schilling), see 78270, 78271)</u>	
<u>(Vitamin C, see 82180)</u>	
<u>(Vitamin E, see 84446)</u>	
84597 Vitamin K	<u>BR</u>
<u>(VMA, see 84585)</u>	
84600 Volatiles (acetic anhydride, carbon tetrachloride, dichloroethane, dichloromethane, diethylether)	45.0
<u>(For acetaldehyde, see 82000)</u>	
<u>((For vitamin B-12, isotopic method, see 78100))</u>	
84605 Volume, blood, dye method (Evans blue)	30.0
84610 including total plasma and total blood cell volume	50.0
<u>(Volume, blood, RISA or Cr-51, see 78110, 78111)</u>	
84613 Warfarin	<u>BR</u>
84615 Xanthurenic acid	<u>BR</u>
<u>((For isotopic method, see 78110, 78111))</u>	
84620 Xylose tolerance test, blood	40.0
84630 Zinc, quantitative, blood	100.0
84635 urine	100.0
84645 Zinc sulphate turbidity((-blood))	20.0
84999 Unlisted chemistry or toxicology procedure	<u>BR</u>

NOTE:

Gas-liquid chromatography, paper chromatography, electrophoresis, nuclear medicine, enzyme immunoassay and radioimmunoassay techniques are being extended constantly for the analysis of many drugs, hormones and other substances. Where these methodologies are not specifically listed under the compound in question, such tests should be coded under the listing for the specific general methodology. (For immunodiffusion, immunoprecipitin, and counter-immunoelectrophoretic methods other than enzyme and radioimmunoassay techniques, see Immunology section)

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-23-216 HEMATOLOGY.

	Unit Value
<u>(Includes blood clotting (coagulation) procedures. For blood banking procedures, see under Immunology.)</u>	
<u>(Agglutinins, see Immunology)</u>	
<u>(Antifactor (specific coagulation factors), see 85300-85341)</u>	
<u>(Antiplasmin, see 85410)</u>	
<u>(Antiprothrombinase, see 85311)</u>	
<u>(Antithrombin III, see 85300)</u>	
<u>(Basophil count, see 85005)</u>	
85000 Bleeding time Duke	10.0
((85010 Blood count, complete (includes rbc, wbc, hgb, differential)	24.0
85015 automated, cell counts, hematocrit, hemoglobin and indices	12.0
85020 red blood cell count (rbc)	8.0
85030 white blood cell count (wbc)	8.0

	Unit Value
85040 differential (wbc) count	8.0
85050 hemoglobin, colorimetric	8.0
<u>(For other hemoglobin determinations, see 83020-83060)</u>	
85055 Hematocrit	8.0
85060 Hemogram: mcv, mch, mchc, calculations based on rbc, hgb, and pcv	8.0))
85002 Ivy	24.0
85003 Adelson-Crosby immersion method	20.0
<u>(Blood cell morphology only, see 85548)</u>	
85005 Blood count; basophil count, direct	10.0
85007 differential WBC count (includes RBC morphology and platelet estimation)	7.5
<u>(See also 85548, 85585)</u>	
<u>(For other fluids, e.g., CSF, see 89051, 89190)</u>	
85009 differential WBC count, buffy coat	12.0
85012 eosinophil count, direct	10.0
<u>(For nasal smear, see 89180)</u>	
85014 hematocrit	8.0
85018 hemoglobin, colorimetric	8.0
<u>(For other hemoglobin determination, see 83020-83068)</u>	
85021 hemogram, automated RBC, WBC, Hgb, Hct and indices only)	10.5
85022 hemogram, automated (CBC) with differential WBC count	15.0
85031 hemogram, manual, complete CBC (RBC, WBC, Hgb, Hct, differential and indices)	16.5
85041 red blood cell (RBC)	8.0
<u>(See also 85021-85031, 89050)</u>	
85044 reticulocyte count	12.0
85048 white blood cell (WBC)	8.0
<u>(See also 85021-85034)</u>	
85095 Bone marrow; aspiration only	45.0
85100 Bone marrow, aspiration, staining, and interpretation of smears	140.0
<u>(For special stains, see 85535, 85540, 85560, 88312-88313)</u>	
85101 aspiration and staining only (smears)	75.0
85102 biopsy core (needle)	75.0
<u>(For trocar, see 20220)</u>	
85103 cell block or biopsy, stain and interpretation	60.0
85105 interpretation only	100.0
((85110 aspiration only, needle or trocar	40.0))
85109 staining and preparation only	30.0
85120 Bone marrow transplant	50.0
85150 Calcium clotting time	40.0
85160 Calcium saturation clotting test	40.0
85165 Capillary fragility test (Rumpel-Leede) (independent procedure)	20.0
85170 Clot retraction	8.0
((85200 Clotting factors, plasma, specific, factor I (fibrinogen)	40.0))
85171 quantitative	45.0
85172 inhibition by drugs	BR
85175 Clot lysis time, whole blood dilution	40.0
<u>(Clotting factor I (fibrinogen), see 82730, 85371-85377)</u>	
85210 factor II (prothrombin assay)	40.0
<u>(See also 85610-85618)</u>	
85220 factor V (AcG or pro-accelerin) labile factor	40.0
85230 factor VII (proconvertin stable factor)	40.0
85240 factor VIII (AHG) one stage	40.0
85242 factor VIII (AHG), two stage	40.0

	Unit Value		Unit Value
85250 factor IX (PTC or Christmas)	40.0		
85260 factor X (Stuart-Prower)	40.0		
85270 factor XI (PTA)	40.0		
85280 factor XII (Hagemann)	40.0		
85290 factor XIII (fibrin stabilizing)	40.0		
85291 factor XIII (fibrin stabilizing), screen solubility ..	40.0		
85300 Clotting inhibitors or anti-coagulants, anti-thrombin	40.0		
85310 anti-thromboplastins	40.0		
85311 anti-prothrombinase	40.0		
85320 anti-prothromboplastins	40.0		
85330 anti-factor VIII	40.0		
85340 cross recalcification time (mixtures)	40.0		
85341 PTT inhibition test	BR		
85345 Coagulation time (Lee and White)	30.0		
85347 Coagulation time, activated	20.0		
(85350 Eosinophil count	12.0)		
85348 other methods	BR		
<u>(Complete blood count, see 85021-85031)</u>			
<u>(Differential count, see 85007 et seq.)</u>			
<u>(Drug inhibition, clot retraction, see 85172)</u>			
<u>(Duke bleeding time, see 85000)</u>			
<u>(Eosinophil count, direct, see 85012)</u>			
<u>(Eosinophils, microscopic examination for, in various body fluids, see 89180)</u>			
<u>(Ethanol gel, see 85363)</u>			
85360 Euglobulin lysis	40.0		
<u>(Fetal hemoglobin, see 83030-83033, 85460)</u>			
85362 Fibrin degradation (split) products (FDP)(FSP); agglutination, slide	12.0		
85363 ethanol gel	10.0		
85364 hemagglutination inhibition (Merskey), microtiter	36.0		
85365 immunoelectrophoresis	BR		
85367 precipitation	18.0		
85368 protamine paracoagulation (PPP)	BR		
85369 staphylococcal clumping	12.0		
<u>(Fibrinogen, quantitative, see 82730)</u>			
85371 Fibrinogen, semiquantitative; latex	40.0		
85372 turbidimetric	22.5		
85376 Fibrinogen; thrombin with plasma dilution	24.0		
85377 thrombin time dilution	36.0		
(85370 Fibrinogen, qualitative (F-Y test)	12.0		
85375 quantitative	40.0)		
85390 Fibrinolysins, screening	20.0		
85392 with EACA control	BR		
85395 semi-quantitative	30.0		
85396 lysis of homologous clot	105.0		
85398 Fibrinolysis, quantitative	45.0		
85400 Fibrinolytic mechanisms, plasmin	BR+		
85410 anti-plasmin	BR+		
85420 plasminogen	BR+		
(85430 plasminogen activator	BR+)		
<u>(For plasminogen activator, see 85665)</u>			
<u>(Fragility, red blood cell, see 85547, 85555-85557)</u>			
85441 Heinz bodies; direct	9.0		
85445 induced, acetyl phenylhydrazine	19.5		
<u>(For hematocrit (pcv), see ((85055) 85014, 85021-85031)</u>			
<u>(For hemoglobin, see 83020-83060, 85050)</u>			
85460 Hemoglobin, fetal, differential lysis (Kleihauer)	26.0		
<u>(See also 83030, 83033)</u>			
<u>(Hemogram, see 85021-85031)</u>			
		<u>(Hemolysins, see 86006, 86281, 86282)</u>	
85520 Heparin assay			60.0
85530 Heparin-protamine tolerance test			60.0
85535 Iron stain (RBC or bone marrow smears)			18.0
<u>(Ivy bleeding time, see 85002)</u>			
85538 Leder stain (esterase) blood or bone marrow			30.0
85540 Leucocyte alkaline phosphatase			20.0
85544 Lupus erythematosus (LE) cell prep			20.0
<u>(Lysozyme, see 85549)</u>			
85547 Mechanical fragility, RBC			30.0
85548 Morphology of red blood cells, only			9.0
85549 Muramidase, serum			52.0
85550 Nitroblue tetrazolium test (NBT)			36.0
85555 Osmotic fragility, RBC;			15.0
85556 incubated, qualitative			18.0
85557 incubated, quantitative			60.0
<u>(Packed cell volume, see 85014)</u>			
<u>(Partial thromboplastin time, see 85730-85732)</u>			
<u>(Parasites, blood, e.g., malaria smears, see 87207)</u>			
85560 Peroxidase stain, WBC			15.0
<u>(Plasmin, see 85400)</u>			
<u>(Plasminogen, see 85420)</u>			
<u>(Plasminogen activator, see 85665)</u>			
85575 Platelet; adhesiveness (in vivo)			45.0
85577 aggregation (glass bead)			30.0
85580 Platelet, count (Rees-Ecker)			14.0
85585 estimation on smear, only			10.0
<u>(See also 85007)</u>			
85590 phase microscopy			20.0
85595 electronic ((technic) technique			20.0
((85600 adhesiveness			60.0)
85610 Prothrombin time			16.0
<u>(See also 85618)</u>			
85612 Russell viper venom type (includes venom)			36.0
85614 two stage			30.0
85615 Prothrombin utilization (consumption)			40.0
((85620 Red blood cell, osmotic fragility, screening			20.0
85621 incubation			60.0)
85618 Prothrombin-Proconvertin, P & P (Owren)			18.0
<u>(Red blood cell count, see 85021-85031)</u>			
85630 Red blood cell size (Price-Jones)			40.0
85632 Red blood cell peroxide hemolysis			30.0
85635 Reptilase test			33.0
<u>(Reticulocyte count, see 85044)</u>			
<u>(Rumpel-Leede test, see 85165)</u>			
85640 Reticulocyte count			14.0
85650 Sedimentation rate (esr) Wintrobe type			14.0
85651 Westergren type			10.5
85660 Sickling of red blood cells reduction slide method ..			14.0
<u>(Sickling, electrophoresis, see 83020)</u>			
<u>(Sickling, solubility, S-D, see 83053)</u>			
<u>(Sickling, turbidimetric (Sickledex dithionate), see 83052)</u>			
<u>(Siderocytes, see 85535)</u>			
<u>(Smears for parasites, malaria, etc., see 87207)</u>			
<u>(Staphylococcal clumping test, see 85369)</u>			
85665 Streptokinase titer (plasminogen activator)			BR
85670 Thrombin time, plasma			20.0

	Unit Value
85675 titer.....	12.0
85680 Thrombo test	20.0
85700 Thromboplastin generation test, screening (Hicks-Pitney)	40.0
85710 definitive, with platelet substitute.....	45.0
85711 with patient's platelets	45.0
85720 all factors.....	BR+

(For individual clotting factors, see 85210 et seq.)

85730 Thromboplastin time, partial (PTT) plasma or whole blood.....	30.0
85732 substitution plasma	30.0
((85734 serum	30.0))

(For thromboplastin inhibition test, see 85341)

(For tourniquet test, see 85165)

85810 Viscosity, blood	40.0
85820 serum or plasma	40.0

(WBC count, see 85021-85031, 85048, 89050)

85999 Unlisted hematology procedure	BR
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AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-23-221 IMMUNOLOGY.

	Unit Value
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(Includes serology, immuno-hematology and blood banking)

(Acid hemolysins, see 86281)

(Actinomycosis, see 86000-86009, 86450)

86000 ((Agglutination, routine,)) Agglutinins febrile, each (antigen)	14.0
((86010 maximum series (includes typhoid O & H, paratyphoid A & B, brucella and proteus OX-19)	60.0
86020 Antibody screening test	10.0
86025 titre: Rh, A, B, leucocyte, platelet or others, albumin or saline technic, each	20.0
86030 Anti-deoxyribonuclease titre (DNA)	40.0
86040 Anti-hyaluronidase titre	60.0
86050 Anti-nuclear antibodies	40.0))
86002 panel (typhoid O & H, paratyphoid A & B, brucella and Proteus OX-19	45.0
86004 warm	36.0

(Agglutinins and autohemolysins, see 86004, 86011-86013, 86281-86283, 86006-86009)

(Agglutinins, auto, see 86282-86283, 86011, 86013)

(Agglutinins, cold, see 86006, 86013, 86282, 86283)

(Alpha-1 antitrypsin, see 86329)

(Alpha-1 feto-protein, see 86329)

(Amebiasis, see 86171, 86280)

86006 Antibody, qualitative, not otherwise specified; first antigen, slide or tube	12.0
86007 each additional antigen	7.5
86008 Antibody, quantitative titer, not otherwise specified; first antigen	18.0
86009 each additional antigen	12.0
86011 Antibody, detection, leucocyte antibody	44.0
86012 Antibody absorption, cold auto absorption; per serum	30.0

(For elution, see 86019)

86013 differential	45.0
86014 Antibody, platelet antibodies (agglutinins)	45.0

	Unit Value
86016 Antibodies, RBC, saline; high protein and antihuman globulin technique	30.0

(See also 86032)

86017 with ABO + Rh(D) typing (for holding blood instead of complete crossmatch)	24.0
86018 enzyme technique including antihuman globulin ..	17.0
86019 elution, any method	45.0
86021 Antibody identification; leucocyte antibodies	60.0
86022 platelet antibodies	75.0
86024 RBC antibodies (8-10 cell panel) standard techniques	38.0
86026 RBC antibodies (8-10 cell panel), with enzyme technique including antihuman globulin	52.0

(For absorption and elution, see 86012-86013, 86019)

86028 saline or high protein, each (Rh, AB, etc.)	12.0
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(Anti-DNA, see 86225)

(Anti-deoxyribonuclease titer, see 86215)

86031 Antihuman globulin test; direct (Coombs) 1-3 dilutions	12.0
86032 indirect, qualitative (broad, gamma or nongamma, each)	15.0
86033 indirect, titer (broad, gamma or nongamma each)	12.0
86034 enzyme technique, qualitative	30.0
86035 drug sensitization, identification (e.g., penicillin) ..	75.0

(For antibody detection (screening), see 86016, 86017)

(Antihyaluronidase titer, see 86315)

(Antinuclear antibodies, see 86255, 86256)

86045 Antistreptococcal carbohydrate, anti-A CHO	40.0
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(Antistreptococcal antibody, anti-DNAse, see 86215)

(Antistreptokinase titer, see 86590)

86060 Anti-streptolysin O titre	20.0
((86065 Anti-streptokinase titre	80.0))
86063 screen	10.0
86067 Antitrypsin, alpha-1, determination	20.0

(Autoagglutinins, see 86282, 86283)

(Autoantibodies, see specific antigens)

(Blastomycosis, see 86006-86009, 86460)

((86070)) 86068 Blood, cross match, ((per unit)) complete standard technique, includes typing and antibody screening of recipient and donor; first unit	60.0
86069 each additional unit	45.0
86072 Blood crossmatch; enzyme technique	10.5
86073 screening for compatible unit saline and/or high protein	26.0
86074 antiglobulin technique	15.0

(For enzyme technique, see 86018)

86075 Blood crossmatch, minor only (plasma, Rh immune globulin), includes recipient and donor typing and antibody screening; first unit	44.0
86076 each additional unit	27.0

(For incompatibility problems, see 86004, 86011-86014, 86016-86026, 86031-86035, 86068-86076)

(For typing, antibody screening and blood in lieu of crossmatch, see 86017)

(For blood transfusion, see 36430-36460, 36510, 36660)

86080 ((grouping A & B)) Blood typing; ABO only	12.0
86082 ABO and Rho(D)	18.0
86090 M ((&)) N	20.0

	Unit Value		Unit Value
86095	10.5		
<u>Blood typing, RBC antigens other than ABO or Rho(D); antiglobulin technique, each antigen</u>			
86096	10.5		
<u>direct, slide or tube, including Rh subtypes, each antigen</u>			
86100	12.0		
<u>((Rh typing)) Blood typing; Rho(D) only</u>			
86110	16.0		
<u>subtypes, each</u>			
86105	45.0		
<u>Rh genotyping, complete</u>			
<u>(For Rho variant Du, see 86095)</u>			
86115	68.0		
<u>anti-Rh immuno-globulin testing (Rhogam type)</u>			
86120	BR+		
<u>special (Kell, Duffy, etc.)</u>			
86130	68.0		
<u>anti-Rh immuno-globulin testing (Rhogam type)</u>			
86128	45.0		
<u>Blood autotransfusion, including collection, processing and storage</u>			
<u>(For nondonor phlebotomy, see 96450)</u>			
86129	30.0		
<u>Blood component processing not otherwise specified</u>			
86131	BR		
<u>Blood unit for direct transfusion, up to 50 ml</u>			
86134	BR		
<u>Blood unit for transfusion; processing by blood bank, includes collection</u>			
86138	BR		
<u>replacement</u>			
86139	BR		
<u>splitting, open or closed, system, each</u>			
<u>(Bovine milk antibody, see 86008, 86009)</u>			
<u>(Brucellosis, see 86000-86002, 86470)</u>			
86140	20.0		
<u>C-reactive protein</u>			
86150	40.0		
<u>Cold agglutinins, quantitative</u>			
86160	60.0		
<u>Complement, quantitative, by gel diffusion, each fraction</u>			
86170	40.0		
<u>Complement fixation, precipitin, or agar gel test, coccidioidomycosis</u>			
86180	40.0		
<u>histoplasmosis</u>			
86190	40.0		
<u>leptospirosis</u>			
86200	40.0		
<u>rubella</u>			
86210	40.0		
<u>streptococcus MG</u>			
86220	40.0		
<u>tularemia</u>			
86230	40.0		
<u>psittacosis or cat scratch fever</u>			
86250	20.0		
<u>Coombs test, direct</u>			
86260	30.0		
<u>indirect, qualitative</u>			
86270	50.0		
<u>quantitative</u>			
<u>(Candidiasis, see 86008)</u>			
86149	60.0		
<u>Carcinoembryonic antigen; gel diffusion</u>			
86151	60.0		
<u>RIA</u>			
<u>(Cat scratch disease, see 86171, 86480)</u>			
86155	BR		
<u>Chemotaxis assay, specify method</u>			
<u>(Coccidioidomycosis, see 86006-86009, 86171, 86490)</u>			
<u>(Cold agglutinin or hemolysin, see 86006-86013, 86282, 86283)</u>			
86158	52.0		
<u>Complement; C'1 esterase</u>			
86159	52.0		
<u>C'2 esterase</u>			
86162	70.0		
<u>total (CH 50)</u>			
<u>(For complement fractions, quantitative, see 86329)</u>			
86171	40.0		
<u>Complement fixation tests, each (e.g., cat scratch fever, coccidioidomycosis, histoplasmosis, leptospirosis, psittacosis, rubella, streptococcus MG, syphilis) - specify test</u>			
<u>(Coombs test, see 86031-86035)</u>			
86185	24.0		
<u>Counter-electrophoresis, each antigen</u>			
<u>(For HAA, see 86285, 86286)</u>			
<u>(Crossmatch, see 86068-86076)</u>			
86201	30.0		
<u>Cryoprecipitate, preparation; each unit</u>			
86202	1.5		
<u>with thawing and pooling, each unit</u>			
<u>(Cryptococcosis, see 86008, 86009, 86255, 86256)</u>			
		<u>(Cysticercosis, see 86280)</u>	
86215	36.0		
<u>Deoxyribonuclease, antibody</u>			
86225	36.0		
<u>Deoxyribonucleic acid (DNA) antibody</u>			
<u>(Diphtheria, see 86280)</u>			
<u>(Direct antiglobulin test (Coombs), see 86031)</u>			
<u>(Donath-Landsteiner screen, see 86008, 86009)</u>			
<u>(Drug sensitization, RBC, see 86035)</u>			
<u>(Echinococcosis, see 86171, 86280, 86500)</u>			
<u>(Eosinophils, microscopic examination for, in various body fluids, see 89180)</u>			
86235	30.0		
<u>Extractable nuclear antigen (ENA), antibody</u>			
86240	BR		
<u>Factor VIII; concentrate, lyophilized unit, 100 units</u>			
86241	3.0		
<u>dilution, each bottle</u>			
<u>(For cryoprecipitate, see 86201, 86202)</u>			
86243	BR		
<u>Fc receptor assay, specify method</u>			
<u>(Feto-protein, alpha-1, see 86329)</u>			
86245	82.0		
<u>Fibrinogen, unit</u>			
<u>(Filariasis, see 86280)</u>			
86255	24.0		
<u>Fluorescent antibody; screen</u>			
86256	36.0		
<u>titer</u>			
<u>(Fluorescent technique for antigen identification in tissue, see 88345)</u>			
<u>(Frei test, see 86530)</u>			
86265	BR		
<u>Frozen blood, preparation for freezing, each unit including processing and collection;</u>			
86266	BR		
<u>with thawing</u>			
86267	BR		
<u>with freezing and thawing</u>			
<u>(FTA, see 86650)</u>			
<u>(Gc grouping, see 86335)</u>			
<u>(Gel (agar) diffusion tests, see 86331)</u>			
<u>(Gm grouping, see 86335)</u>			
<u>(Gonadotropins, chorionic, see 82996-82998)</u>			
86272	BR		
<u>Globulin, gamma 1 ml</u>			
86273	60.0		
<u>Globulin Rh immune, 1 ml</u>			
86274	BR		
<u>Globulin vaccinia, immune, 1 ml</u>			
<u>(HAA, see 86285-86287)</u>			
<u>(Ham test, see 86281)</u>			
86280	60.0		
<u>Hemagglutination inhibition tests (HAI), each (e.g., amebiasis, rubella, viral)</u>			
86290	28.0		
<u>Hemolysins, ox cell</u>			
86281	24.0		
<u>Hemolysins, acid (for paroxysmal hemoglobinuria) (Ham test)</u>			
86282	30.0		
<u>Hemolysins and agglutinins, auto, screen, each;</u>			
86283	75.0		
<u>incubated with glucose (e.g., ATP)</u>			
<u>(Cold, see 86006-86009, warm 86004, acid 86281)</u>			
86285	18.0		
<u>Hepatitis associated agent (Australian antigen)(HAA); counter-electrophoresis method</u>			
86286	24.0		
<u>counter-electrophoresis with concentration of serum</u>			
86287	36.0		
<u>RIA method</u>			
<u>(For gel diffusion technique, see 86331; CF, see 86171; HAI, see 86280)</u>			
86300	20.0		
<u>Heterophile antibodies, screening (includes mono-type test) slide or tube</u>			
86305	30.0		
<u>quantitative titer</u>			
86310	30.0		
<u>plus titers after absorption, beef cells and guinea pig kidney</u>			

	Unit Value		Unit Value
<u>(Histoplasmosis, see 86006-86009, 86171)</u>			
<u>(HLA typing, see 86597)</u>			
<u>(For hormones, see ((83100-83490)) individual alphabetic listing in chemistry section)</u>			
86315	30.0	86385	37.5
86320	100.0	86386	15.0
86325	100.0	<u>(Penicillin antibody RBC, see 86035)</u>	
((86330	60.0	86388	BR
86340	80.0))	86389	75.0
86329	30.0	86391	BR
86331	30.0	<u>(Platelet antibodies (agglutinins), see 86014)</u>	
<u>(For ceruloplasmin by chemical method, see 83290)</u>			
<u>(IgE, RIA, see 82785; RIST, see 86358)</u>			
86335	BR	86392	45.0
<u>(Insulin antibody, see 86016)</u>			
<u>(Intrinsic factor, antibody (fluorescent), see 86255, 86256)</u>			
<u>(Inv grouping, see 86335)</u>			
<u>(Kveim test, see 86565)</u>			
<u>(Latex fixation, see individual antigen or antibody; also 86006, 86007)</u>			
<u>(LE cell preparation, see 85544)</u>			
<u>(LE factor, see 86006, 86007, 86255, 86256)</u>			
<u>(Leishmaniasis, see 86280)</u>			
<u>(Leptospirosis, see 86006-86009, 86171)</u>			
<u>(Leukoagglutinins, see 86013, 86021)</u>			
86343	BR	86393	1.5
86344	BR	86398	36.0
86345	82.5	86402	BR
86346	67.5	86405	BR
86347	9.0	<u>(Pregnancy test, see 82996, 82997, 86006-86009)</u>	
<u>(Lymphocyte culture, see 86353)</u>			
86351	BR	86415	7.5
86353	120.0	86416	120.0
86357	165.0	<u>(Psittacosis, CF, see 86171)</u>	
86358	BR	86421	BR
<u>(Malaria, see 86171, 86280, 87207)</u>			
86365	BR	86422	BR
<u>(Melioidosis, see 86280)</u>			
86377	30.0	86423	BR
86378	BR	<u>(Rapid plasma reagin test (RPR), see 86592)</u>	
<u>(Milk antibody, anti-bovine, see 86008-86009)</u>			
<u>(Mitochondrial antibody, liver, see 86255)</u>			
<u>(Mononucleosis screening slide, see 86006-86007)</u>			
86382	BR	86424	BR
86384	BR	86425	6.0
<u>(Ouchterlony diffusion, see 86331)</u>			
<u>(Parietal cell antibody, see 86255, 86256)</u>			
<u>(Paternity testing, ABO + Rh factors + MN (per individual);</u>			
<u>each additional antigen system</u>			
<u>(Platelet concentrate; preparation</u>			
<u>mix and pool, each unit</u>			
<u>(Platelet rich plasma, preparation</u>			
<u>Precipitin determination, gel diffusion, in aspergillosis, bagassosis, farmer lung, pigeon breeder disease, silo filler disease, other alveolitis (specify)</u>			
<u>Precipitin test for blood (species identification)</u>			
<u>(Prothrombin complex; dilute and pretest</u>			
<u>lyophilized, unit</u>			
<u>(Radioallergosorbent test (RAST); up to 5 antigens</u>			
<u>6 or more antigens</u>			
<u>(Radioimmunosorbent test (RIST) IgE, quantitative</u>			
<u>(Rat mast cell technique (RMCT)</u>			
<u>Red blood cells, packed; preparation gravity method, unit in addition to collection and processing</u>			
<u>centrifuge method in addition to collection and processing</u>			
<u>processing by blood bank, includes collection</u>			
<u>(Rh immune globulin, see 86273)</u>			
<u>(Rheumatoid factor)</u>			
<u>(RIST, see 86423)</u>			
<u>(RMCT, see 86423)</u>			
<u>(RPR, see 86592)</u>			
<u>(Rubella, CF, see 86171; HAI, see 86280)</u>			
<u>(Schistosomiasis agglutination, see 86006-86009)</u>			
<u>(Serologic test for syphilis (STS), see 86171, 86592, 86593)</u>			
((86350	30.0	86355	20.0
86356	20.0	86360	40.0
86367	40.0	86370	40.0
86375	20.0	86375	20.0
86380	40.0	86380	40.0
86390	BR+	86390	BR+
86394	56.0	86394	56.0
86395	80.0	86395	80.0
86396	BR+	86396	BR+
86397	BR+	86397	BR+
86400	20.0	86400	20.0
86410	12.0	86410	12.0
86420	20.0	86420	20.0
86450	20.0	86450	20.0
86460	20.0	86460	20.0
86470	20.0	86470	20.0
86480	20.0	86480	20.0
86490	20.0	86490	20.0
86495	20.0	86495	20.0
86500	20.0	86500	20.0
86510	20.0	86510	20.0
86520	20.0	86520	20.0

	Unit Value
86530 ((lymphopathia)) lymphogranuloma venereum (Frei test).....	20.0
86540 mumps	20.0
86550 psittacosis	20.0
((86560) sarcoidosis	20.0
86565 sarcoidosis Kveim test, includes skin test only . ((BR+))	20.0
(For biopsy see 11100, for microscopic study, see ((88310)) 88304, 88313)	
86570 trichinosis	20.0
86580 tuberculosis patch or intradermal	20.0
86585 tine test	12.0
(For skin tests for allergy testing, see ((95000-95090)) 95005-95199, Medicine section)	
(Smooth muscle antibody, see 86255, 86256)	
(Sporotrichosis, see 86006-86009)	
(Streptococcus MG, see 86171)	
86590 Streptokinase, antibody	27.0
(Streptolysis O antibody, see anti-streptolysis O, 86060-86061)	
(Streptobacillus, see 86008, 86009)	
86592 Syphilis, precipitation or flocculation tests, qualitative VDRL, RPR, DRT	9.0
(See also 89006, 89007)	
86593 Syphilis, precipitation or flocculation tests, quantitative	15.0
(Syphilis serology, see also 86171)	
(Tetanus, see 86280)	
(Thyroglobulin antibody, see 86006-86009, 86171)	
86594 Thyroid autoantibodies	BR
86595 Tissue; culture	BR
86597 typing	BR
86600 Toxoplasmosis dye test	80.0
(For CF, see 86171; IFA, see 86255, 86256)	
86630 Transfer factor test (TFT)	BR
86650 Treponema antibodies, fluorescent, absorbed (FTA-abs)	30.0
86660 Treponema pallidum immobilization (TPI)	80.0
86662 Treponema pallidum test, other, specify (e.g., TPIA, TPA, TPMB, TPCF, RPCF)	BR
(Trichinosis, see 86006-86009)	
(Trypanosomiasis, see 86171, 86280)	
(Tuberculosis, see 86580, 86585, 87116-87118, 87190)	
(Vaccinia immune globulin, see 86274)	
(VDRL, see 86592, 86593)	
(Viral antibodies, see 86171, 86280, 86382)	
(Visceral larval migrans, see 86280)	
(Warm agglutinins, see 86004)	
86670 Washed red blood cells for transfusion, preparation not including unit collection and processing	75.0
86999 Unlisted immunology procedure	BR

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)
WAC 296-23-224 MICROBIOLOGY.

	Unit Value
(Includes bacteriology, mycology, parasitology and virology)	
((87000) Initial microscopic examination, stain for bacteria, fungi, parasites, ova, inclusion bodies, any source	20.0
87010 wet mount for bacteria, fungi, parasites, ova, inclusion bodies, any source	20.0
87001 Animal inoculation, small animal; with observation ..	36.0
87003 with observation and dissection	45.0
87015 concentration (any type) for parasites, ova or tubercle bacillus (T.B. AFB)	20.0
((87050))87040 Culture, ((blood;)) bacterial, definitive aerobic; blood (may include anaerobic screen)	48.0
87045 stool	25.0
87060 throat or nose	20.0
87070 any other source	16.0
(For urine, see 87086-87088)	
87075 Culture, bacterial, any source; anaerobic (isolation) ..	36.0
87076 definitive identification, including gas chromatography in anaerobic culture	60.0
87081 Culture, bacterial, screening only, for single organisms	15.0
87086 Culture, bacterial, urine; quantitative, colony count ..	15.0
87087 commercial kit	12.0
87088 identification, in addition to quantitative or commercial kit	12.0
87101 Culture, fungi, isolation; skin	15.0
87102 other source	18.0
87106 definitive identification, by culture, per organism, in addition to skin or other source	30.0
87109 Culture, mycoplasma, any source	75.0
87116 Culture, tubercle or other acid-fast bacilli (e.g., TB, AFB, mycobacteria); any source, isolation only	18.0
87117 concentration plus isolation	30.0
87118 definitive identification, per organism, (does not include isolation and/or concentration)	30.0
((87055) including sensitivity study, up to 20 discs ..	80.0
87080 all other sources, screening only, for single organism, per plate or tube	16.0
87085 including sensitivity study, up to 20 discs ..	50.0
87090 definitive, per plate or tube	16.0
87095 including sensitivity study for specific micro-organism(s), with isolation of one or more organisms, up to 20 discs	80.0
87100 tubercle bacillus, nocardia, higher bacteria, and mycoplasma, definitive, any source (includes concentration)	60.0
87110 urine, quantitative with colony count (may include pour plate)	40.0
87120 including sensitivity study, screening	50.0
87130 definitive, and sensitivity study for specific micro-organism(s), with isolation of one or more organisms, up to 20 discs	80.0
87140 ((Typing of)) culture, typing fluorescent method each antiserum	20.0
87143 gas liquid chromatography (GLC) method	45.0
((87150))87145 phage method	40.0
((87160))87147 serological method agglutination grouping, per antiserum	20.0
87151 serologic method, speciation	20.0
87155 precipitin method, grouping, per antiserum	12.0
((87170))87158 other methods	BR+
87163 Culture, special extensive definitive diagnostic studies, beyond usual definitive studies	BR
87164 Dark field examination, any source (e.g., penile, vaginal, oral, skin); includes specimen collection	BR
87166 without collection	30.0
87173 Endotoxin, bacterial (pyrogens); animal inoculation ..	36.0
87174 chemical	24.0
87176 homogenization, tissue, for culture	15.0

	Unit Value
87177 Ova and parasites, direct smears, concentration and identification	36.0
(Individual smears and procedures, see 87015, 87208, 87205-87211)	
(Trichrome, iron hemotoxylin and other special stains, see 88312)	
((87180))87181 Sensitivity study ((for specific micro-organism, per)) antibiotic, ((tube dilution technic)) agar diffusion method, each antibiotic	40.0
87184 disc method, each plate (12 or less discs)	24.0
87186 microtiter, minimum inhibitory concentration (MIC), 8 or less antibiotics	45.0
87188 tube dilution method, each antibiotic	30.0
87190 Sensitivity study of tubercle bacillus, ((one)) (TB, AFB), each drug	60.0
((87195) each additional drug	20.0
87200 Virology, inoculation of embryonated eggs, suitable tissue culture, or animals	BR+)
87205 Smear, primary source, with interpretation; routine stain for bacteria, fungi, or cell types	12.0
87206 fluorescent and/or acid fast stain for bacteria, fungi, or cell types	18.0
87207 special stain for inclusion bodies or intracellular parasites (e.g., malaria, kala azar)	24.0
87208 direct or concentrated, dry, for ova and parasites	12.0

(For concentration, see 87015; complete examination, see 87177)

(For complex special stains, see 88312-88313)

(For fat, meat, fibers, nasal eosinophils, and starch, see miscellaneous section)

87210 wet mount with simple stain and interpretation, for bacteria, fungi, ova, and/or parasites	12.0
87211 wet and dry mount, with interpretation, for ova and parasites	18.0
87250 Virus, inoculation of embryonated eggs, suitable tissue culture, or small animal, includes observation and dissection	BR

(For electron microscopy, see ((88200)) 88348)

(For inclusion bodies in tissue sections, see ((88310)) 88304-88309; in smears, see 87207-87210; in fluids, see 88106)

87300 Autogenous vaccine	140.0
((87350) Darkfield examination, penile or oral lesion	60.0
87355 vaginal or anal	100.0
87400 Guinea pig or small animal inoculation, observation and dissection	80.0))
87999 Unlisted microbiology procedure	BR

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-23-228 ANATOMIC PATHOLOGY.

	Unit Value
POSTMORTEM EXAMINATION	
(Procedures 88000 through 88099 represent physician services only. See modifier -90 for outside laboratory services.)	
88000 Necropsy (Autopsy) ((examination, excluding)) without CNS, gross examination only	400.0
88005 with brain	500.0
((88010))88007 ((including CNS, gross examination only)) with brain and spinal cord	600.0
88012 infant with brain	300.0
88014 stillborn or newborn with brain	300.0
88016 macerated stillborn	400.0

	Unit Value
88020 ((excluding)) Necropsy (autopsy) without CNS, gross and microscopic examination	800.0
88025 with brain	900.0
((88030))88027 ((including CNS, gross and microscopic examination)) with brain and spinal cord	1000.0
88028 infant with brain	700.0
88029 stillborn or newborn with brain	700.0
88036 Necropsy (autopsy), limited, gross and/or microscopic; regional	BR
((88035))88037 ((special autopsy procedure (e.g.)) single organ ((study))	BR+
((88100) Cytopathology, smears (e.g., Papanicolaou type), genital source, screening 2 slides	30.0
88105 with review including hormonal evaluation (cytogram, maturation index, estrogen activity, etc.	40.0
88110 extra-genital sources, with or without differential count	40.0
88120 gastric, with lavage and X-ray localization, centrifugation of specimens preparation of smears and interpretation	BR+))
88040 Necropsy (autopsy); forensic examination	BR
88045 coroner's call	BR
88099 Unlisted necropsy (autopsy) procedure	BR

CYTOPATHOLOGY

88104 Cytopathology, fluids, washings or brushings, with centrifugation except cervical or vaginal; smears and interpretation	45.0
88106 filter method only with interpretation	45.0
88107 smears and filter preparation with interpretation	60.0
88109 smears and cell block with interpretation	90.0

(For cervical or vaginal smears, see 88150)

(For cell block only, see 88302)

(For gastric intubation with lavage, see 89130-89141, 91055)

(For x-ray localization, see 74340)

88125 Cytopathology, forensic (e.g., sperm)	75.0
88130 ((buccal smear;)) Sex chromatin ((body for chromosomal sex determination)) identification; (Barr bodies)	40.0
88140 ((white)) peripheral blood ((cell)) smear, polymorphonuclear ((cell)) "drum sticks" ((for chromosomal sex determination))	40.0
((88200) Electron microscopy	BR+
88250 Karyotyping, tissue culture with preparation of karyograms	BR+))

(For Guard stain, see 88313)

88150 Cytopathology, smears, cervical or vaginal (e.g., Papanicolaou), screening and interpretation, up to three smears;	30.0
88155 with definitive hormonal evaluation (e.g., maturation index, karyopyknotic index, estrogenic index)	40.0
88160 Cytopathology, any other source (e.g., sputum), screening and interpretation	36.0

(For aerosol collection of sputum, see 89350)

(For special stains, see 88312, 88313)

88199 Unlisted cytopathology procedure	BR
(For electron microscopy, see 88348, 88349)	

CYTOGENETIC STUDIES

88260 Chromosome analysis; lymphocytes, count 1-4 cells, screening	180.0
88261 count 1-4 cells, 1 karyotype	375.0
88262 count 1-20 cells for mosaicism, 2 karyotypes	525.0

		Unit Value	<u>AMENDATORY SECTION</u> (Amending Order 74-7, filed 1/30/74) <u>WAC 296-23-232 MISCELLANEOUS.</u>	Unit Value
88265	Chromosome analysis; myeloid cells, 2 karyotypes (Philadelphia chromosome)	225.0		
88267	amniotic fluid, count 1-4 cells, 1 karyotype	600.0	(For Achilles tendon reflex test (ART), see 95930)	
88268	skin, count 1-4 cells, 1 karyotype	600.0	89000 Basal metabolic rate (BMR)	40.0
88270	other tissue cells, count 1-4 cells, 1 karyotype ..	BR	89005 Test combinations assigned individual procedure numbers for secretarial convenience only; CBC and urinalysis (includes 85022 or 85031 and 81000) ...	Sv.
88280	additional karyotyping	75.0	89006 CBC, urinalysis, and serology (includes 85022 or 85031, 81000 and 86592)	Sv.
88285	additional cells counted	15.0	89007 CBC, urinalysis, serology, blood typing, and Rh grouping (includes 85022 or 85031, 81000, 86592, 86082 and 86100)	Sv.
88299	Unlisted cytogenetic study	BR	89050 Cell count, miscellaneous body fluids (except blood)(e.g., CSF, joint fluid, etc.)	12.0
SURGICAL PATHOLOGY			89051 with differential	20.0
(Procedures 88300 through 88399 include accession, han- dling and reporting)			89070 Cerebrospinal fluid, complete examination (chloride, glucose, protein, and cell count)	30.0
88300	Surgical pathology, gross examination only	20.0	(For individual CSF determinations, see specific entries)	
(88310)	gross and microscopic, routine, up to 3 speci- mens without individual identification	60.0	89080 Colloidal gold, spinal fluid	20.0
88315	multiple specimens and/or extensive dissection with individual identification or unusual prepara- tion	BR+))	89100 Duodenal intubation and aspiration ((independent procedure)) single specimen (e.g., simple bile study or afferent loop culture) plus appropriate test proce- dure	40.0
NOTE: Only one of the numbers 88302-88309 should be used in reporting specimens (single or multiple) that are re- moved during a single surgical procedure.			89105 collection of multiple fractional specimens, single or double lumen tube (pancreatic-zymase secre- tion test), ((+2 hr. secretory for Zollinger-Ellison syndrome)) with or without cytology preparation .	BR+
88302	Surgical pathology, gross and microscopic; examina- tion for identification and record purposes (e.g., uterine tubes, vas deferens, sympathetic ganglion) ..	60.0	(For chemical analyses, see ((82665-82680)) Chemistry and Toxicology)	
88304	diagnostic exam, small or uncomplicated specimen (e.g., skin lesion(s), needle biopsy)	75.0	(For electrocardiogram, see 93000-((93045))93279)	
88305	diagnostic exam, larger specimen or multiple small specimens (e.g., prostate clippings, uterine curettings, segment of stomach)	105.0	((89110) Esophagus acid perfusion test	BR+
88307	complex diagnostic exam, large specimen(s), or- gans or multiple tissues requiring multiple slides .	150.0	89120 Feces, appearance, occult blood, screening for starch and fat	20.0))
88309	comprehensive diagnostic exam (e.g., specimen with regional nodes, detailed anatomic dissection or diagnostic problem)	BR	(For radiological localization, see 74340)	
88311	decalcification procedure	12.0	(Esophagus acid perfusion test (Bernstein), see 91030)	
88312	Special stains; Group I stains for microorganisms, (e.g., Gridley, acid fast, methenamine silver, Levaditi)	25.0	89125 Fat stain, feces, urine, sputum	15.0
88313	Group II, all other special stains	12.0	89130 Gastric intubation and aspiration ((independent procedure)) diagnostic, each specimen, for chemical analyses or cytopathology;	20.0
88317	Interpretation by treating physician of previously di- agnosed histologic slide (without consultation)	BR	((For washing for cytology, see 88120))	
((88320))88321	consultation ((on previously prepared slides, brief review and interpretation)) and report on referred slides prepared elsewhere	140.0	89132 after stimulation	45.0
88323	Consultation and report on referred material requir- ing preparation of slides	BR	89135 Gastric intubation, aspiration, and fractional collec- tions; for one hour (e.g., gastric secretory study) ...	60.0
88325	comprehensive review ((and detailed)) of re- cords and slides, with report on referred mate- rial	BR +	89136 two hours	90.0
((88330))88329	((operative)) consultation ((with or without rapid (frozen) section, includes permanent sections)) during surgery ...	100.0	89140 two hours including gastric stimulation (e.g., histalog, pentagastrin)	105.0
((88335)	multiple specimens and/or extensive dissec- tion with individual identification or unusual preparation	BR+))	89141 three hours, including gastric stimulation	120.0
88331	with frozen section(s)	90.0	(For gastric lavage, therapeutic, see 96150)	
88332	each additional frozen section during same visit to surgical operating suite	30.0	(For radiologic localization of gastric tube, see 74340)	
(For permanent paraffin section, see 88302-88309)			(For chemical analyses, see ((82925-82945)) 82926- 82939)	
88345	Immunofluorescent study	BR	(For joint fluid chemistry, see Chemistry and Toxicology, this section)	
88348	Electron microscopy; diagnostic	BR	((89150) Leucocyte and tissue typing (e.g., organ transplan- tation)	BR+
88349	scanning	BR	89200 Paternity test, per individual (A,B,M,N,C,c,D,E,c)	100.0
((88400))88360	Whole organ sections for special studies ..	200.0	89201 additional factors	BR+
88399	Unlisted surgical pathology procedure	BR	(For pregnancy test, see 83160-83175))	
			89160 Meat fibers, feces	12.0
			89180 Microscopic examination for eosinophils, nasal se- cretions, sputum, bronchoscopic aspiration, mucus of stools, others (specify)	12.0
			89205 Occult blood, any source except feces	10.5
			(Occult blood, feces, see 82270)	

	Unit Value
<u>(Paternity tests, see 86385, 86386)</u>	
89210	Pharmacokinetic analysis, specify individual drug and fluid/tissue BR
89300	Semen analysis, presence ((or absence of)) and/or sperm ((or)) motility ((only)) including Huhner test 12.0
89310	motility and count 40.0
89320	complete (volume, count, motility and differential) 80.0

(For skin test, see ((immunology, WAC 296-23-221, and Allergy, WAC 296-21-075)) 86450-86585 and 95005-95199)

89323	Sperm immobilization BR
89325	Sperm agglutination, with antibody titer BR

(For medicolegal identification of sperm, see 88125)

(For complete spinal fluid examination, see 89070)

89345	Sputum examination for hemosiderin or foreign material BR
89350	Sputum, obtaining specimen, aerosol induced technique (((independent)) separate procedure) 20.0
89355	Starch granules, feces 10.5
89360	Sweat test by iontophoresis 50.0

(For chloride and sodium analysis, see 82437, 84295)

(Tissue culture, see 86595)

(Tissue typing, see 86597)

89365	Water load test BR
89399	Unlisted miscellaneous pathology test BR

AMENDATORY SECTION (Amending Order 75-39, filed 11/28/75, effective 1/1/76)

WAC 296-23-300 GENERAL STATEMENT. To enable us to pay your bills more promptly we must have your cooperation. There is often delay in processing hospital bills because the claim number is not listed in the space provided on the bill form. The department provides the claim number to the injured worker and attending ((physician)) doctor immediately after our receipt of a new Report of Accident. The claim number is sent out prior to the adjudication of the claim. Self-insurers may be contacted directly to obtain claim numbers on self-insured claims. See Appendix B for list of self-insured employers.

Please make arrangements with the ((physicians)) doctor in your area to supply you with the claim number when arrangements are made for hospitalization. If the attending ((physician)) doctor or the injured worker cannot supply you with the claim number then usually no portion of a claim has been filed with the department, or the claim is too new to have been received by department or self-insurer.

If for some reason you are not able to secure the claim number, the bill should not be held but should be forwarded to the department in Olympia or to the self-insurer, supplying ALL other information requested on the heading of the bill. Do not confuse the date of injury with the date of admission or service. We urge you to submit your bills to the department or self-insurer at the end of each month for the services rendered during that month. When using UB-16 forms, follow the billing instructions provided by the Washington State Hospital Association.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-23-301 RATES FOR DAILY AND ANCILLARY SERVICES. The department or self-insurer will pay rates for daily and ancillary services as approved by the Washington State Hospital Commission. Doctor services (other than professional component) are not included in WSHC rates and should be billed separately using appropriate Fee Schedule procedure codes.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-23-305 QUESTIONABLE BENEFICIARY. It is the responsibility of the hospital to try to determine at the time of admission((:)) if the injured worker is covered under the Industrial Insurance Act and if the hospitalization is for an industrial condition.

In cases where a worker with a questionable industrial injury has paid the hospital((:)) and it is subsequently determined that the worker should have been covered by Industrial Insurance, the hospital must bill the department for services rendered and refund to the worker((:)) the full amount collected from him.

AMENDATORY SECTION (Amending Order 68-7, filed 11/27/68, effective 1/1/69)

WAC 296-23-310 REFUND OF INCORRECT PAYMENTS. When the department or self-insurer has paid a hospital ((account)) billing and it is later determined that the service performed was not the responsibility of the department or self-insurer, the department ((will attempt to collect from the claimant)) or self-insurer must be refunded immediately. ((Failing to collect from the claimant,)) The department will ((than then)) deduct from future HOSPITAL PAYMENTS if the hospital does not refund.

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-23-330 CLOSED CLAIMS. The department or self-insurer will not pay for services rendered after the claim has been closed. If responsibility is later accepted by the department or self-insurer, WAC 296-23-305 will apply.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-23-335 RX'S TAKE HOME. Take home prescriptions will be authorized upon discharge of the patient if the medication is necessary for the industrial condition. Copies of prescription must be attached to billings.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-23-340 ROUTINE LABORATORY PROCEDURES ON ADMISSION. On admission of an industrially injured patient to a hospital, the department or the self-insurer will allow routine laboratory work-up consisting of a complete blood count or hematocrit, urinalysis, serology and routine admission chemical screening procedure. LABORATORY REPORTS FOR THE PROCEDURES ACCOMPLISHED MUST ACCOMPANY THE BILL.

AMENDATORY SECTION (Amending Order 77-27, filed 11/30/77, effective 1/1/78)

WAC 296-23-356 BILLING PROCEDURES. (1) Bills ((must specify the date, description of services and the charge for each service)) for hospital services can be submitted on Department or UB-16 bill forms. ((These must be itemized using either)) The ((department or)) self-insurer may accept other bill forms((, as the case may be)). ((Computer billing will not be acceptable unless description of services is easily readable without special knowledge or coding system. (See subsection (1) below))) Regardless of form used, the following information must appear: Claim number, claimant name and address, worker's social security number (if available), employer name, date of injury, diagnosis or nature of injury, date of service, and description of service rendered. If UB-16 forms are used, summarize charges by revenue codes as per UB-16 instructions. Itemized detail of summary charges must be attached.

(2) ((If computer billing is used, it must be securely fastened to a department or self-insurer bill form. The bill form must be completed in detail.

(3)) For a bill to be considered for payment, it ((must)) should be received ((in)) by the department or ((by the)) self-insurer within ninety days from the date ((each specific treatment and/or)) of service ((or procedure was rendered or performed)).

(3) Supporting documentation of services rendered must be attached to billings. The reports needed are:

- (a) X-ray findings
- (b) Laboratory findings

- (c) Diagnostic study findings
- (d) Emergency room reports
- (e) Admission history and physical
- (f) Discharge summary
- (g) Operative report
- (h) Physical therapy notes
- (i) Occupational therapy notes.

(4) ~~((Diagnostic reports must accompany all bills for x-ray services.~~
 (5) ~~Bills for laboratory work must be accompanied by copies of the reports of findings.~~

(6) ~~A copy of the admission record, the doctor's admission history and physical examination, must be submitted with the bill for each hospital admission.~~

(7) ~~The department or the self-insurer(;) may reject bills for services rendered in violation of the medical aid rules.~~

~~((8))~~ (5) The emergency room will be considered the office for those physicians providing regular emergency room care to the hospital, and fees will be allowed on this basis. Such fees must be billed separately from hospital charges.

~~((9))~~ (6) Call back between 6 p.m. and 8 a.m. provided that laboratory, x-ray and surgical staff are normally not on duty during this period of time will be billed at commission approved rates.

~~((10))~~ Bills for physical therapy and x-rays will be at commission approved rates.

~~((11))~~ (7) The claim number must be placed on each bill and on each page of attached documents in the upper right hand corner.

AMENDATORY SECTION (Amending Order 77-27, filed 11/30/77, effective 1/1/78)

WAC 296-23-357 X-RAYS. (1) ~~((Radiographs are required))~~ X-rays should not be sent to the department or self-insurer unless requested for comparison and interpretation in determining permanent disability, other administrative or legal decisions, and for cases in litigation ((and)). X-rays must be retained for a period of seven years by the hospital.

(2) X-rays must be made available upon request to consultants, to medical examiners, to the department, to self-insurers and/or the Board of Industrial Insurance Appeals.

(3) If a hospital ceases to function as an acute care facility, department approved custodial arrangements must be made to insure availability of x-rays on request.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-23-610 GENERAL INSTRUCTIONS. (1) ~~((Fees cover services and reports in all cases that can qualify for worker's compensation benefits. This fee schedule is intended to cover all examinations, reports and treatment))~~ Please refer to WAC 296-20-010 through WAC 296-20-125 for general information and rules pertaining to treatment of injured workers.

(2) The maximum fee is determined by multiplying the unit value of a procedure by a conversion factor. ~~((Individual))~~ The appropriate conversion factor table ~~((s apply to separate sections of the maximum fee schedule when such an item or procedure is used in the care and treatment of an industrial injury))~~ for chiropractic services is the medicine tables. For x-ray services - use radiology conversion tables and procedure numbers.

(3) ~~((Initial and follow-up visit charges by chiropractors shall include chiropractic manipulation or adjustment))~~ In addition to the rules found in WAC 296-20-010 to 296-20-125, the following rules apply when chiropractic treatment is being rendered:

(a) No more than one chiropractic adjustment per day will be authorized or paid, except on the initial and next two subsequent visits. The attending doctor must submit a detailed report regarding the need for the additional treatment.

(b) Treatment beyond the first 36 treatments or 90 days, whichever comes first, will not be authorized without submission of a consultation report regarding need for further care. (See WAC 296-20-051 re: Consultation.)

(c) If needed, x-rays immediately prior to and immediately following the initial chiropractic treatment may be allowed without prior authorization.

(d) X-rays before and after subsequent chiropractic treatment will not be paid unless previously authorized.

(e) No payment will be made for excessive or unnecessary x-rays taken on initial or subsequent visits.

(f) No services or x-rays will be paid on rejected or closed claims except those rendered in conjunction with a reopening application.

(g) See WAC 296-23-01002 for custody requirements for x-rays.

(h) Treatment as a maintenance or supportive measure will not be authorized nor paid.

(4) ~~((Communications to the department must show the patient's full name and claim number if known. If the claim number is unknown, in addition to the patient's name, show the date and the nature of the injury and the employer's name. A communication should refer to one claim only. Correspondence regarding chiropractic services should be sent directly to the department in Olympia or self-insurer in order to avoid rehandling by the service location.~~

(5) LIGHT WORK: The attending chiropractor is urged to bear in mind that light work is frequently beneficial for body conditioning and the gaining of self-confidence. Accordingly, where light work is available and whenever an employer requests that a worker be certified by a chiropractor as able to perform available work other than his usual work, the employer shall furnish to the physician, with a copy to the worker, a statement describing the available work in terms that will enable the physician to relate the physical activities of the job to worker's disability. The physician shall then determine whether the worker is physically able to perform the work described.

(6) REGULAR WORK: When the attending chiropractor determines that the patient is capable of returning to his regular work he should be informed and the department or self-insurer notified as to the specific date. Compensation will be terminated on this date. Further care will be allowed as outlined in WAC 296-23-61005.

(7) TERMINATION OF CHIROPRACTIC CARE: When chiropractic care is no longer required and the industrial condition stabilized, a report must be submitted to the department or self-insurer to this effect stating the specific date. This is necessary for closure of the industrial claim, even though the patient may require continued care for conditions not related to the industrial condition.

(8) PERMANENT DISABILITY: When the patient has, in the opinion of the attending chiropractor, a permanent partial disability or measurable impairment of function, the attending chiropractor should notify the department or self-insurer so that an examination can be scheduled to determine the extent of impairment. Billing procedures itemized in WAC 296-20-125 must be followed.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-23-615 OFFICE VISITS AND SPECIAL SERVICES.

DEFINITIONS:

Routine Office Visit: A level of service pertaining to the evaluation and treatment of a condition requiring only an abbreviated history and exam, i.e.:

- (1) Palpation, exam and adjustment of one or more areas.
- (2) Brief exam and no adjustment.

Extended Office Visit: A level of service pertaining to an evaluation of patient with a new or existing problem requiring a detailed history, review of records, exam, and a formal conference with patient or family to evaluate and/or adjust therapeutic treatment management and progress.

Comprehensive Office Visit: A level of service pertaining to an in-depth evaluation of a patient with a new or existing problem, requiring development or complete re-evaluation of treatment data; includes recording of chief complaints and present illness, family history, past treatment history, personal history, system review; and a complete exam to evaluate and determine appropriate therapeutic treatment management and progress.

CHIROPRACTIC MODIFIERS:

-22 Unusual Services: When treatment services provided are greater than that usually required for listed procedures, i.e. extra time, adjustment followed by hot/cold packs. A report is required; the modifier -22 should be added to the procedure number.

-52 Reduced Services: Under certain circumstances no treatment may be given, in these cases the procedure should be reduced by 10 unites and modifier -52 should be added to the procedure number.

MATERIAL SUPPLIED BY DOCTOR:

Department or Self-Insurer will reimburse the doctor for materials supplied, i.e. cervical collars, heel lifts, etc., at cost only. See RCW 19.68.010, Professional License Statutes. Use Procedure Number C99070.

SPECIAL SERVICES:

The following services are generally part of the basic services listed in the maximum fee schedule but do involve additional expenses to the chiropractor for materials, for his time or that of his employees. These services are generally provided as an adjunct to common chiropractic services and should be used only when circumstances clearly warrant an additional charge over and above the usual charges for the basic services.

	Unit Value
C90001 <u>Completion of Report of Accident only</u>	12.0
C90097 <u>Completion of Reopening Application</u>	12.0
((C99030))	
C99032 <u>Mileage, one way, each mile beyond 7 mile radius of point of origin (office or home), per mile</u>	2.0
C99040 <u>Completion of Disability Card</u>	2.0
C99052 <u>Services requested between 6:00 p.m. and 8:00 a.m. in addition to basic services, provided the office is closed during this period of time</u>	12.0
C99054 <u>Services requested on Sundays and holidays in addition to basic services provided office is closed</u>	12.0
C99070 <u>Supplies, materials provided by doctor. Bill at cost</u>	BR
((C99082) <u>Completion of Certificate of Disability Card</u>	2.0)

((NEW PATIENT)) INITIAL VISIT

C90000 <u>Routine examination, history, chiropractic ((manipulation)) adjustment and submission of a report ((and/or if immediately following an injury, submission of Report of Accident))</u>	((25.0)) 20.0
C90017 <u>Extended office visit including treatment - report required</u>	30.0
C90020 <u>Comprehensive office visit including treatment - report required</u>	40.0

FOLLOW-UP ((TREATMENT)) VISITS

((C90040))	
C90040 <u>Office visit including chiropractic ((manipulation)) adjustment</u>	16.0
C90070 <u>Extended office visit including treatment - report required</u>	30.0

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-23-620 CHIROPRACTIC CONSULTATIONS. See WAC 296-20-035, 296-20-045, and 296-20-051 for rules pertaining to consultation.

Chiropractic consultation requires prior authorization by the Department or Self-Insurer. Consultants must be from an approved list of Chiropractic Consultants.

	Unit Value
C90600 <u>Limited consultation involving one prime accepted area of injury or brief evaluation - report required</u>	30.0
((C90020))	
C90605 <u>((Chiropractic)) Intermediate consultation((upon prior authorization by the Department from an approved list of chiropractic consultants)) involving two prime accepted injury areas and/or more intensive exam - report required</u>	50.0
C90620 <u>Comprehensive consultation involving entire spinal accepted injury areas and/or extensive report - may include review of prior treatment records and x-rays - report required</u>	70.0

AMENDATORY SECTION (Amending Order 75-39, filed 11/28/75, effective 1/1/76)

WAC 296-23-710 PHYSICAL THERAPY RULES. Practitioners should refer to WAC 296-20-010 through 296-20-125 for general information and rules pertaining to the care of injured workers. See WAC 296-20-125 for billing instructions.

((RULE-1))

Physical therapy treatment will be permitted only when given by a licensed registered physical therapist or a physical therapist assistant serving under the direction of a licensed registered physical therapist upon written prescription by a ((physician)) doctor. ~~((In remote isolated areas, where no registered physical therapist is available, with prior authorization from the department or the self-insurer, physical modalities in 9700 will be allowed when given in a physician's office, hospital or nurse practitioner clinic. (See) Doctor's rendering physical therapy should refer to WAC 296-21-095((, 97070 in Medicine section)).((3))~~ Use of diapulse or similar machine on ((persons under jurisdiction of the department or the self-insurer)) injured workers is not authorized. See WAC 296-20-03002 for further information.

((RULE-2))

A physical therapy progress report must be submitted to the ((physician prescribing the treatment;)) attending doctor, with a copy ((must be sent)) attached, to the billing Department or the Self-Insurer ((also. This report is to be completed after)) following 12 treatment visits or one month, whichever occurs first. ~~((Payment for the treatment is contingent upon receipt of the report within the department or the self-insurer, as the case may be, within 15 days of completing the 12 visits or one month;))~~ Physical therapy treatment beyond initial 12 treatments will be authorized only upon substantiation of improvement in the worker's condition in terms of functional modalities, i.e.: Range of motion; sitting and standing tolerance; reduction in medication; etc. In addition, an outline of the proposed treatment program, the expected restoration goals, and the expected length of treatment will be required.

((RULE-3))

Upon ((prior)) justification and ((approval)) subsequent authorization by the Department, or Self-Insurer, physical therapy treatment to separate noncontiguous areas (i.e., tow back, knee) requiring individual treatment or ((other)) special procedures will be allowed at full ((unit value)) rate for each area with a maximum of two areas allowed.

((RULE-4))

Physical therapy in the home and/or places other than the practitioners usual and customary business facilities justification to will be allowed only upon prior ((approval)) and authorization by the Department or Self-Insurer.

No in-patient physical therapy treatment will be allowed when such treatment constitutes the only or major treatment received by the worker. See WAC 296-20-030 for further information.

((RULE-5))

Physical therapy treatments ~~((twice daily in hospital settings will be given as ordered and substantiated by a copy of))~~ exceeding once per day must be justified by attending doctor((s order)).

Biofeedback treatment may be rendered on doctor's orders only, by those R.P.T.'s and L.P.T.'s working under the supervision of a R.P.T. The extent of biofeedback treatment is limited to those procedures allowed within the scope of practice of the R.P.T. or L.P.T. See WAC 296-21-0501 for rules pertaining to conditions authorized and report requirements.

((RULE-6))

BILLING PROCEDURE: (1) Bills must be itemized on department or self-insurer forms, as the case may be, specifying the dates and number of treatments, type of modalities or procedures employed and have submitted the report required in Rule 2.

(2) The bill form must be completed in detail to include the claim number if known, the account number and name of the physical therapist rendering the service. Bills will be accepted when signed by other than the physical therapist rendering the service. When bills are prepared by someone else, responsibility for the completeness and accuracy of the description of services and charges rest with the physical therapist rendering the service.

- (3) Each person rendering service must submit a separate bill.
- (4) For a bill to be considered for payment, it must be received in the department or by the self-insurer within 90 days from the date each specific treatment was rendered. Whenever possible bills should be submitted monthly.
- (5) ~~UNDER NO CIRCUMSTANCES CAN BILLS BE PAID FOR ANY SERVICES WHILE A CLAIM IS CLOSED.~~
- (6) The department or the self-insurer may reject bills for services rendered in violation of the medical aid rules.
- (7) This is a maximum fee schedule. All fees listed are the maximum fees allowable and if a fee for any particular service is lower to the general public than listed in the fee schedule, the practitioner shall bill the department or self-insurer at the lower rate.)

AMENDATORY SECTION (Amending Order 74-1, filed 1/30/74)
WAC 296-23-715 MODALITIES.

	Unit Value
P97000 One of the following modalities to one area	12.0
(a) Hot or cold packs	
(b) Traction, mechanical	
(c) Electrical stimulation (unattended)	
(d) Vasopneumatic devices	
(e) Paraffin bath	
(f) Microwave	
(g) Whirlpool	
(h) Diathermy	
(i) Infrared	
(j) Ultra violet	
(k) Biofeedback	
P97050 Two or more modalities to the same area	13.0

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)
WAC 296-23-720 PROCEDURES. (Therapist is required to be in constant attendance.)

	Unit Value
P97100 One of the following procedures to one area, initial 30 minutes	16.0
(a) Therapeutic exercises	
(b) Neuromuscular re-education	
(c) Functional activities	
(d) Gait training	
(e) Electrical stimulation (manual)	
(f) Traction, manual	
(g) Massage	
(h) Contrast baths	
(i) Ultrasound	
(j) Biofeedback	
P97101 Each additional 15 minutes	5.0
P97200 Combination of any modality(s) and procedure(s), initial 30 minutes	16.0
P97201 Each additional 15 minutes	5.0
P97220 Hubbard tank, initial 30 minutes	24.0
P97221 Each additional 15 minutes (maximum allowance, one hour)	5.0
P97240 Pool therapy or hubbard tank with therapeutic exercises, initial 30 minutes	30.0
P97241 Each additional 15 minutes (maximum allowance, one hour)	6.0
P97250 Sterile technique (severe burn cases and open draining areas requiring sterile bandages and dressings).....	6.0

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)
WAC 296-23-725 TESTS AND MEASUREMENTS.

	Unit Value
P97700 One of the following tests or measurements with report, initial 30 minutes.	24.0
(a) Orthotic "check-out"	
(b) Prosthetic "check-out"	
(c) Activities of daily living "check-out"	
(d) Biofeedback evaluation	
P97701 Each additional 15 minutes	12.0
P97720 Extremity testing for strength, dexterity or stamina, initial 30 minutes	24.0
P97721 Each additional 15 minutes	12.0
P97740 Kinetic activities to increase coordination, strength and/or range of motion, one area (i.e., any two extremities or trunk), initial 30 minutes	24.0
P97741 Each additional 15 minutes	12.0

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-23-810 GENERAL INSTRUCTIONS. (1) ((Fees cover services and reports in all cases that can qualify for worker's compensation benefits. This fee schedule is intended to cover all examinations, reports and treatment)) Refer to WAC 296-20-010 through 296-20-125 regarding general rules and billing procedures.

(2) The maximum fee is determined by multiplying the unit value of a procedure by a conversion factor. ((Individual)) The appropriate conversion ((factor)) tables ((apply to separate sections of the maximum fee schedule when such an item or procedure is used in the care and treatment of an industrial injury)) for drugless therapeutics services is the Medicine table; for x-rays-Radiology table.

(3) ((Communications to the department must show the patient's full name and claim number if known. If the claim number is unknown, in addition to the patient's name, show the date and the nature of the injury and the employer's name. A communication should refer to one claim only. Correspondence regarding drugless therapeutic services should be sent directly to the department in Olympia or self-insurer in order to avoid rehandling by the service location.

(4) LIGHT WORK. The attending drugless practitioner is urged to bear in mind that light work is frequently beneficial for body conditioning and the gaining of self-confidence. Accordingly, where light work is available and whenever an employer requests that a worker be certified by a drugless practitioner as able to perform available work other than his usual work, the employer shall furnish to the physician, with a copy to the worker, a statement describing the available work in terms that will enable the drugless practitioner to relate the physical activities of the job to worker's disability. The drugless practitioner shall then determine whether the worker is physically able to perform the work described.

(5) REGULAR WORK. When the attending practitioner determines that the patient is capable of returning to his regular work he should be informed and the department notified as to the specific date. Compensation will be terminated on this date. Further care will be allowed as outlined in WAC 296-23-81005.

(6) TERMINATION OF THERAPY. When therapy is no longer required and the industrial condition stabilized, a report must be submitted to the department or self-insurer to this effect stating the specific date. This is necessary for closure of the industrial claim, even though the patient may require continued care for conditions not related to the industrial condition.

(7) PERMANENT DISABILITY. When the patient has, in the opinion of the attending practitioner a permanent partial disability or measurable impairment of function, the attending practitioner should notify the department or self-insurer so that an examination can be scheduled to determine the extent of impairment.) In addition to general rules found in WAC 296-20-010 through 296-20-125, the following rules apply to drugless therapists:

(a) If the drugless therapist is dual licensed, all treatment rendered by the practitioner must be billed as "treatment of the day". Further, the practitioner must elect and notify the department or self-insurer, which type of treatment he is providing for the injured worker, and abide by rules pertaining to area of elected treatment.

(b) Drugless Therapists utilizing hydro-, mechano-, and/or electro-therapy modalities cannot bill for those services in addition to office visit services. Office visit includes treatment of the day.

(c) No more than one office visit will be allowed per day, except on the initial and next two subsequent visits. The attending doctor must submit a detailed report regarding the need for the additional treatment.

(d) If necessary, x-rays may be taken immediately prior to and following the initial drugless therapeutic treatment without prior authorization.

(e) X-rays immediately prior to and following each subsequent drugless therapeutic treatment will be disallowed, unless previously authorized.

(f) Prior authorization must be obtained for x-rays subsequent to initial treatment.

(g) Payment will not be made for excessive or unnecessary x-rays. No payment will be made for x-rays taken on rejected or closed claims, except those taken in conjunction with a reopening application.

(h) See WAC 296-23-01002 for custody requirements for x-rays.

(4) Drugless therapy as a maintenance or supportive measure will not be authorized or paid.

(5) Treatment beyond the first 36 treatments or 90 days, whichever occurs first, will not be authorized without submission of a consultation report regarding need for further care.

AMENDATORY SECTION (Amending Order 76-34, filed 11/24/76, effective 1/1/77)

WAC 296-23-811 OFFICE VISITS AND SPECIAL SERVICES. DEFINITIONS:

Routine Office Visit: A level of service pertaining to the evaluation and treatment of a condition requiring only an abbreviated history and exam.

Extended Office Visit: A level of service pertaining to an evaluation of patient with a new or existing problem requiring a detailed history, review of records, exam, and a formal conference with patient or family to evaluate and/or adjust therapeutic treatment management and progress.

Comprehensive Office Visit: A level of service pertaining to an in-depth evaluation of a patient with a new or existing problem, requiring development or complete re-evaluation of treatment data; includes recording of chief complaints and present illness, family history, past treatment history, personal history, system review; and a complete exam to evaluate and determine appropriate therapeutic treatment management and progress.

DRUGLESS THERAPEUTIC MODIFIERS:

-22 Unusual Services: When treatment services provided are greater than that usually required for listed procedures, i.e. extra time. A report may be required. The modifier -22 should be added to the procedure number.

-52 Reduced Services: Under certain circumstances no treatment may be given, in these cases the procedure should be reduced by 10 units and modifier -52 should be added to the procedure number.

MATERIAL SUPPLIED BY DOCTOR:

Department or self-insurer will reimburse the doctor for materials supplied, i.e. cervical collars, heel lifts, etc., at cost only. See RCW 19.68.010, Professional License Statutes. Procedure Number D99070 should be used to bill these charges.

SPECIAL SERVICES:

The following services are generally part of the basic services listed in the maximum fee schedule but do involve additional expenses to the ~~((drugless [drugless]))~~ drugless therapeutic practitioner for materials, for his time or that of his employees. These services are generally provided as an adjunct to common drugless therapeutic services and should be used only when circumstances clearly warrant an additional charge over and above the usual charges for the basic services.

	Unit Value
D90001 Completion of Report of Accident only	12.0
D90097 Completion of Reopening Application	12.0
((D99030))	

	Unit Value
D99032 Mileage, one way, each mile beyond 7 mile radius of point of origin (office or home), per mile	2.0
D99040 Completion of Disability Card	2.0
D99052 Services requested between 6:00 p.m. and 8:00 a.m. in addition to basic services, provided the office is closed during this period of time	12.0
D99054 Services requested on Sundays and holidays in addition to basic services provided office is closed	12.0
((D99082 Completion of Certificate of Disability Card	2.0))
D99070 Supplies, materials provided by doctor - bill at cost	BR

((NEW PATIENT)) INITIAL VISIT

D90000 Routine examination, history, and/or treatment (routine procedure), and submission of a report ((and/or if immediately following an injury, submission of Report of Accident))	((25-0)) 20.0
D90017 Extended office visit including treatment - report required	30.0
D90020 Comprehensive office visit including treatment - report required	40.0

FOLLOW-UP TREATMENT

~~((D90010))~~

D90040 Routine office visit including evaluation and/or treatment	16.0
D90070 Extended office visit including treatment - report required	30.0

AMENDATORY SECTION (Amending Order 74-39, filed 11/22/74, effective 4/1/75)

WAC 296-23-900 NURSE PRACTITIONER RULES. (1) Registered nurses and licensed practical nurses may perform private duty nursing care in industrial injury cases when the attending physician deems this care necessary. (See WAC 296-20-191 for home nursing rules.)

(2) Certified registered nurses ((in remote areas)) (CRNs) may perform advanced and specialized levels of nursing care on a fee for service basis in industrial injury cases within the limitations of ((Rules 3 & 4 below)) subsections (3) and (4) of this section.

(3) Advance approval must be obtained from the department to treat industrial injury cases. To be eligible to treat industrial injuries, the nurse practitioner must:

(a) ((Until rules governing certification by the professional license division are adopted, provide the department certification of graduation from an approved program of training for advance levels of nursing care)) Be recognized by the Washington State Board of Nursing as a Certified Registered Nurse (CRN).

(b) ((Be under the supervision of a physician who is accepting responsibility for treatment rendered by the nurse practitioner.

(c) Provide the department with the supervising physicians certification of the areas in which the nurse is competent to perform:

~~((d))~~ Provide the Department with evidence of a reliable and rapid system of ((communication with the supervising)) obtaining physician consultation.

(4) The scope of practice for nurse practitioners under the industrial insurance program is limited to the following, based on CRN speciality as approved by the State Board of Nursing:

(a) Preparing Reports of Accident and progress reports for the supervising physician's signature.

(b) Emergency treatment of serious injuries to include initial wound care, administration of medication and support of life functions.

(c) Treatment of minor injuries to include suturing of minor lacerations not involving tendons, nerves or bones.

(d) Removal of sutures.

(e) Removal of foreign bodies from eyes.

(f) Removal of slivers or foreign bodies where bones, nerves and tendons are not involved.

(g) ((Administering)) Prescribing legend drugs ((and medications on standing orders from the supervising physician)) when so authorized by State Board of Nursing.

(h) Nursing type follow-up care (i.e., dressing changes, etc.)
(i) Accompanying ambulance to the site of injury and/or to the hospital with the injured workman.

(j) Home visits to evaluate claimant's condition when attendant care is being rendered for the injured worker by persons other than the nurse practitioner, may be authorized when the request is received in advance of the visit.

(5) BILLING PROCEDURES

~~((a) Bills must be itemized on department or self-insurer forms, as the case may be specifying the date, type of service and the charges for each service.~~

~~(b) The bill form must be complete in detail to include the claim number if known. The account number and name of the nurse practitioner rendering service must be included on the bill. Bills will be accepted when signed by other than the practitioner rendering service. When bills are prepared by someone else, responsibility for the completeness and accuracy of the description of services and charges, rests with the practitioner rendering the service.~~

~~(c) For a bill to be considered for payment, it must be received in the department or by the self-insurer within 90 days from the date each specific treatment and/or service or treatment was rendered or performed. Whenever possible, bills should be submitted monthly.~~

~~(d) Bills cannot be paid for services rendered while a claim is closed.~~

~~(e) The department or the self-insurer may reject bills for services rendered in violation of the medical aid rules.) Billing procedures outlined in WAC 296-20-125 apply. In addition, nurse practitioners must bill under the name and account number of the supervising doctor, with identification of the nurse practitioner rendering the services on the bill and using the appropriate nurse practitioner procedure codes, listed in WAC 296-23-910.~~

- (5) WAC 296-23-61003 PENALTIES.
- (6) WAC 296-23-61004 INITIAL TREATMENT AND REPORT OF ACCIDENT.
- (7) WAC 296-23-61005 TREATMENT FOLLOWING INITIAL TREATMENT.
- (8) WAC 296-23-61006 REJECTED AND CLOSED CLAIMS.
- (9) WAC 296-23-61007 TREATMENT BEYOND 60 DAYS.
- (10) WAC 296-23-61008 DOCTOR'S SUPPLEMENTAL REPORT.
- (11) WAC 296-23-61009 TRANSFER OF PRACTITIONERS.
- (12) WAC 296-23-61010 CONCURRENT TREATMENT.
- (13) WAC 296-23-61011 BILLING PROCEDURES.
- (14) WAC 296-23-81001 WHO MAY TREAT.
- (15) WAC 296-23-81002 ACCEPTANCE OF RULES AND FEES.
- (16) WAC 296-23-81003 PENALTIES.
- (17) WAC 296-23-81004 INITIAL TREATMENT AND REPORT OF ACCIDENT.
- (18) WAC 296-23-81005 TREATMENT FOLLOWING INITIAL TREATMENT.
- (19) WAC 296-23-81006 REJECTED AND CLOSED CLAIMS.
- (20) WAC 296-23-81007 TREATMENT BEYOND 60 DAYS.
- (21) WAC 296-23-81008 DOCTOR'S SUPPLEMENTAL REPORT.
- (22) WAC 296-23-81009 TRANSFER OF PRACTITIONERS.
- (23) WAC 296-23-81010 CONCURRENT TREATMENT.
- (24) WAC 296-23-81011 BILLING PROCEDURES.

AMENDATORY SECTION (Amending Order 74-7, filed 1/30/74)

WAC 296-23-910 MAXIMUM VALUES ARE ESTABLISHED FOR SERVICES RENDERED BY NURSE PRACTITIONERS. The following maximum values are established for services rendered by nurse practitioners.

Other services rendered by nurse practitioners may be billed using the appropriate procedure number preceded by N- and valued at 80% of the unit value listed. Services are limited to the scope of practice defined in WAC 296-23-900(4).

	Unit Value
((+))	
<u>N90000</u> Initial office visit, to include history, initiation of treatment and preparation of Report of Accident for supervising physician's signature	14.0
((2))	
<u>N90050</u> Follow-up office visit	7.0
((3))	
<u>N12000</u> Suture of minor lacerations	20.5
((4))	
<u>N68000</u> Removal of foreign bodies from the eye	14.0
((5))	
<u>N99054</u> Office visit, Sunday, Holidays or at night. To be paid in addition to fees listed above	7.0
((6))	
<u>N99082</u> Accompanying an ambulance to the site of the injury and/or the hospital. (First half hour or fraction thereof.)	14.0
((7))	
<u>N99083</u> Each additional fifteen minutes or fraction thereof	7.0
((8) All other services paid as follow-up visits.	
(9) Home visits not authorized.)	

REPEALER (Amending Order 74-7, filed 1/30/74)

The following sections of the Washington Administrative Code are repealed:

- (1) WAC 296-23-105 TELETHERAPY.
- (2) WAC 296-23-110 BRACHYTHERAPY.
- (3) WAC 296-23-61001 WHO MAY TREAT.
- (4) WAC 296-23-61002 ACCEPTANCE OF RULES AND FEES.

Table of WAC Sections Affected

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132L-30-230	NEW 80-04-059	132L-522-020	REP 80-04-009	132P-12-144	REP-P 80-07-013
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132L-30-240	NEW 80-04-059	132L-522-040	REP 80-04-009	132P-12-147	REP-P 80-07-013
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132L-30-250	NEW 80-04-059	132L-522-060	REP 80-04-009	132P-12-150	REP-P 80-07-013
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132L-112-200	AMD 80-04-060	132P-12-006	REP 80-11-049	132P-12-180	REP 80-11-049
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132L-112-290	NEW 80-04-060	132P-12-024	REP 80-11-049	132P-12-198	REP 80-11-049
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132L-117-060	NEW-E 80-03-012	132P-12-036	REP 80-11-049	132P-12-207	REP 80-11-049
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132L-117-120	NEW-E 80-03-012	132P-12-045	REP 80-11-049	132P-12-216	REP 80-11-049
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132L-117-140	NEW-E 80-03-012	132P-12-048	REP 80-11-049	132P-12-219	REP 80-11-049
132L-117-150	NEW-E 80-03-012	132P-12-051	REP-P 80-07-013	132P-12-221	REP-P 80-07-013
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132L-117-220	NEW-E 80-03-012	132P-12-060	REP 80-11-049	132P-12-230	REP 80-11-049
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132P-116-210	NEW	80-12-026	132V-120-120	NEW-P	80-05-069	173-18-390	AMD	80-08-052
132P-116-220	NEW-P	80-06-151	132V-120-130	NEW-P	80-05-069	173-19-030	AMD	80-02-123
132P-116-220	NEW	80-12-026	132V-120-140	NEW-P	80-05-069	173-19-060	AMD	80-02-123
132P-116-230	NEW-P	80-06-151	132V-120-150	NEW-P	80-05-069	173-19-062	NEW	80-02-123
132P-116-230	NEW	80-12-026	132V-120-160	NEW-P	80-05-069	173-19-064	NEW	80-02-123
132P-116-240	NEW-P	80-06-151	132V-120-170	NEW-P	80-05-069	173-19-080	AMD	80-02-123
132P-116-240	NEW	80-12-026	132V-120-180	NEW-P	80-05-069	173-19-100	AMD	80-02-123
132P-116-250	NEW-P	80-06-151	132V-120-190	NEW-P	80-05-069	173-19-1001	NEW	80-02-123
132P-116-250	NEW	80-12-026	132V-120-200	NEW-P	80-05-069	173-19-1002	NEW	80-02-123
132P-116-260	NEW-P	80-06-151	132V-120-210	NEW-P	80-05-069	173-19-110	AMD	80-02-123
132P-116-260	NEW	80-12-026	132V-120-220	NEW-P	80-05-069	173-19-1101	NEW	80-02-123
132P-116-270	NEW-P	80-06-151	132V-120-230	NEW-P	80-05-069	173-19-1102	NEW	80-02-123
132P-116-270	NEW	80-12-026	132V-120-240	NEW-P	80-05-069	173-19-1103	NEW	80-02-123
132P-116-280	NEW-P	80-06-151	132V-120-250	NEW-P	80-05-069	173-19-1104	NEW	80-02-123
132P-116-280	NEW	80-12-026	132V-120-260	NEW-P	80-05-069	173-19-1105	NEW	80-02-123
132P-116-290	NEW-P	80-06-151	132V-120-270	NEW-P	80-05-069	173-19-120	AMD	80-02-123
132P-116-290	NEW	80-12-026	132V-120-280	NEW-P	80-05-069	173-19-120	AMD-P	80-05-128
132P-120-710	REP-P	80-07-013	132V-120-290	NEW-P	80-05-069	173-19-120	AMD	80-08-054
132P-120-710	REP	80-11-049	132V-120-300	NEW-P	80-05-069	173-19-201	NEW	80-02-123
132P-120-720	REP-P	80-07-013	132V-120-310	NEW-P	80-05-069	173-19-202	NEW	80-02-123
132P-120-720	REP	80-11-049	132V-120-320	NEW-P	80-05-069	173-19-203	NEW	80-02-123
132P-120-730	REP-P	80-07-013	132W-104-040	AMD-P	80-03-022	173-19-204	NEW	80-02-123
132P-120-730	REP	80-11-049	132W-104-040	AMD	80-05-106	173-19-205	NEW	80-02-123
132P-120-810	REP-P	80-07-013	136-11-010	NEW	80-02-105	173-19-130	AMD	80-02-123
132P-120-810	REP	80-11-049	136-11-020	NEW	80-02-105	173-19-1301	NEW	80-02-123
132P-120-815	REP-P	80-07-013	136-11-030	NEW	80-02-105	173-19-140	AMD	80-02-123

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WAC #		WSR #	WAC #		WSR #	WAC #		WSR #
173-19-1401	NEW	80-02-123	173-19-2519	NEW	80-02-123	173-19-3506	NEW	80-02-123
173-19-1402	NEW	80-02-123	173-19-2520	NEW	80-02-123	173-19-3506	AMD-P	80-15-108
173-19-1403	NEW	80-02-123	173-19-2521	NEW	80-02-123	173-19-3507	NEW	80-02-123
173-19-1404	NEW	80-02-123	173-19-2521	AMD-P	80-08-084	173-19-3508	NEW	80-02-123
173-19-1405	NEW	80-02-123	173-19-2521	AMD-P	80-09-097	173-19-3509	NEW	80-02-123
173-19-150	AMD	80-02-123	173-19-2521	AMD	80-13-031	173-19-3510	NEW	80-02-123
173-19-1501	NEW	80-02-123	173-19-2522	NEW	80-02-123	173-19-3511	NEW	80-02-123
173-19-1502	NEW	80-02-123	173-19-2523	NEW	80-02-123	173-19-3512	NEW	80-02-123
173-19-160	AMD	80-02-123	173-19-2524	NEW	80-02-123	173-19-3513	NEW	80-02-123
173-19-160	AMD-P	80-02-173	173-19-2525	NEW	80-02-123	173-19-3514	NEW	80-02-123
173-19-1601	NEW	80-02-123	173-19-260	AMD	80-02-123	173-19-3514	AMD	80-04-026
173-19-1602	NEW	80-02-123	173-19-2601	NEW	80-02-123	173-19-3515	NEW	80-02-123
173-19-1603	NEW	80-02-123	173-19-2602	NEW	80-02-123	173-19-360	AMD	80-02-123
173-19-1603	AMD	80-04-026	173-19-2603	NEW	80-02-123	173-19-360	AMD-P	80-10-057
173-19-1604	NEW	80-02-123	173-19-2604	NEW	80-02-123	173-19-360	AMD-P	80-14-040
173-19-1605	NEW	80-02-123	173-19-270	AMD	80-02-123	173-19-360	AMD-P	80-15-022
173-19-1605	AMD	80-04-026	173-19-2701	NEW	80-02-123	173-19-3601	NEW	80-02-123
173-19-170	AMD	80-02-123	173-19-2702	NEW	80-02-123	173-19-370	AMD	80-02-123
173-19-1701	NEW	80-02-123	173-19-2703	NEW	80-02-123	173-19-370	AMD-P	80-03-117
173-19-1702	NEW	80-02-123	173-19-280	AMD	80-02-123	173-19-370	AMD	80-05-053
173-19-1703	NEW	80-02-123	173-19-2801	NEW	80-02-123	173-19-370	AMD-P	80-09-098
173-19-180	AMD	80-02-123	173-19-2802	NEW	80-02-123	173-19-370	AMD	80-13-030
173-19-1801	NEW	80-02-123	173-19-2803	NEW	80-02-123	173-19-370	AMD-P	80-15-108
173-19-190	AMD	80-02-123	173-19-290	AMD	80-02-123	173-19-3701	NEW	80-02-123
173-19-1901	NEW	80-02-123	173-19-290	AMD-P	80-08-084	173-19-3701	AMD-P	80-13-062
173-19-210	AMD	80-02-123	173-19-290	AMD-P	80-09-097	173-19-3702	NEW	80-02-123
173-19-2101	NEW	80-02-123	173-19-290	AMD-P	80-13-029	173-19-3703	NEW	80-02-123
173-19-2102	NEW	80-02-123	173-19-290	AMD	80-15-023	173-19-3704	NEW	80-02-123
173-19-2103	NEW	80-02-123	173-19-2901	NEW	80-02-123	173-19-3705	NEW	80-02-123
173-19-2104	NEW	80-02-123	173-19-2902	NEW	80-02-123	173-19-3706	NEW	80-02-123
173-19-220	AMD	80-02-123	173-19-2903	NEW	80-02-123	173-19-380	AMD	80-02-123
173-19-220	AMD-P	80-04-140	173-19-2904	NEW	80-02-123	173-19-3801	NEW	80-02-123
173-19-220	AMD-P	80-06-049	173-19-2905	NEW	80-02-123	173-19-3802	NEW	80-02-123
173-19-220	AMD	80-07-007	173-19-2906	NEW	80-02-123	173-19-390	AMD	80-02-123
173-19-2201	NEW	80-02-123	173-19-2907	NEW	80-02-123	173-19-3901	NEW	80-02-123
173-19-2202	NEW	80-02-123	173-19-300	AMD	80-02-123	173-19-3902	NEW	80-02-123
173-19-2203	NEW	80-02-123	173-19-3001	NEW	80-02-123	173-19-3903	NEW	80-02-123
173-19-2204	NEW	80-02-123	173-19-3002	NEW	80-02-123	173-19-3903	AMD-P	80-04-140
173-19-2204	AMD-P	80-04-140	173-19-310	AMD	80-02-123	173-19-3903	AMD	80-06-050
173-19-2204	AMD-P	80-06-049	173-19-310	AMD-P	80-03-117	173-19-3904	NEW	80-02-123
173-19-2204	AMD-P	80-07-006	173-19-310	AMD	80-05-053	173-19-3905	NEW	80-02-123
173-19-2204	AMD-P	80-08-051	173-19-3101	NEW	80-02-123	173-19-3906	NEW	80-02-123
173-19-2204	AMD	80-10-017	173-19-320	AMD	80-02-123	173-19-3907	NEW	80-02-123
173-19-2205	NEW	80-02-123	173-19-3201	NEW	80-02-123	173-19-3908	NEW	80-02-123
173-19-2206	NEW	80-02-123	173-19-3202	NEW	80-02-123	173-19-3909	NEW	80-02-123
173-19-2207	NEW	80-02-123	173-19-3203	NEW	80-02-123	173-19-3910	NEW	80-02-123
173-19-2208	NEW	80-02-123	173-19-3204	NEW	80-02-123	173-19-3911	NEW	80-02-123
173-19-230	AMD	80-02-123	173-19-3205	NEW	80-02-123	173-19-3912	NEW	80-02-123
173-19-2301	NEW	80-02-123	173-19-3206	NEW	80-02-123	173-19-3913	NEW	80-02-123
173-19-2302	NEW	80-02-123	173-19-3207	NEW	80-02-123	173-19-3913	AMD-P	80-04-140
173-19-2303	NEW	80-02-123	173-19-3208	NEW	80-02-123	173-19-3913	AMD	80-06-050
173-19-240	AMD	80-02-123	173-19-3209	NEW	80-02-123	173-19-3914	NEW	80-02-123
173-19-2401	NEW	80-02-123	173-19-3210	NEW	80-02-123	173-19-3915	NEW	80-02-123
173-19-250	AMD	80-02-123	173-19-330	AMD	80-02-123	173-19-3916	NEW	80-02-123
173-19-2501	NEW	80-02-123	173-19-330	AMD-P	80-05-128	173-19-400	AMD	80-02-123
173-19-2502	NEW	80-02-123	173-19-330	AMD	80-08-054	173-19-4001	NEW	80-02-123
173-19-2503	NEW	80-02-123	173-19-3301	NEW	80-02-123	173-19-4002	NEW	80-02-123
173-19-2504	NEW	80-02-123	173-19-3302	NEW	80-02-123	173-19-4003	NEW	80-02-123
173-19-2505	NEW	80-02-123	173-19-3303	NEW	80-02-123	173-19-4004	NEW	80-02-123
173-19-2506	NEW	80-02-123	173-19-3304	NEW	80-02-123	173-19-4005	NEW	80-02-123
173-19-2507	NEW	80-02-123	173-19-340	AMD	80-02-123	173-19-4006	NEW	80-02-123
173-19-2508	NEW	80-02-123	173-19-3401	NEW	80-02-123	173-19-410	AMD	80-02-123
173-19-2509	NEW	80-02-123	173-19-3402	NEW	80-02-123	173-19-4101	NEW	80-02-123
173-19-2510	NEW	80-02-123	173-19-3403	NEW	80-02-123	173-19-4102	NEW	80-02-123
173-19-2511	NEW	80-02-123	173-19-3404	NEW	80-02-123	173-19-420	AMD	80-02-123
173-19-2511	AMD-P	80-15-108	173-19-3405	NEW	80-02-123	173-19-4201	NEW	80-02-123
173-19-2512	NEW	80-02-123	173-19-350	AMD	80-02-123	173-19-4202	NEW	80-02-123
173-19-2513	NEW	80-02-123	173-19-350	AMD-P	80-02-173	173-19-4203	NEW	80-02-123
173-19-2514	NEW	80-02-123	173-19-3501	NEW	80-02-123	173-19-4204	NEW	80-02-123
173-19-2515	NEW	80-02-123	173-19-3502	NEW	80-02-123	173-19-4205	NEW	80-02-123
173-19-2515	AMD-P	80-15-108	173-19-3503	NEW	80-02-123	173-19-4206	NEW	80-02-123
173-19-2516	NEW	80-02-123	173-19-3503	AMD-P	80-15-101	173-19-430	AMD	80-02-123
173-19-2517	NEW	80-02-123	173-19-3504	NEW	80-02-123	173-19-430	AMD-P	80-02-173
173-19-2518	NEW	80-02-123	173-19-3505	NEW	80-02-123	173-19-430	AMD	80-04-026

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WAC #		WSR #	WAC #		WSR #	WAC #		WSR #
173-19-4301	NEW	80-02-123	173-400-030	AMD-P	80-05-129	173-405-101	AMD-P	80-06-162
173-19-440	AMD	80-02-123	173-400-030	AMD	80-11-059	173-405-101	AMD	80-11-060
173-19-4401	NEW	80-02-123	173-400-040	AMD-P	80-05-129	173-410-011	REP-P	80-06-163
173-19-4402	NEW	80-02-123	173-400-040	AMD	80-11-059	173-410-011	REP	80-11-061
173-19-450	AMD	80-02-123	173-400-050	AMD-P	80-05-129	173-410-012	NEW-P	80-06-163
173-19-4501	NEW	80-02-123	173-400-050	AMD	80-11-059	173-410-012	NEW	80-11-061
173-19-4502	NEW	80-02-123	173-400-060	AMD-P	80-05-129	173-410-021	AMD-E	80-02-013
173-19-4502	AMD-P	80-05-128	173-400-060	AMD	80-11-059	173-410-021	AMD-P	80-02-096
173-19-4502	AMD	80-08-054	173-400-070	AMD-P	80-05-129	173-410-021	AMD	80-04-050
173-19-4503	NEW	80-02-123	173-400-070	AMD	80-11-059	173-410-021	AMD-P	80-06-163
173-19-4504	NEW	80-02-123	173-400-075	AMD-P	80-05-129	173-410-021	AMD	80-11-061
173-19-4505	NEW	80-02-123	173-400-075	AMD	80-11-059	173-410-031	REP-P	80-06-163
173-19-4506	NEW	80-02-123	173-400-080	AMD-P	80-05-129	173-410-031	REP	80-11-061
173-19-4507	NEW	80-02-123	173-400-080	AMD	80-11-059	173-410-033	NEW-E	80-02-013
173-19-460	AMD	80-02-123	173-400-090	AMD-P	80-05-129	173-410-036	REP-P	80-06-163
173-19-4601	NEW	80-02-123	173-400-090	AMD	80-11-059	173-410-036	REP	80-11-061
173-19-4602	NEW	80-02-123	173-400-100	AMD-P	80-05-129	173-410-040	NEW-P	80-06-163
173-19-4603	NEW	80-02-123	173-400-100	AMD	80-11-059	173-410-040	NEW	80-11-061
173-19-4604	NEW	80-02-123	173-400-110	AMD-P	80-05-129	173-410-041	REP-P	80-06-163
173-19-4605	NEW	80-02-123	173-400-110	AMD	80-11-059	173-410-041	REP	80-11-061
173-19-4606	NEW	80-02-123	173-400-115	AMD-P	80-05-129	173-410-051	REP-P	80-06-163
173-19-4607	NEW	80-02-123	173-400-115	AMD	80-11-059	173-410-051	REP	80-11-061
173-19-470	AMD	80-02-123	173-400-120	AMD-P	80-05-129	173-410-061	REP-P	80-06-163
173-19-4701	NEW	80-02-123	173-400-120	AMD	80-11-059	173-410-061	REP	80-11-061
173-19-4702	NEW	80-02-123	173-402-010	NEW-P	80-05-127	173-410-062	NEW-P	80-06-163
173-19-4703	NEW	80-02-123	173-402-010	NEW	80-08-024	173-410-062	NEW	80-11-061
173-19-4704	NEW	80-02-123	173-402-020	NEW-P	80-05-127	173-410-066	AMD-E	80-02-013
173-19-4705	NEW	80-02-123	173-402-020	NEW	80-08-024	173-410-066	REP-P	80-02-096
173-19-4706	NEW	80-02-123	173-405-011	REP-P	80-06-162	173-410-066	REP	80-04-050
173-19-4707	NEW	80-02-123	173-405-011	REP	80-11-060	173-410-067	NEW-P	80-02-096
173-20-044	NEW-P	80-05-078	173-405-012	NEW-P	80-06-162	173-410-067	NEW	80-04-050
173-20-044	NEW	80-08-053	173-405-012	NEW	80-11-060	173-410-067	AMD-P	80-06-163
173-20-046	NEW-P	80-05-078	173-405-021	AMD-E	80-02-012	173-410-067	AMD	80-11-061
173-20-046	NEW	80-08-053	173-405-021	AMD-P	80-02-095	173-410-071	NEW-E	80-02-013
173-20-580	AMD-P	80-05-078	173-405-021	AMD	80-04-049	173-410-071	NEW-P	80-02-096
173-20-580	AMD	80-08-053	173-405-021	AMD-P	80-06-162	173-410-071	NEW	80-04-050
173-20-600	AMD-P	80-05-078	173-405-021	AMD	80-11-060	173-410-071	AMD-P	80-06-163
173-20-600	AMD	80-08-053	173-405-031	REP-P	80-06-162	173-410-071	AMD	80-11-061
173-22-030	AMD-P	80-05-079	173-405-031	REP	80-11-060	173-410-081	REP-E	80-02-013
173-22-030	AMD	80-08-086	173-405-033	NEW-E	80-02-012	173-410-081	REP-P	80-02-096
173-22-040	AMD-P	80-05-079	173-405-033	NEW-P	80-02-095	173-410-081	REP	80-04-050
173-22-040	AMD	80-08-086	173-405-033	NEW	80-04-049	173-410-086	NEW-E	80-02-013
173-22-050	AMD-P	80-05-079	173-405-033	AMD-P	80-06-162	173-410-086	NEW-P	80-02-096
173-22-050	AMD	80-08-086	173-405-033	AMD	80-11-060	173-410-086	NEW	80-04-050
173-22-055	AMD-P	80-05-079	173-405-036	REP-P	80-06-162	173-410-086	AMD-P	80-06-163
173-22-055	AMD	80-08-086	173-405-036	REP	80-11-060	173-410-086	AMD	80-11-061
173-24	AMD-P	80-12-036	173-405-040	NEW-P	80-06-162	173-410-090	NEW-P	80-06-163
173-24-060	AMD-P	80-08-085	173-405-040	NEW	80-11-060	173-410-090	NEW	80-11-061
173-24-090	AMD-P	80-08-085	173-405-071	AMD-E	80-02-012	173-410-091	AMD-P	80-06-163
173-24-090	AMD	80-15-020	173-405-071	REP-P	80-06-162	173-410-091	AMD	80-11-061
173-24-125	NEW-P	80-08-085	173-405-071	REP	80-11-060	173-415-010	NEW-P	80-06-164
173-24-125	NEW	80-15-020	173-405-072	NEW-P	80-06-162	173-415-010	NEW	80-11-028
173-62	AMD-P	80-09-051	173-405-072	NEW	80-11-060	173-415-020	NEW-P	80-06-164
173-62	AMD-P	80-10-016	173-405-076	REP-E	80-02-012	173-415-020	NEW	80-11-028
173-62	AMD-P	80-12-058	173-405-076	REP-P	80-02-095	173-415-030	NEW-P	80-06-164
173-62	AMD	80-14-041	173-405-076	REP	80-04-049	173-415-030	NEW	80-11-028
173-62-010	AMD-P	80-06-165	173-405-077	NEW-P	80-02-095	173-415-040	NEW-P	80-06-164
173-62-010	AMD	80-14-041	173-405-077	NEW	80-04-049	173-415-040	NEW	80-11-028
173-62-020	AMD-P	80-06-165	173-405-077	AMD-P	80-06-162	173-415-050	NEW-P	80-06-164
173-62-020	AMD	80-14-041	173-405-077	AMD	80-11-060	173-415-050	NEW	80-11-028
173-62-030	AMD-P	80-06-165	173-405-078	NEW-P	80-02-095	173-415-060	NEW-P	80-06-164
173-62-030	AMD	80-14-041	173-405-078	NEW	80-04-049	173-415-060	NEW	80-11-028
173-62-040	AMD-P	80-06-165	173-405-078	AMD-P	80-06-162	173-415-070	NEW-P	80-06-164
173-62-060	AMD-P	80-06-165	173-405-078	AMD	80-11-060	173-415-070	NEW	80-11-028
173-62-060	AMD	80-14-041	173-405-081	REP-E	80-02-012	173-415-080	NEW-P	80-06-164
173-134-150	REP	80-02-025	173-405-081	REP-P	80-02-095	173-415-080	NEW	80-11-028
173-164-050	AMD-E	80-06-160	173-405-081	REP	80-04-049	173-415-090	NEW-P	80-06-164
173-164-050	AMD-P	80-06-161	173-405-086	NEW-E	80-02-012	173-415-090	NEW	80-11-028
173-164-050	AMD	80-09-052	173-405-086	NEW-P	80-02-095	173-422-010	NEW	80-03-070
173-255-040	AMD-P	80-05-125	173-405-086	NEW	80-04-049	173-422-020	NEW	80-03-070
173-255-040	AMD	80-08-050	173-405-086	AMD-P	80-06-162	173-422-030	NEW	80-03-070
173-400	AMD-P	80-08-023	173-405-086	AMD	80-11-060	173-422-040	NEW	80-03-070
173-400-020	AMD-P	80-05-129	173-405-090	NEW-P	80-06-162	173-422-050	NEW	80-03-070
173-400-020	AMD	80-11-059	173-405-090	NEW	80-11-060	173-422-060	NEW	80-03-070

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WAC #	WSR #	WAC #	WSR #	WAC #	WSR #			
173-422-070	NEW	80-03-070	173-510-070	NEW	80-04-047	173-563-010	NEW-P	80-01-113
173-422-080	NEW	80-03-070	173-510-080	NEW	80-04-047	173-563-010	NEW	80-08-021
173-422-090	NEW	80-03-070	173-510-090	NEW	80-04-047	173-563-020	NEW-P	80-01-113
173-422-100	NEW	80-03-070	173-510-100	NEW	80-04-047	173-563-020	NEW	80-08-021
173-422-110	NEW	80-03-070	173-511-010	NEW-P	80-15-104	173-563-030	NEW-P	80-01-113
173-422-120	NEW	80-03-070	173-511-020	NEW-P	80-15-104	173-563-030	NEW	80-08-021
173-422-130	NEW	80-03-070	173-511-030	NEW-P	80-15-104	173-563-040	NEW-P	80-01-113
173-422-140	NEW	80-03-070	173-511-040	NEW-P	80-15-104	173-563-040	NEW	80-08-021
173-422-150	NEW	80-03-070	173-511-050	NEW-P	80-15-104	173-563-050	NEW-P	80-01-113
173-422-160	NEW	80-03-070	173-511-060	NEW-P	80-15-104	173-563-050	NEW	80-08-021
173-422-170	NEW	80-03-070	173-511-070	NEW-P	80-15-104	173-563-060	NEW-P	80-01-113
173-422-180	NEW	80-03-070	173-511-080	NEW-P	80-15-104	173-563-060	NEW	80-08-021
173-475-010	NEW-P	80-01-114	173-511-090	NEW-P	80-15-104	173-563-070	NEW-P	80-01-113
173-475-010	NEW	80-03-071	173-511-100	NEW-P	80-15-104	173-563-070	NEW	80-08-021
173-475-020	NEW-P	80-01-114	173-513-010	NEW-P	80-04-139	173-563-080	NEW-P	80-01-113
173-475-020	NEW	80-03-071	173-513-010	NEW	80-08-019	173-563-080	NEW	80-08-021
173-475-030	NEW-P	80-01-114	173-513-020	NEW-P	80-04-139	173-563-090	NEW-P	80-01-113
173-475-030	NEW	80-03-071	173-513-020	NEW	80-08-019	173-563-090	NEW	80-08-021
173-475-040	NEW-P	80-01-114	173-513-030	NEW-P	80-04-139	173-563-100	NEW	80-08-021
173-475-040	NEW	80-03-071	173-513-030	NEW	80-08-019	173-563-900	NEW-P	80-01-113
173-475-050	NEW-P	80-01-114	173-513-040	NEW-P	80-04-139	173-563-900	NEW	80-08-021
173-475-050	NEW	80-03-071	173-513-040	NEW	80-08-019	173-563-901	NEW-P	80-01-113
173-490-010	AMD-P	80-06-166	173-513-050	NEW-P	80-04-139	174-112-465	NEW-P	80-03-086
173-490-010	AMD	80-11-062	173-513-050	NEW	80-08-019	174-116-115	AMD-P	80-03-086
173-490-020	AMD-P	80-06-166	173-513-060	NEW-P	80-04-139	174-116-115	AMD	80-06-034
173-490-020	AMD	80-11-062	173-513-060	NEW	80-08-019	174-162-300	AMD-P	80-14-054
173-490-025	AMD-P	80-06-166	173-513-070	NEW-P	80-04-139	174-162-330	NEW-P	80-03-086
173-490-025	AMD	80-11-062	173-513-070	NEW	80-08-019	174-162-330	NEW	80-05-067
173-490-030	AMD-P	80-06-166	173-513-080	NEW-P	80-04-139	180-10-001	NEW-P	80-04-097
173-490-030	AMD	80-11-062	173-513-080	NEW	80-08-019	180-10-001	NEW	80-06-092
173-490-040	AMD-P	80-06-166	173-513-090	NEW-P	80-04-139	180-10-003	NEW-P	80-04-097
173-490-040	AMD	80-11-062	173-513-090	NEW	80-08-019	180-10-003	NEW	80-06-092
173-490-070	AMD-P	80-06-166	173-513-100	NEW-P	80-04-139	180-10-005	NEW-P	80-04-097
173-490-070	AMD	80-11-062	173-513-100	NEW	80-08-019	180-10-005	NEW	80-06-092
173-490-071	NEW-P	80-06-166	173-515-010	NEW-P	80-15-105	180-10-010	NEW-P	80-04-097
173-490-071	NEW	80-11-062	173-515-020	NEW-P	80-15-105	180-10-010	NEW	80-06-092
173-490-080	AMD-P	80-06-166	173-515-030	NEW-P	80-15-105	180-16-220	AMD-P	80-04-098
173-490-080	AMD	80-11-062	173-515-040	NEW-P	80-15-105	180-16-220	AMD	80-06-093
173-490-150	AMD-P	80-06-166	173-515-050	NEW-P	80-15-105	180-16-225	AMD-P	80-04-098
173-490-150	AMD	80-11-062	173-515-060	NEW-P	80-15-105	180-16-225	AMD	80-06-093
173-490-200	NEW-P	80-06-166	173-515-070	NEW-P	80-15-105	180-20-215	AMD-E	80-06-091
173-490-200	NEW	80-11-062	173-515-080	NEW-P	80-15-105	180-20-215	AMD-P	80-06-097
173-490-201	NEW-P	80-06-166	173-515-090	NEW-P	80-15-105	180-20-220	AMD-E	80-06-091
173-490-201	NEW	80-11-062	173-515-100	NEW-P	80-15-105	180-20-220	AMD-P	80-06-097
173-490-202	NEW-P	80-06-166	173-531	REP-P	80-05-052	180-20-225	AMD-E	80-06-091
173-490-202	NEW	80-11-062	173-531-010	REP-P	80-01-112	180-20-225	AMD-P	80-06-097
173-490-203	NEW-P	80-06-166	173-531-010	REP	80-08-020	180-20-235	NEW-E	80-06-091
173-490-203	NEW	80-11-062	173-531-020	REP-P	80-01-112	180-20-235	NEW-P	80-06-097
173-490-204	NEW-P	80-06-166	173-531-020	REP	80-08-020	180-22-255	AMD-P	80-15-093
173-490-204	NEW	80-11-062	173-531-030	REP-P	80-01-112	180-22-270	AMD-P	80-15-093
173-490-205	NEW-P	80-06-166	173-531-030	REP	80-08-020	180-22-280	AMD-P	80-15-093
173-490-205	NEW	80-11-062	173-531-040	REP-P	80-01-112	180-30-071	NEW-P	80-04-099
173-490-206	NEW-P	80-06-166	173-531-040	REP	80-08-020	180-30-071	NEW	80-07-001
173-490-206	NEW	80-11-062	173-531-050	REP-P	80-01-112	180-30-100	AMD-P	80-04-099
173-490-207	NEW-P	80-06-166	173-531-050	REP	80-08-020	180-30-100	AMD	80-07-001
173-490-207	NEW	80-11-062	173-531-060	REP-P	80-01-112	180-30-116	NEW-P	80-04-099
173-509	NEW-P	80-05-076	173-531-060	REP	80-08-020	180-30-116	NEW	80-07-001
173-509-010	NEW	80-07-005	173-531-070	REP-P	80-01-112	180-30-800	NEW	80-02-145
173-509-015	NEW	80-07-005	173-531-070	REP	80-08-020	180-30-805	NEW	80-02-145
173-509-020	NEW	80-07-005	173-531A-010	NEW-P	80-05-126	180-30-805	AMD-E	80-04-102
173-509-030	NEW	80-07-005	173-531A-010	NEW	80-08-022	180-30-805	AMD-P	80-04-099
173-509-040	NEW	80-07-005	173-531A-020	NEW-P	80-05-126	180-30-805	AMD	80-07-001
173-509-050	NEW	80-07-005	173-531A-020	NEW	80-08-022	180-30-807	NEW	80-02-145
173-509-060	NEW	80-07-005	173-531A-030	NEW-P	80-05-126	180-30-807	AMD-E	80-04-102
173-509-070	NEW	80-07-005	173-531A-030	NEW	80-08-022	180-30-807	AMD-P	80-04-099
173-509-080	NEW	80-07-005	173-531A-040	NEW-P	80-05-126	180-30-807	AMD	80-07-001
173-509-090	NEW	80-07-005	173-531A-040	NEW	80-08-022	180-30-810	NEW	80-02-145
173-509-100	NEW	80-07-005	173-531A-050	NEW-P	80-05-126	180-30-810	AMD-E	80-04-102
173-510-010	NEW	80-04-047	173-531A-050	NEW	80-08-022	180-30-810	AMD-P	80-04-099
173-510-020	NEW	80-04-047	173-531A-060	NEW-P	80-05-126	180-30-810	AMD	80-07-001
173-510-030	NEW	80-04-047	173-531A-060	NEW	80-08-022	180-30-815	NEW	80-02-145
173-510-040	NEW	80-04-047	173-531A-070	NEW-P	80-05-126	180-30-820	NEW	80-02-145
173-510-050	NEW	80-04-047	173-531A-070	NEW	80-08-022	180-30-825	NEW	80-02-145
173-510-060	NEW	80-04-047	173-563	NEW-P	80-05-051	180-30-825	AMD-P	80-04-099

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WAC #	WSR #	WAC #	WSR #	WAC #	WSR #
180-30-825	AMD-E 80-04-102	182-12-122	AMD 80-05-016	204-66-060	AMD-P 80-04-080
180-30-825	AMD 80-07-001	182-12-130	AMD-P 80-02-148	204-66-060	AMD-E 80-05-110
180-30-830	NEW 80-02-145	182-12-130	AMD-E 80-03-007	204-66-060	AMD 80-10-006
180-30-830	AMD-P 80-04-099	182-12-130	AMD 80-05-016	204-66-160	AMD-P 80-04-080
180-30-830	AMD-E 80-04-102	182-12-132	NEW-P 80-02-148	204-66-160	AMD-E 80-05-110
180-30-830	AMD 80-07-001	182-12-132	NEW-E 80-03-007	204-66-160	AMD 80-10-006
180-30-835	NEW 80-02-145	182-12-132	NEW 80-05-016	204-66-170	AMD-P 80-04-080
180-30-835	AMD-P 80-04-099	182-12-135	REP-P 80-02-148	204-66-170	AMD-E 80-05-110
180-30-835	AMD-E 80-04-102	182-12-135	REP-E 80-03-007	204-66-170	AMD 80-10-006
180-30-835	REP 80-07-001	182-12-135	REP 80-05-016	204-70	NEW-P 80-02-092
180-30-840	NEW 80-02-145	182-12-190	AMD-P 80-02-148	204-70-010	NEW 80-03-069
180-30-840	AMD-P 80-04-099	182-12-190	AMD-E 80-03-007	204-70-020	NEW 80-03-069
180-30-840	AMD-E 80-04-102	182-12-190	AMD 80-05-016	204-70-030	NEW 80-03-069
180-30-840	REP 80-07-001	192-12-041	NEW 80-02-034	204-70-040	NEW 80-03-069
180-30-845	NEW 80-02-145	192-12-041	AMD-P 80-08-026	204-70-050	NEW 80-03-069
180-30-845	AMD-P 80-04-099	192-12-041	AMD 80-10-052	204-70-060	NEW 80-03-069
180-30-845	AMD-E 80-04-102	192-12-042	NEW 80-02-034	204-70-070	NEW 80-03-069
180-30-845	AMD 80-07-001	192-12-182	AMD-P 80-08-026	204-70-080	NEW 80-03-069
180-40-225	AMD-P 80-07-043	192-12-182	AMD 80-10-052	204-70-090	NEW 80-03-069
180-40-225	AMD 80-10-030	192-12-184	AMD-P 80-08-026	204-70-100	NEW 80-03-069
180-40-230	AMD-P 80-07-043	192-12-184	AMD 80-10-052	204-70-120	NEW 80-03-069
180-40-230	AMD 80-10-030	192-15-150	AMD-P 80-05-047	204-70-99001	NEW 80-03-069
180-43-005	NEW 80-02-146	192-15-150	AMD 80-07-026	204-70-99002	NEW 80-03-069
180-43-010	NEW 80-02-146	192-16-009	AMD-E 80-07-027	204-70-99003	NEW 80-03-069
180-43-015	NEW 80-02-146	192-16-009	AMD-P 80-08-026	204-70-99004	NEW 80-03-069
180-56-031	AMD 80-02-147	192-16-009	AMD 80-10-052	204-70-99005	NEW 80-03-069
180-56-031	AMD-P 80-12-019	192-16-013	AMD-E 80-07-027	204-72	NEW-P 80-10-005
180-56-031	AMD 80-15-062	192-16-013	AMD-P 80-08-026	204-72-010	NEW-P 80-06-081
180-75-030	AMD-P 80-04-100	192-16-013	AMD 80-10-052	204-72-020	NEW-P 80-06-081
180-75-030	AMD 80-06-129	192-16-015	AMD-E 80-07-027	204-72-030	NEW-P 80-06-081
180-75-040	AMD-P 80-04-100	192-16-015	AMD-P 80-08-026	204-72-040	NEW-P 80-06-081
180-75-040	AMD 80-06-129	192-16-015	AMD 80-10-052	204-72-050	NEW-P 80-06-081
180-75-045	AMD-P 80-04-100	192-16-023	AMD-E 80-07-027	204-72-060	NEW-P 80-06-081
180-75-045	AMD 80-06-129	192-16-023	AMD-P 80-08-026	204-74-010	NEW-P 80-06-048
180-75-050	AMD-P 80-04-100	192-16-023	AMD 80-10-052	204-74-010	NEW 80-10-006
180-75-050	AMD 80-06-129	192-16-025	NEW-E 80-07-027	204-74-020	NEW-P 80-06-048
180-75-061	NEW-P 80-04-100	192-16-025	NEW-P 80-08-026	204-74-020	NEW 80-10-006
180-75-061	NEW 80-06-129	192-16-025	NEW 80-10-052	204-74-030	NEW-P 80-06-048
180-75-065	AMD-P 80-04-100	192-18-010	NEW-P 80-05-049	204-74-030	NEW 80-10-006
180-75-065	AMD 80-06-129	192-18-010	NEW 80-07-026	204-74-040	NEW-P 80-06-048
180-75-070	AMD-P 80-04-100	192-18-020	NEW-P 80-05-049	204-74-040	NEW 80-10-006
180-75-070	AMD 80-06-129	192-18-020	NEW 80-07-026	204-74-050	NEW-P 80-06-048
180-75-075	AMD-P 80-04-100	192-18-030	NEW-P 80-05-049	204-74-050	NEW 80-10-006
180-75-075	AMD 80-06-129	192-18-030	NEW 80-07-026	204-74-060	NEW-P 80-06-048
180-75-085	AMD-P 80-04-100	192-18-040	NEW-P 80-05-049	204-74-060	NEW 80-10-006
180-75-090	AMD-P 80-04-100	192-18-040	NEW 80-07-026	204-74-070	NEW-P 80-06-048
180-75-090	AMD 80-06-129	192-18-050	NEW-P 80-05-049	204-74-070	NEW 80-10-006
180-75-100	AMD-P 80-04-100	192-18-050	NEW 80-07-026	204-74-080	NEW-P 80-06-048
180-75-100	AMD 80-06-129	192-18-060	NEW-P 80-05-049	204-74-080	NEW 80-10-006
180-79-010	AMD-P 80-04-101	192-18-060	NEW 80-07-026	204-76-010	NEW-E 80-05-110
180-79-010	AMD 80-06-130	192-18-070	NEW-P 80-05-049	204-76-010	NEW-P 80-06-048
180-79-045	AMD-P 80-04-101	192-18-070	NEW 80-07-026	204-76-010	NEW 80-10-006
180-79-045	AMD 80-06-130	192-20-010	NEW-P 80-05-048	204-76-020	NEW-E 80-05-110
180-79-060	AMD-P 80-04-101	192-20-010	NEW 80-07-026	204-76-020	NEW-P 80-06-048
180-79-060	AMD 80-06-130	194-14-030	AMD-P 80-15-028	204-76-020	NEW 80-10-006
180-79-065	AMD-P 80-04-101	204-38-010	NEW-P 80-04-080	204-76-030	NEW-E 80-05-110
180-79-065	AMD 80-06-130	204-38-010	NEW-E 80-05-110	204-76-030	NEW-P 80-06-048
180-79-100	AMD-P 80-04-101	204-38-010	NEW 80-06-083	204-76-030	NEW 80-10-006
180-79-100	AMD 80-06-130	204-38-020	NEW-P 80-04-080	204-76-040	NEW-E 80-05-110
180-79-115	AMD-P 80-04-101	204-38-020	NEW-E 80-05-110	204-76-040	NEW-P 80-06-048
180-79-115	AMD 80-06-130	204-38-020	NEW 80-06-083	204-76-040	NEW 80-10-006
180-79-120	AMD-P 80-04-101	204-38-030	NEW-P 80-04-080	204-76-050	NEW-E 80-05-110
180-79-120	AMD 80-06-130	204-38-030	NEW-E 80-05-110	204-76-050	NEW-P 80-06-048
180-79-125	AMD-P 80-04-101	204-38-030	NEW 80-06-083	204-76-050	NEW 80-10-006
180-79-125	AMD 80-06-130	204-38-040	NEW-P 80-04-080	204-76-060	NEW-E 80-05-110
180-79-245	AMD-P 80-04-101	204-38-040	NEW-E 80-05-110	204-76-060	NEW-P 80-06-048
180-79-245	AMD 80-06-130	204-38-040	NEW 80-06-083	204-76-060	NEW 80-10-006
180-79-250	AMD-P 80-04-101	204-38-050	NEW-P 80-04-080	204-76-070	NEW-E 80-05-110
180-79-250	AMD 80-06-130	204-38-050	NEW-E 80-05-110	204-76-070	NEW-P 80-06-048
182-12-115	AMD-P 80-02-148	204-38-050	NEW 80-06-083	204-76-070	NEW 80-10-006
182-12-115	AMD-E 80-03-007	204-64	AMD-P 80-10-005	204-76-99001	NEW-E 80-05-110
182-12-115	AMD 80-05-016	204-64-080	AMD-P 80-06-081	204-76-99001	NEW-P 80-06-048
182-12-122	AMD-P 80-02-148	204-66	AMD-P 80-06-082	204-76-99001	NEW 80-10-006
182-12-122	AMD-E 80-03-007	204-66-060	AMD 80-02-093	204-76-99002	NEW-E 80-05-110

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WAC #	WSR #	WAC #	WSR #	WAC #	WSR #
204-76-99002	NEW-P 80-06-048	212-44-045	AMD-P 80-10-048	220-20-020	AMD 80-09-072
204-76-99002	NEW 80-10-006	212-44-045	AMD 80-15-077	220-20-025	AMD-P 80-08-079
204-76-99003	NEW-E 80-05-110	212-44-050	AMD-P 80-10-048	220-20-025	AMD 80-13-064
204-76-99003	NEW-P 80-06-048	212-44-050	AMD 80-15-077	220-20-02500A	NEW-E 80-06-127
204-76-99003	NEW 80-10-006	212-44-055	AMD-P 80-10-048	220-20-035	NEW-P 80-09-109
204-76-99004	NEW-E 80-05-110	212-44-055	AMD 80-15-077	220-20-035	NEW-W 80-13-025
204-76-99004	NEW-P 80-06-048	212-44-060	REP-P 80-10-048	220-20-038	NEW-P 80-08-079
204-76-99004	NEW 80-10-006	212-44-060	REP 80-15-077	220-20-038	NEW 80-13-064
204-990	REP 80-03-068	212-44-065	AMD-P 80-10-048	220-22-020	AMD-P 80-06-138
	(PART)	212-44-065	AMD 80-15-077	220-22-020	AMD 80-09-072
212-42-001	NEW-P 80-10-047	212-44-067	NEW-P 80-10-048	220-22-030	AMD-P 80-02-177
212-42-001	NEW 80-15-090	212-44-067	NEW 80-15-077	220-22-030	AMD 80-04-070
212-42-005	NEW-P 80-10-047	212-44-069	NEW-P 80-10-048	220-22-03000B	NEW-E 80-13-034
212-42-005	NEW 80-15-090	212-44-069	NEW 80-15-077	220-22-410	AMD-P 80-05-082
212-42-010	NEW-P 80-10-047	212-44-070	REP-P 80-10-048	220-22-410	AMD 80-07-017
212-42-010	NEW 80-15-090	212-44-070	REP 80-15-077	220-24-01000C	NEW-E 80-07-016
212-42-015	NEW-P 80-10-047	212-44-072	NEW-P 80-10-048	220-24-01000C	REP-E 80-07-042
212-42-015	NEW 80-15-090	212-44-072	NEW 80-15-077	220-24-01000D	NEW-E 80-07-042
212-42-020	NEW-P 80-10-047	212-44-073	NEW-P 80-10-048	220-24-01000D	REP-E 80-12-007
212-42-020	NEW 80-15-090	212-44-073	NEW 80-15-077	220-24-02000E	NEW-E 80-07-016
212-42-025	NEW-P 80-10-047	212-44-075	REP-P 80-10-048	220-24-02000E	REP-E 80-12-007
212-42-025	NEW 80-15-090	212-44-075	REP 80-15-077	220-24-02000F	NEW-E 80-12-007
212-42-030	NEW-P 80-10-047	212-44-077	NEW-P 80-10-048	220-24-02000F	REP-E 80-12-015
212-42-030	NEW 80-15-090	212-44-077	NEW 80-15-077	220-24-02000G	NEW-E 80-12-015
212-42-035	NEW-P 80-10-047	212-44-080	AMD-P 80-10-048	220-28-003FOA	NEW-E 80-08-009
212-42-035	NEW 80-15-090	212-44-080	AMD 80-15-077	220-28-003FOB	NEW-E 80-14-013
212-42-040	NEW-P 80-10-047	212-44-085	REP-P 80-10-048	220-28-003FOB	REP-E 80-15-060
212-42-040	NEW 80-15-090	212-44-085	REP 80-15-077	220-28-003FOC	NEW-E 80-15-060
212-42-045	NEW-P 80-10-047	212-44-090	AMD-P 80-10-048	220-28-003G0A	NEW-E 80-08-040
212-42-045	NEW 80-15-090	212-44-090	AMD 80-15-077	220-28-003G0A	REP-E 80-09-071
212-42-050	NEW-P 80-10-047	212-44-095	REP-P 80-10-048	220-28-003G0B	NEW-E 80-15-060
212-42-050	NEW 80-15-090	212-44-095	REP 80-15-077	220-28-00400G	NEW-E 80-04-078
212-42-055	NEW-P 80-10-047	212-44-105	AMD-P 80-10-048	220-28-00400G	REP-E 80-05-061
212-42-055	NEW 80-15-090	212-44-105	AMD 80-15-077	220-28-00400H	NEW-E 80-05-061
212-42-060	NEW-P 80-10-047	212-52	AMD-P 80-13-009	220-28-00400H	REP-E 80-05-075
212-42-060	NEW 80-15-090	212-52-001	AMD-P 80-09-074	220-28-00400I	NEW-E 80-05-075
212-42-065	NEW-P 80-10-047	212-52-005	AMD-P 80-09-074	220-28-00400J	NEW-E 80-11-070
212-42-065	NEW 80-15-090	212-52-010	AMD-P 80-09-074	220-28-004B0P	NEW-E 80-05-019
212-42-070	NEW-P 80-10-047	212-52-015	REP-P 80-09-074	220-28-004B0P	REP-E 80-06-121
212-42-070	NEW 80-15-090	212-52-020	REP-P 80-09-074	220-28-004B0Q	NEW-E 80-06-121
212-42-075	NEW-P 80-10-047	212-52-025	AMD-P 80-09-074	220-28-004B0Q	REP-E 80-07-041
212-42-075	NEW 80-15-090	212-52-027	NEW-P 80-09-074	220-28-004B0R	NEW-E 80-07-041
212-42-080	NEW-P 80-10-047	212-52-035	REP-P 80-09-074	220-28-00500R	NEW-E 80-05-019
212-42-080	NEW 80-15-090	212-52-037	NEW-P 80-09-074	220-28-00500R	REP-E 80-06-121
212-42-085	NEW-P 80-10-047	212-52-040	AMD-P 80-09-074	220-28-00500S	NEW-E 80-06-121
212-42-085	NEW 80-15-090	212-52-045	AMD-P 80-09-074	220-28-00500S	REP-E 80-07-041
212-42-090	NEW-P 80-10-047	212-52-050	AMD-P 80-09-074	220-28-00500T	NEW-E 80-07-041
212-42-090	NEW 80-15-090	212-52-055	AMD-P 80-09-074	220-28-00500U	NEW-E 80-15-009
212-42-095	NEW-P 80-10-047	212-52-065	AMD-P 80-09-074	220-28-005F0K	NEW-E 80-09-061
212-42-095	NEW 80-15-090	212-52-070	AMD-P 80-09-074	220-28-005F0K	REP-E 80-14-004
212-42-100	NEW-P 80-10-047	212-52-075	AMD-P 80-09-074	220-28-005F0L	NEW-E 80-14-004
212-42-100	NEW 80-15-090	212-52-080	AMD-P 80-09-074	220-28-005F0L	REP-E 80-14-019
212-42-105	NEW-P 80-10-047	212-52-090	AMD-P 80-09-074	220-28-005F0M	NEW-E 80-14-019
212-42-105	NEW 80-15-090	212-52-095	AMD-P 80-09-074	220-28-005F0M	REP-E 80-14-030
212-42-110	NEW-P 80-10-047	212-52-100	AMD-P 80-09-074	220-28-005F0N	NEW-E 80-14-030
212-42-110	NEW 80-15-090	212-52-105	AMD-P 80-09-074	220-28-005F0N	REP-E 80-15-009
212-42-115	NEW-P 80-10-047	212-52-110	AMD-P 80-09-074	220-28-005I0A	NEW-E 80-14-019
212-42-115	NEW 80-15-090	212-52-115	AMD-P 80-09-074	220-28-005I0A	REP-E 80-15-030
212-42-120	NEW-P 80-10-047	212-52-120	AMD-P 80-09-074	220-28-005I0B	NEW-E 80-15-030
212-42-120	NEW 80-15-090	212-52-125	AMD-P 80-09-074	220-28-005I0B	REP-E 80-15-049
212-42-125	NEW-P 80-10-047	220-16-130	AMD-P 80-08-079	220-28-005I0C	NEW-E 80-15-049
212-42-125	NEW 80-15-090	220-16-130	AMD 80-13-064	220-28-005I0C	REP-E 80-15-057
212-44-001	AMD-P 80-10-048	220-16-257	NEW-P 80-08-079	220-28-005I0D	NEW-E 80-15-057
212-44-001	AMD 80-15-077	220-16-257	NEW 80-13-064	220-28-005I0D	REP-E 80-15-073
212-44-005	AMD-P 80-10-048	220-20-010	AMD-P 80-05-082	220-28-00600Q	NEW-E 80-05-019
212-44-005	AMD 80-15-077	220-20-010	AMD-P 80-06-149	220-28-00600Q	REP-E 80-06-121
212-44-010	AMD-P 80-10-048	220-20-010	AMD 80-07-017	220-28-00600R	NEW-E 80-06-121
212-44-010	AMD 80-15-077	220-20-010	AMD 80-10-058	220-28-00600R	REP-E 80-07-041
212-44-015	AMD-P 80-10-048	220-20-01000C	NEW-E 80-06-054	220-28-00600S	NEW-E 80-07-041
212-44-015	AMD 80-15-077	220-20-01000C	REP-E 80-06-144	220-28-00600T	NEW-E 80-15-009
212-44-035	AMD-P 80-10-048	220-20-01000D	NEW-E 80-06-144	220-28-006A0L	NEW-E 80-05-019
212-44-035	AMD 80-15-077	220-20-01200A	NEW-E 80-08-080	220-28-006A0L	REP-E 80-06-121
212-44-040	AMD-P 80-10-048	220-20-01200B	NEW-E 80-15-110	220-28-006A0M	NEW-E 80-06-121
212-44-040	AMD 80-15-077	220-20-020	AMD-P 80-06-138	220-28-006A0M	REP-E 80-07-041

Table of WAC Sections Affected

WAC #	WSR #	WAC #	WSR #	WAC #	WSR #
220-28-006A0N	NEW-E 80-07-041	220-28-00800Z	REP-E 80-10-002	220-28-010F0N	REP-E 80-15-005
220-28-006A0N	REP-E 80-10-002	220-28-008F0A	NEW-E 80-06-121	220-28-010F0P	NEW-E 80-15-005
220-28-006A0P	NEW-E 80-10-002	220-28-008F0A	REP-E 80-10-002	220-28-010G0A	NEW-E 80-09-034
220-28-006A0P	REP-E 80-10-020	220-28-008F0B	NEW-E 80-10-002	220-28-010G0A	REP-E 80-15-051
220-28-006A0Q	NEW-E 80-10-020	220-28-008F0B	REP-E 80-10-020	220-28-010G0B	NEW-E 80-15-051
220-28-006A0Q	REP-E 80-13-004	220-28-008F0C	NEW-E 80-10-020	220-28-01100G	NEW-E 80-15-038
220-28-006A0R	NEW-E 80-15-009	220-28-008F0C	REP-E 80-13-006	220-28-01100G	REP-E 80-15-048
220-28-006B0P	NEW-E 80-06-121	220-28-008F0D	NEW-E 80-13-006	220-28-01100H	NEW-E 80-15-048
220-28-006B0P	REP-E 80-08-008	220-28-008F0D	REP-E 80-13-016	220-28-011A0J	NEW-E 80-05-019
220-28-006B0Q	NEW-E 80-08-008	220-28-008F0E	NEW-E 80-13-016	220-28-011F0I	NEW-E 80-05-019
220-28-006B0Q	REP-E 80-10-011	220-28-008F0E	REP-E 80-13-040	220-28-011G0E	NEW-E 80-05-019
220-28-006B0R	NEW-E 80-10-011	220-28-008F0F	NEW-E 80-13-040	220-28-011G0E	REP-E 80-09-063
220-28-006B0R	REP-E 80-13-004	220-28-008F0F	REP-E 80-13-004	220-28-011G0F	NEW-E 80-09-063
220-28-006C0J	NEW-E 80-05-019	220-28-008F0G	NEW-E 80-14-008	220-28-01200P	NEW-E 80-15-018
220-28-006C0J	REP-E 80-06-121	220-28-008F0G	REP-E 80-14-076	220-28-01200P	REP-E 80-15-073
220-28-006C0K	NEW-E 80-06-121	220-28-008F0H	NEW-E 80-14-076	220-28-01200Q	NEW-E 80-15-073
220-28-006C0K	REP-E 80-07-041	220-28-008F0H	REP-E 80-15-113	220-28-01200Q	REP-E 80-15-113
220-28-006C0L	NEW-E 80-07-041	220-28-008F0I	NEW-E 80-15-113	220-28-012B0I	NEW-E 80-15-018
220-28-006C0M	NEW-E 80-15-009	220-28-008F0Z	NEW-E 80-05-019	220-28-012B0I	REP-E 80-15-073
220-28-006D0F	NEW-E 80-08-008	220-28-00900I	REP-E 80-06-121	220-28-012B0J	NEW-E 80-15-073
220-28-006D0F	REP-E 80-14-006	220-28-00900I	NEW-E 80-06-121	220-28-012B0J	REP-E 80-15-113
220-28-006F0H	NEW-E 80-08-008	220-28-00900J	REP-E 80-08-008	220-28-012B0K	NEW-E 80-15-113
220-28-006F0H	REP-E 80-14-006	220-28-00900J	NEW-E 80-08-008	220-28-012C0T	NEW-E 80-09-013
220-28-006F0I	NEW-E 80-14-006	220-28-00900J	REP-E 80-13-004	220-28-012C0T	REP-E 80-15-018
220-28-006F0I	REP-E 80-14-030	220-28-01000L	NEW-E 80-06-121	220-28-012C0U	NEW-E 80-15-018
220-28-006F0J	NEW-E 80-14-030	220-28-01000L	REP-E 80-08-008	220-28-012C0U	REP-E 80-15-073
220-28-006F0J	REP-E 80-15-009	220-28-01000M	NEW-E 80-08-008	220-28-012C0V	NEW-E 80-15-073
220-28-006G0H	NEW-E 80-14-004	220-28-01000M	REP-E 80-08-033	220-28-012C0V	REP-E 80-15-113
220-28-006G0H	REP-E 80-15-005	220-28-01000N	NEW-E 80-08-033	220-28-012C0W	NEW-E 80-15-113
220-28-006G0I	NEW-E 80-15-005	220-28-01000N	REP-E 80-09-054	220-28-012D0M	NEW-E 80-09-013
220-28-00700G	NEW-E 80-05-019	220-28-01000P	NEW-E 80-09-054	220-28-012D0M	REP-E 80-15-018
220-28-00700G	REP-E 80-06-080	220-28-01000P	REP-E 80-09-061	220-28-012D0N	NEW-E 80-15-018
220-28-00700H	NEW-E 80-06-080	220-28-01000Q	NEW-E 80-09-061	220-28-012D0N	REP-E 80-15-073
220-28-00700H	REP-E 80-07-041	220-28-01000Q	REP-E 80-11-022	220-28-012D0P	NEW-E 80-15-073
220-28-00700I	NEW-E 80-07-041	220-28-01000R	NEW-E 80-11-022	220-28-012D0P	REP-E 80-15-113
200-28-00700I	REP-E 80-14-002	220-28-01000R	REP-E 80-13-004	220-28-012D0Q	NEW-E 80-15-113
220-28-00700J	NEW-E 80-14-002	220-28-01000S	NEW-E 80-15-038	220-28-012F0E	REP-E 80-02-127
220-28-00700J	REP-E 80-14-008	220-28-010A0P	NEW-E 80-06-121	220-28-012F0F	NEW-E 80-15-018
220-28-00700K	NEW-E 80-14-008	220-28-010A0Q	NEW-E 80-11-022	220-28-012G0A	REP-E 80-02-014
220-28-00700K	REP-E 80-14-038	220-28-010A0Q	REP-E 80-13-022	220-28-012H0A	REP-E 80-02-127
220-28-00700L	NEW-E 80-14-038	220-28-010B0N	NEW-E 80-06-121	220-28-01300P	REP-E 80-02-014
220-28-007A0F	NEW-E 80-05-019	220-28-010B0N	REP-E 80-08-008	220-28-01300Q	NEW-E 80-02-043
220-28-007A0F	REP-E 80-06-080	220-28-010B0P	NEW-E 80-08-008	220-28-01300R	NEW-E 80-14-044
220-28-007A0G	NEW-E 80-06-080	220-28-010B0P	REP-E 80-14-006	220-28-01300R	REP-E 80-15-113
220-28-007A0G	REP-E 80-07-041	220-28-010B0Q	NEW-E 80-14-006	220-28-013B0L	NEW-E 80-14-006
220-28-007A0H	NEW-E 80-07-041	220-28-010B0Q	REP-E 80-14-030	220-28-013B0L	REP-E 80-14-044
220-28-007A0H	REP-E 80-14-002	220-28-010B0R	NEW-E 80-14-030	220-28-013B0M	NEW-E 80-14-044
220-28-007A0I	NEW-E 80-14-002	220-28-010B0R	REP-E 80-15-009	220-28-013B0M	REP-E 80-15-012
220-28-007A0I	REP-E 80-14-008	220-28-010B0S	NEW-E 80-15-009	220-28-013B0N	NEW-E 80-15-012
220-28-007A0J	NEW-E 80-14-008	220-28-010B0S	REP-E 80-15-051	220-28-013B0N	REP-E 80-15-070
220-28-007A0J	REP-E 80-14-038	220-28-010B0T	NEW-E 80-15-051	220-28-013B0P	NEW-E 80-15-070
220-28-007A0K	NEW-E 80-14-038	220-28-010C0L	NEW-E 80-06-121	220-28-013G0F	REP-E 80-02-014
220-28-007B0N	NEW-E 80-05-019	220-28-010C0L	REP-E 80-08-008	220-28-013G0G	NEW-E 80-02-043
220-28-007B0P	NEW-E 80-15-073	220-28-010C0M	NEW-E 80-08-008	220-28-013G0G	REP-E 80-03-016
220-28-007B0P	REP-E 80-15-113	220-28-010C0M	REP-E 80-09-013	220-28-013I0A	NEW-E 80-14-044
220-28-007B0Q	NEW-E 80-15-113	220-28-010C0N	NEW-E 80-09-013	220-28-013I0A	REP-E 80-15-113
220-28-007C0T	NEW-E 80-05-019	220-28-010C0N	REP-E 80-09-061	220-28-800	NEW-E 80-09-073
220-28-007C0T	REP-E 80-08-033	220-28-010C0P	NEW-E 80-09-061	220-28-800	REP-E 80-14-006
220-28-007C0U	NEW-E 80-08-033	220-28-010D0M	NEW-E 80-06-121	220-28-801	NEW-E 80-10-007
220-28-007C0U	REP-E 80-11-071	220-28-010D0M	REP-E 80-08-008	220-28-801	REP-E 80-10-022
220-28-007C0V	NEW-E 80-11-071	220-28-010D0N	NEW-E 80-08-008	220-28-802	NEW-E 80-10-023
220-28-007F0J	REP-E 80-02-056	220-28-010D0N	REP-E 80-14-006	220-28-802	REP-E 80-10-041
220-28-007F0K	NEW-E 80-05-019	220-28-010D0P	NEW-E 80-14-006	220-28-803	NEW-E 80-10-041
220-28-007G0G	NEW-E 80-08-033	220-28-010D0P	REP-E 80-14-030	220-28-803	REP-E 80-11-011
220-28-007G0H	NEW-E 80-15-009	220-28-010D0Q	NEW-E 80-14-030	220-28-804	NEW-E 80-11-021
220-28-00800A	NEW-E 80-10-002	220-28-010D0Q	REP-E 80-15-068	220-28-804	REP-E 80-11-047
220-28-00800A	REP-E 80-10-020	220-28-010D0R	NEW-E 80-15-068	220-28-805	NEW-E 80-11-047
220-28-00800B	NEW-E 80-10-020	220-28-010E0E	NEW-E 80-15-005	220-28-805	REP-E 80-11-069
220-28-00800B	REP-E 80-13-006	220-28-010E0E	REP-E 80-15-009	220-28-806	NEW-E 80-11-069
220-28-00800C	NEW-E 80-14-076	220-28-010F0L	NEW-E 80-11-022	220-28-806	REP-E 80-12-009
220-28-00800C	REP-E 80-15-073	220-28-010F0L	REP-E 80-13-063	220-28-807	NEW-E 80-12-009
220-28-00800Y	NEW-E 80-05-019	220-28-010F0M	NEW-E 80-13-063	220-28-807	REP-E 80-12-043
220-28-00800Y	REP-E 80-06-121	220-28-010F0M	REP-E 80-14-030	220-28-808	NEW-E 80-12-043
220-28-00800Z	NEW-E 80-06-121	220-28-010F0N	NEW-E 80-14-030	220-28-808	REP-E 80-14-006

Table of WAC Sections Affected

WAC #	WSR #	WAC #	WSR #	WAC #	WSR #			
220-49-02100F	REP-E	80-05-133	220-56-071	REP	80-03-064	220-56-300	NEW	80-03-064
220-49-02100G	NEW-E	80-05-133	220-56-072	REP	80-03-064	220-56-305	NEW	80-03-064
220-49-02100H	REP-E	80-06-035	220-56-073	REP	80-03-064	220-56-310	NEW	80-03-064
220-49-05600A	NEW-E	80-06-035	220-56-074	REP	80-03-064	220-56-31000A	NEW-E	80-07-004
220-49-05600A	NEW-E	80-03-053	220-56-080	REP	80-03-064	220-56-31000B	NEW-E	80-13-023
220-49-05600A	REP-E	80-04-094	220-56-082	REP	80-03-064	220-56-315	NEW	80-03-064
220-52-01901	AMD-P	80-08-079	220-56-084	REP	80-03-064	220-56-320	NEW	80-03-064
220-52-01901	AMD	80-13-064	220-56-086	REP	80-03-064	220-56-325	NEW	80-03-064
220-52-01901A	NEW-E	80-11-053	220-56-088	REP	80-03-064	220-56-32500A	NEW-E	80-05-064
220-52-040	AMD-P	80-08-079	220-56-090	REP	80-03-064	220-56-330	NEW	80-03-064
220-52-040	AMD	80-13-064	220-56-092	REP	80-03-064	220-56-335	NEW	80-03-064
220-52-046	AMD-P	80-08-079	220-56-100	NEW	80-03-064	220-56-340	NEW	80-03-064
220-52-046	AMD	80-13-064	220-56-105	NEW	80-03-064	220-56-345	NEW	80-03-064
220-52-050	AMD-P	80-08-079	220-56-10500A	NEW-E	80-11-041	220-56-350	NEW	80-03-064
220-52-050	AMD	80-13-064	220-56-10500A	REP-E	80-15-050	220-56-355	NEW	80-03-064
220-52-05000A	NEW-E	80-06-120	220-56-110	NEW	80-03-064	220-56-360	NEW	80-03-064
220-52-05000B	NEW-E	80-12-039	220-56-115	NEW	80-03-064	220-56-36000A	NEW-E	80-08-025
220-52-05300F	NEW-E	80-05-064	220-56-115	AMD-P	80-08-015	220-56-365	NEW	80-03-064
220-52-054	NEW-P	80-08-079	220-56-115	AMD	80-12-040	220-56-370	NEW	80-03-064
220-52-054	NEW	80-13-064	220-56-11500A	NEW-E	80-10-035	220-56-372	NEW-P	80-08-079
220-52-060	AMD-P	80-08-079	220-56-120	NEW	80-03-064	220-56-372	NEW	80-13-064
220-52-060	AMD	80-13-064	220-56-125	NEW	80-03-064	220-56-375	NEW	80-03-064
220-52-063	AMD-P	80-08-079	220-56-128	NEW	80-03-064	220-56-380	NEW	80-03-064
220-52-063	AMD	80-13-064	220-56-130	NEW	80-03-064	220-56-382	NEW-P	80-08-079
220-52-066	AMD-P	80-08-079	220-56-135	NEW	80-03-064	220-56-382	NEW	80-13-064
220-52-066	AMD	80-13-064	220-56-140	NEW	80-03-064	220-56-385	NEW	80-03-064
220-52-073	AMD-P	80-08-079	220-56-145	NEW	80-03-064	220-56-390	NEW	80-03-064
220-52-073	AMD	80-13-064	220-56-150	NEW	80-03-064	220-56-400	NEW	80-03-064
220-52-074	AMD-P	80-08-079	220-56-155	NEW	80-03-064	220-56-405	NEW	80-03-064
220-52-074	AMD	80-13-064	220-56-160	NEW	80-03-064	220-56-410	NEW	80-03-064
220-52-075	AMD-P	80-08-079	220-56-165	NEW	80-03-064	220-57	AMD-P	80-02-045
220-52-075	AMD	80-13-064	220-56-165	AMD-P	80-05-082	220-57-120	AMD	80-03-064
220-52-07500A	NEW-E	80-09-085	220-56-165	AMD	80-07-017	220-57-125	AMD	80-03-064
220-55	NEW-P	80-02-045	220-56-175	NEW	80-03-064	220-57-130	AMD	80-03-064
220-55-05600A	NEW-E	80-08-025	220-56-180	NEW	80-03-064	220-57-13000A	NEW-E	80-11-041
220-55-05600A	REP-E	80-08-030	220-56-18000A	NEW-E	80-06-029	220-57-13000A	NEW-E	80-15-055
220-55-05600B	NEW-E	80-08-030	220-56-18000A	REP-E	80-09-012	220-57-135	AMD	80-03-064
220-55-065	AMD-P	80-08-079	220-56-18000B	NEW-E	80-09-012	220-57-13500A	NEW-E	80-15-055
220-55-065	AMD	80-13-064	220-56-18000B	REP-E	80-13-004	220-57-140	AMD	80-03-064
220-55-070	NEW	80-03-064	220-56-185	NEW	80-03-064	220-57-160	AMD	80-03-064
220-55-075	NEW	80-03-064	220-56-190	NEW	80-03-064	220-57-16000G	NEW-E	80-03-095
220-55-080	NEW	80-03-064	220-56-19000A	NEW-E	80-05-092	220-57-16000H	NEW-E	80-13-021
220-55-085	NEW	80-03-064	220-56-19000B	NEW-E	80-12-007	220-57-16000I	REP-E	80-14-003
220-55-090	NEW	80-03-064	220-56-19000B	REP-E	80-12-015	220-57-16000I	NEW-E	80-14-003
220-55-095	NEW	80-03-064	220-56-19000C	NEW-E	80-12-015	220-57-165	AMD	80-03-064
220-55-100	NEW	80-03-064	220-56-195	NEW	80-03-064	220-57-175	AMD	80-03-064
220-55-105	NEW	80-03-064	220-56-200	NEW	80-03-064	220-57-17500E	NEW-E	80-11-041
220-55-110	NEW	80-03-064	220-56-205	NEW	80-03-064	220-57-17500E	REP-E	80-14-075
220-55-115	NEW	80-03-064	220-56-20500A	NEW-E	80-12-027	220-57-190	AMD	80-03-064
220-55-120	NEW	80-03-064	220-56-210	NEW	80-03-064	220-57-20500B	NEW-E	80-15-050
220-55-125	NEW	80-03-064	220-56-215	NEW	80-03-064	220-57-20500B	REP-E	80-15-075
220-55-130	NEW	80-03-064	220-56-220	NEW	80-03-064	220-57-21000B	NEW-E	80-15-050
220-55-135	NEW	80-03-064	220-56-225	NEW	80-03-064	220-57-21000B	REP-E	80-15-075
220-56	REP-P	80-02-045	220-56-235	NEW	80-03-064	220-57-21500B	NEW-E	80-15-050
220-56	NEW-P	80-02-045	220-56-235	AMD-P	80-05-082	220-57-21500B	REP-E	80-15-075
220-56-010	REP	80-03-064	220-56-235	AMD	80-07-017	220-57-220	AMD	80-03-064
220-56-013	REP	80-03-064	220-56-240	NEW	80-03-064	220-57-235	AMD	80-03-064
220-56-019	REP	80-03-064	220-56-245	NEW	80-03-064	220-57-23500A	NEW-E	80-11-041
220-56-020	REP	80-03-064	220-56-245	NEW	80-03-064	220-57-24000D	NEW-E	80-15-050
220-56-02000A	NEW-E	80-03-053	220-56-250	NEW	80-03-064	220-57-24000D	REP-E	80-15-075
220-56-02000A	REP-E	80-04-094	220-56-250	AMD-P	80-05-082	220-57-250	AMD	80-03-064
220-56-021	REP	80-03-064	220-56-25000A	NEW-E	80-07-017	220-57-25000A	NEW-E	80-11-041
220-56-022	REP	80-03-064	220-56-25000A	REP-E	80-04-094	220-57-255	AMD	80-03-064
220-56-023	REP	80-03-064	220-56-25000B	NEW-E	80-07-032	220-57-260	AMD	80-03-064
220-56-030	REP	80-03-064	220-56-255	NEW	80-03-064	220-57-26500B	NEW-E	80-15-050
220-56-040	REP	80-03-064	220-56-260	NEW	80-03-064	220-57-26500B	REP-E	80-15-075
220-56-050	REP	80-03-064	220-56-265	NEW	80-03-064	220-57-270	AMD	80-03-064
220-56-05000B	NEW-E	80-02-126	220-56-270	NEW	80-03-064	220-57-27000D	NEW-E	80-08-009
220-56-05000B	REP-E	80-04-094	220-56-275	NEW	80-03-064	220-57-27000E	NEW-E	80-14-013
220-56-060	REP	80-03-064	220-56-280	NEW	80-03-064	220-57-27000E	REP-E	80-15-055
220-56-063	REP	80-03-064	220-56-285	NEW	80-03-064	220-57-27000F	NEW-E	80-15-055
220-56-064	REP	80-03-064	220-56-28500A	NEW-E	80-09-070	220-57-290	AMD	80-03-064
220-56-065	REP	80-03-064	220-56-290	NEW	80-03-064	220-57-29000B	NEW-E	80-06-040
220-56-070	REP	80-03-064	220-56-295	NEW	80-03-064	220-57-300	AMD	80-03-064

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220-57-31000A	REP-E	80-14-075	220-69-232	AMD-P	80-03-096	230-04-200	AMD	80-03-059
220-57-31000B	NEW-E	80-14-075	220-69-232	AMD	80-05-093	230-04-260	AMD	80-03-060
220-57-315	AMD	80-03-064	220-69-233	AMD-P	80-03-096	230-04-305	NEW	80-03-060
220-57-319	AMD	80-03-064	220-69-233	AMD	80-05-093	230-08-020	AMD	80-03-059
220-57-335	AMD	80-03-064	220-69-234	AMD-P	80-03-096	230-20-030	REP	80-03-060
220-57-340	AMD	80-03-064	220-69-234	AMD	80-05-093	230-20-070	AMD	80-03-060
220-57-34000A	NEW-E	80-15-039	220-69-23401	NEW-P	80-03-096	230-20-110	AMD	80-03-059
220-57-345	AMD	80-03-064	220-69-23401	NEW	80-05-093	230-20-130	AMD-P	80-03-017
220-57-360	REP	80-03-064	220-69-24000A	NEW-E	80-09-085	230-20-130	AMD-P	80-04-082
220-57-370	AMD	80-03-064	220-69-25401	NEW-P	80-03-096	230-20-130	AMD	80-06-038
220-57-38000B	NEW-E	80-15-050	220-69-25401	NEW	80-05-093	230-20-210	AMD-P	80-03-093
220-57-38000B	REP-E	80-15-075	220-69-25401A	NEW-E	80-09-085	230-20-210	AMD	80-05-060
220-57-385	AMD	80-03-064	220-69-25401A	NEW-E	80-09-085	230-25-030	AMD-E	80-04-053
220-57-38500C	NEW-E	80-15-055	220-69-260	AMD-P	80-03-096	230-25-030	AMD-P	80-04-082
220-57-400	AMD	80-03-064	220-69-260	AMD	80-05-093	230-25-030	AMD	80-06-038
220-57-405	AMD	80-03-064	220-69-261	AMD-P	80-03-096	230-25-033	NEW-P	80-04-082
220-57-40500B	NEW-E	80-12-014	220-69-261	AMD	80-05-093	230-25-033	NEW	80-06-038
220-57-40500B	REP-E	80-15-050	220-69-264	AMD-P	80-03-096	230-25-100	AMD	80-03-060
220-57-40500C	NEW-E	80-15-050	220-69-264	AMD	80-05-093	230-40-010	AMD-E	80-04-053
220-57-40500C	REP-E	80-15-085	220-69-26401	NEW-P	80-03-096	230-40-010	AMD-P	80-06-152
220-57-40500D	NEW-E	80-15-085	220-69-26401	NEW	80-05-093	230-40-010	AMD	80-09-067
220-57-41000A	NEW-E	80-15-050	220-69-271	AMD-P	80-03-096	230-40-010	AMD-P	80-06-152
220-57-41000A	REP-E	80-15-075	220-69-271	AMD	80-05-093	230-40-015	AMD-P	80-09-067
220-57-415	AMD	80-03-064	220-69-280	AMD-P	80-03-096	230-40-015	AMD	80-04-082
220-57-435	AMD	80-03-064	220-69-280	AMD	80-05-093	230-40-030	AMD-P	80-04-082
220-57-440	AMD	80-03-064	220-85	AMD-P	80-15-109	230-40-030	AMD-P	80-06-037
220-57-450	AMD	80-03-064	220-85-010	REP-P	80-15-109	230-40-050	AMD-P	80-06-152
220-57-455	AMD	80-03-064	220-85-015	NEW-P	80-15-109	230-40-050	AMD	80-09-067
220-57-460	AMD	80-03-064	220-85-020	REP-P	80-15-109	230-40-120	AMD	80-03-059
220-57-46000D	NEW-E	80-13-015	220-85-030	AMD-P	80-15-109	230-40-225	AMD-P	80-04-082
220-57-46000D	REP-E	80-15-055	220-85-040	AMD-P	80-15-109	230-40-225	AMD-P	80-06-078
220-57-46000E	NEW-E	80-15-055	220-85-050	AMD-P	80-15-109	230-42-010	AMD-P	80-04-082
220-57-46500A	NEW-E	80-09-011	220-85-060	AMD-P	80-15-109	230-50-010	AMD	80-03-059
220-57-473	AMD	80-03-064	220-85-070	AMD-P	80-15-109	230-60-070	AMD-P	80-08-083
220-57-480	AMD	80-03-064	220-85-080	AMD-P	80-15-109	232-12-040	AMD-P	80-05-130
220-57-485	AMD	80-03-064	220-85-090	AMD-P	80-15-109	232-12-040	AMD	80-09-029
220-57-495	AMD	80-03-064	220-85-100	AMD-P	80-15-109	232-12-130	AMD-P	80-02-167
220-57-49500B	NEW-E	80-11-041	220-85-110	AMD-P	80-15-109	232-12-130	AMD	80-05-022
220-57-49500B	REP-E	80-14-075	220-85-115	NEW-P	80-15-109	232-12-171	AMD-P	80-02-167
220-57-49500C	NEW-E	80-15-050	220-85-210	REP-P	80-15-109	232-12-250	REP-P	80-08-078
220-57-49500C	REP-E	80-15-075	220-85-220	REP-P	80-15-109	232-12-250	REP	80-13-012
220-57-505	AMD	80-03-064	220-85-230	REP-P	80-15-109	232-12-260	REP-P	80-11-056
220-57-50500B	NEW-E	80-03-095	220-85-240	REP-P	80-15-109	232-12-260	REP	80-15-063
220-57-50500C	NEW-E	80-14-003	220-85-250	REP-P	80-15-109	232-12-270	REP-P	80-11-056
220-57-510	AMD	80-03-064	220-85-260	REP-P	80-15-109	232-12-270	REP	80-15-063
220-57-51000B	NEW-E	80-15-050	220-85-270	REP-P	80-15-109	232-12-690	AMD-P	80-02-167
220-57-515	AMD	80-03-064	220-85-280	REP-P	80-15-109	232-12-690	AMD	80-05-022
220-57-525	AMD	80-03-064	220-85-290	REP-P	80-15-109	232-12-710	AMD-P	80-02-167
220-57A	AMD-P	80-02-045	220-85-300	REP-P	80-15-109	232-12-710	AMD	80-05-022
220-57A-005	AMD	80-03-064	220-85-310	REP-P	80-15-109	232-16-100	REP-P	80-05-130
220-57A-010	AMD	80-03-064	220-95-01000A	NEW-E	80-15-069	232-16-100	REP	80-09-029
220-57A-012	NEW	80-03-064	220-105	REP-P	80-02-045	232-16-255	REP-P	80-11-056
220-57A-017	NEW	80-03-064	220-105-010	REP	80-03-064	232-16-255	REP	80-15-064
220-57A-040	AMD	80-03-064	220-105-015	REP	80-03-064	232-16-490	REP-P	80-11-056
220-57A-065	AMD	80-03-064	220-105-020	REP	80-03-064	232-16-490	REP	80-15-064
220-57A-080	AMD	80-03-064	220-105-025	REP	80-03-064	232-16-620	NEW-P	80-08-078
220-57A-095	AMD	80-03-064	220-105-030	REP	80-03-064	232-16-620	NEW	80-13-013
220-57A-115	AMD	80-03-064	220-105-035	REP	80-03-064	232-20-100	NEW-P	80-11-056
220-57A-120	AMD	80-03-064	220-105-040	REP	80-03-064	232-20-100	NEW	80-15-065
220-57A-135	AMD	80-03-064	220-105-045	REP	80-03-064	232-28-002	NEW-E	80-15-014
220-57A-150	AMD	80-03-064	220-105-046	REP	80-03-064	232-28-102	REP-P	80-05-130
220-57A-152	NEW	80-03-064	220-105-047	REP	80-03-064	232-28-102	REP	80-09-028
220-57A-155	AMD	80-03-064	220-105-050	REP	80-03-064	232-28-103	NEW-P	80-05-130
220-57A-17500B	NEW-E	80-09-009	220-105-055	REP	80-03-064	232-28-103	NEW	80-09-028
220-57A-17500B	REP-E	80-09-086	220-105-060	REP	80-03-064	232-28-202	REP-P	80-04-112
220-57A-17500C	NEW-E	80-09-086	220-105-065	REP	80-03-064	232-28-202	REP	80-09-003
220-57A-17500C	REP-E	80-10-035	223-08-010	AMD-P	80-06-052	232-28-203	NEW-P	80-04-112
220-57A-17500D	NEW-E	80-10-035	224-12-090	AMD	80-06-058	232-28-203	NEW	80-09-003
220-57A-17500D	REP-E	80-13-004	230-02-030	AMD-P	80-06-152	232-28-20301	NEW-E	80-09-059
220-57A-17500E	NEW-E	80-13-004	230-02-030	AMD	80-09-067	232-28-20302	NEW-E	80-09-060
220-57A-185	AMD	80-03-064	230-02-150	AMD-P	80-03-093	232-28-20303	NEW-E	80-11-014
220-57A-190	AMD	80-03-064	230-02-155	NEW-P	80-03-093	232-28-20304	NEW-E	80-12-047
220-69-230	AMD-P	80-03-096	230-04-140	AMD-E	80-02-119	232-28-302	REP-P	80-04-112
			220-57-50500C	NEW-E	80-14-003	232-28-302	REP	80-09-003

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248-22-041	NEW-P	80-14-065	248-72-100	REP	80-07-002	250-20-041	AMD-P	80-02-149
248-22-046	NEW-P	80-14-065	248-84-001	AMD-P	80-10-051	250-20-041	AMD	80-05-025
248-22-050	REP-P	80-14-065	248-84-001	AMD	80-14-059	250-20-091	NEW-P	80-08-074
248-22-051	NEW-P	80-14-065	248-84-002	NEW-P	80-10-051	250-20-091	NEW	80-12-028
248-22-520	AMD	80-02-003	248-84-002	NEW	80-14-059	250-40-040	AMD-P	80-02-150
248-23-001	NEW	80-03-079	248-84-010	AMD-P	80-10-051	250-40-040	AMD	80-05-024
248-23-010	NEW	80-03-079	248-84-010	AMD	80-14-059	250-40-050	AMD-P	80-02-150
248-23-020	NEW	80-03-079	248-84-015	NEW-P	80-10-051	250-40-050	AMD	80-05-024
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248-23-040	NEW	80-03-079	248-84-020	AMD-P	80-10-051	250-55-030	AMD	80-05-017
248-23-050	NEW	80-03-079	248-84-020	AMD	80-14-059	250-55-030	AMD-P	80-15-103
248-23-060	NEW	80-03-079	248-84-025	NEW-P	80-10-051	251-04-020	AMD-P	80-05-108
248-23-070	NEW	80-03-079	248-84-025	NEW	80-14-059	251-04-020	AMD	80-08-073
248-29-001	NEW-P	80-03-102	248-84-030	AMD-P	80-10-051	251-06-060	AMD	80-02-111
248-29-001	NEW	80-05-099	248-84-030	AMD	80-14-059	251-09-090	AMD	80-02-111
248-29-010	NEW-P	80-03-102	248-84-035	NEW-P	80-10-051	251-12-095	REP-P	80-10-049
248-29-010	NEW	80-05-099	248-84-035	NEW	80-14-059	251-12-095	REP	80-15-026
248-29-020	NEW-P	80-03-102	248-84-040	AMD-P	80-10-051	251-12-110	AMD-P	80-10-049
248-29-020	NEW	80-05-099	248-84-040	AMD	80-14-059	251-12-110	AMD-P	80-14-032
248-29-030	NEW-P	80-03-102	248-84-045	NEW-P	80-10-051	251-14-030	AMD-P	80-10-049
248-29-030	NEW	80-05-099	248-84-045	NEW	80-14-059	251-14-030	AMD-P	80-14-032
248-29-040	NEW-P	80-03-102	248-84-050	AMD-P	80-10-051	251-14-090	AMD-P	80-10-049
248-29-040	NEW	80-05-099	248-84-050	AMD	80-14-059	251-14-090	AMD	80-15-026
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248-29-050	NEW	80-05-099	248-84-055	NEW	80-14-059	251-14-120	NEW	80-15-026
248-29-060	NEW-P	80-03-102	248-84-060	AMD-P	80-10-051	251-18-176	AMD-P	80-05-108
248-29-060	NEW	80-05-099	248-84-060	AMD	80-14-059	251-18-176	AMD	80-08-073
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248-29-070	NEW	80-05-099	248-84-065	NEW	80-14-059	251-18-250	AMD	80-08-073
248-29-080	NEW-P	80-03-102	248-84-070	AMD-P	80-10-051	251-18-390	AMD-P	80-05-108
248-29-080	NEW	80-05-099	248-84-070	AMD	80-14-059	251-18-390	AMD	80-08-073
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248-29-090	NEW	80-05-099	248-84-075	NEW	80-14-059	251-22-240	AMD-P	80-10-049
248-30-010	REP-P	80-03-101	248-84-080	NEW-P	80-10-051	251-22-240	AMD-P	80-14-032
248-30-010	REP-P	80-05-020	248-84-080	NEW	80-14-059	260-12-010	AMD-P	80-14-035
248-30-010	REP	80-06-065	248-84-085	NEW-P	80-10-051	260-12-140	AMD-P	80-14-035
248-30-020	REP-P	80-03-101	248-84-085	NEW	80-14-059	260-20-075	NEW-P	80-14-035
248-30-020	REP-P	80-05-020	248-84-090	NEW-P	80-10-051	260-20-170	AMD-P	80-14-035
248-30-020	REP	80-06-065	248-84-090	NEW	80-14-059	260-24-280	AMD-P	80-14-035
248-30-030	REP-P	80-03-101	248-84-095	NEW-P	80-10-051	260-32-040	AMD-P	80-14-034
248-30-030	REP-P	80-05-020	248-84-095	NEW	80-14-059	260-36-040	AMD-P	80-14-035
248-30-030	REP	80-06-065	248-84-100	NEW-P	80-10-051	260-36-180	NEW-P	80-14-035
248-30-040	REP-P	80-03-101	248-84-100	NEW	80-14-059	260-40-120	AMD-P	80-14-035
248-30-040	REP-P	80-05-020	248-84-105	NEW-P	80-10-051	260-48-110	AMD-P	80-14-035
248-30-040	REP	80-06-065	248-84-105	NEW	80-14-059	260-52-010	AMD-P	80-14-035
248-30-050	REP-P	80-03-101	248-84-110	NEW-P	80-10-051	260-52-040	AMD-P	80-14-035
248-30-050	REP-P	80-05-020	248-84-110	NEW	80-14-059	260-60-120	AMD-P	80-14-035
248-30-050	REP	80-06-065	248-84-500	NEW-P	80-10-051	260-70-010	AMD-P	80-01-106
248-30-060	REP-P	80-03-101	248-84-500	NEW	80-14-059	260-70-010	AMD-P	80-03-018
248-30-060	REP-P	80-05-020	248-84-900	NEW-P	80-10-051	260-70-010	AMD-P	80-14-036
248-30-060	REP	80-06-065	248-84-900	NEW	80-14-059	260-70-010	AMD-P	80-14-037
248-30-070	NEW-P	80-03-101	248-96-020	AMD-P	80-01-107	260-70-021	REP-P	80-01-106
248-30-070	NEW-P	80-05-020	248-96-020	AMD	80-04-038	260-70-021	REP-P	80-03-018
248-30-070	NEW	80-06-065	248-96-040	AMD-P	80-01-107	260-70-021	REP-P	80-14-036
248-30-080	NEW-P	80-03-101	248-96-040	AMD	80-04-038	260-70-021	AMD-P	80-14-037
248-30-080	NEW-P	80-05-020	248-96-075	AMD-P	80-01-107	260-70-022	NEW-P	80-01-106
248-30-080	NEW	80-06-065	248-96-075	AMD	80-04-038	260-70-022	NEW-P	80-03-018
248-30-090	NEW-P	80-03-101	248-96-080	AMD-P	80-01-107	260-70-022	NEW-P	80-14-036
248-30-090	NEW-P	80-05-020	248-96-080	AMD	80-04-038	260-70-022	NEW-P	80-14-036
248-30-090	NEW	80-06-065	248-100-163	AMD-P	80-05-119	260-70-090	AMD-P	80-03-098
248-30-100	NEW-P	80-03-101	248-100-163	AMD-P	80-07-023	260-70-090	AMD	80-05-132
248-30-100	NEW-P	80-05-020	248-100-295	AMD-P	80-15-079	260-70-090	REP-P	80-14-036
248-30-100	NEW	80-06-065	248-140-220	AMD-P	80-08-077	260-70-090	AMD-P	80-14-037
248-30-110	NEW-P	80-03-101	248-140-220	AMD-P	80-11-033	260-70-100	AMD-P	80-03-098
248-30-110	NEW-P	80-05-020	248-140-220	AMD	80-14-063	260-70-100	AMD	80-05-132
248-30-110	NEW	80-06-065	248-140-230	NEW-P	80-08-077	260-70-100	REP-P	80-14-036
248-30-120	NEW-P	80-03-101	248-140-230	NEW-P	80-11-033	260-70-100	AMD-P	80-14-037
248-30-120	NEW-P	80-05-020	248-140-230	NEW	80-14-063	260-70-140	AMD-P	80-14-035
248-30-120	NEW	80-06-065	250-20-011	AMD-P	80-02-149	260-70-170	AMD-P	80-03-098
248-64-290	AMD-P	80-02-020	250-20-011	AMD	80-05-025	260-70-170	AMD	80-05-132
248-64-290	AMD	80-03-044	250-20-011	AMD-P	80-08-074	260-70-170	AMD-P	80-14-036
248-72	AMD-P	80-04-090	250-20-011	AMD	80-12-028	260-70-180	AMD-P	80-14-037
248-72	AMD	80-07-002	250-20-021	AMD-P	80-02-149	275-15-010	REP	80-02-136

Table of WAC Sections Affected

WAC #		WSR #	WAC #		WSR #	WAC #		WSR #
275-15-020	REP	80-02-136	275-19-150	NEW	80-02-136	275-39-010	NEW	80-15-083
275-15-030	REP	80-02-136	275-19-160	NEW	80-02-136	275-39-015	NEW-P	80-10-050
275-15-040	REP	80-02-136	275-19-170	NEW	80-02-136	275-39-015	NEW-E	80-11-002
275-15-050	REP	80-02-136	275-19-180	NEW	80-02-136	275-39-015	NEW	80-15-083
275-15-060	REP	80-02-136	275-19-190	NEW	80-02-136	275-39-020	NEW-P	80-10-050
275-15-070	REP	80-02-136	275-19-200	NEW	80-02-136	275-39-020	NEW-E	80-11-002
275-15-080	REP	80-02-136	275-19-210	NEW	80-02-136	275-39-020	NEW	80-15-083
275-15-100	REP	80-02-136	275-19-220	NEW	80-02-136	275-39-025	NEW-P	80-10-050
275-15-110	REP	80-02-136	275-19-230	NEW	80-02-136	275-39-025	NEW-E	80-11-002
275-15-120	REP	80-02-136	275-19-240	NEW	80-02-136	275-39-025	NEW	80-15-083
275-15-130	REP	80-02-136	275-19-250	NEW	80-02-136	275-39-030	NEW-P	80-10-050
275-15-140	REP	80-02-136	275-19-260	NEW	80-02-136	275-39-030	NEW-E	80-11-002
275-15-150	REP	80-02-136	275-19-270	NEW	80-02-136	275-39-030	NEW	80-15-083
275-15-160	REP	80-02-136	275-19-280	NEW	80-02-136	275-39-035	NEW-P	80-10-050
275-15-200	REP	80-02-136	275-19-300	NEW	80-02-136	275-39-035	NEW-E	80-11-002
275-15-205	REP	80-02-136	275-19-310	NEW	80-02-136	275-39-035	NEW	80-15-083
275-15-210	REP	80-02-136	275-19-320	NEW	80-02-136	275-39-040	NEW-P	80-10-050
275-15-215	REP	80-02-136	275-19-330	NEW	80-02-136	275-39-040	NEW-E	80-11-002
275-15-220	REP	80-02-136	275-19-340	NEW	80-02-136	275-39-040	NEW	80-15-083
275-15-225	REP	80-02-136	275-19-350	NEW	80-02-136	275-39-045	NEW-P	80-10-050
275-15-230	REP	80-02-136	275-19-400	NEW	80-02-136	275-39-045	NEW-E	80-11-002
275-15-235	REP	80-02-136	275-19-410	NEW	80-02-136	275-39-045	NEW	80-15-083
275-15-240	REP	80-02-136	275-19-420	NEW	80-02-136	275-39-050	NEW-P	80-10-050
275-15-245	REP	80-02-136	275-19-430	NEW	80-02-136	275-39-050	NEW-E	80-11-002
275-15-250	REP	80-02-136	275-19-440	NEW	80-02-136	275-39-050	NEW	80-15-083
275-15-255	REP	80-02-136	275-19-500	NEW	80-02-136	275-39-055	NEW-P	80-10-050
275-15-300	REP	80-02-136	275-19-510	NEW	80-02-136	275-39-055	NEW-E	80-11-002
275-15-305	REP	80-02-136	275-19-520	NEW	80-02-136	275-39-055	NEW	80-15-083
275-15-310	REP	80-02-136	275-19-530	NEW	80-02-136	275-39-056	NEW-P	80-10-050
275-15-315	REP	80-02-136	275-19-540	NEW	80-02-136	275-39-056	NEW-E	80-11-002
275-15-320	REP	80-02-136	275-19-600	NEW	80-02-136	275-39-056	NEW	80-15-083
275-15-325	REP	80-02-136	275-19-610	NEW	80-02-136	275-39-060	NEW-P	80-10-050
275-15-330	REP	80-02-136	275-19-700	NEW	80-02-136	275-39-060	NEW-E	80-11-002
275-15-335	REP	80-02-136	275-19-710	NEW	80-02-136	275-39-060	NEW	80-15-083
275-15-340	REP	80-02-136	275-19-720	NEW	80-02-136	275-39-065	NEW-P	80-10-050
275-15-345	REP	80-02-136	275-19-800	NEW	80-02-136	275-39-065	NEW-E	80-11-002
275-15-350	REP	80-02-136	275-19-810	NEW	80-02-136	275-39-065	NEW	80-15-083
275-15-355	REP	80-02-136	275-19-820	NEW	80-02-136	275-39-070	NEW-P	80-10-050
275-15-360	REP	80-02-136	275-19-830	NEW	80-02-136	275-39-070	NEW-E	80-11-002
275-15-400	REP	80-02-136	275-19-900	NEW	80-02-136	275-39-070	NEW	80-15-083
275-15-500	REP	80-02-136	275-19-910	NEW	80-02-136	275-39-075	NEW-P	80-10-050
275-15-600	REP	80-02-136	275-19-920	NEW	80-02-136	275-39-075	NEW-E	80-11-002
275-15-605	REP	80-02-136	275-19-930	NEW	80-02-136	275-39-075	NEW	80-15-083
275-15-610	REP	80-02-136	275-20-030	AMD	80-02-060	275-39-080	NEW-P	80-10-050
275-15-615	REP	80-02-136	275-20-030	AMD-P	80-08-062	275-39-080	NEW-E	80-11-002
275-15-620	REP	80-02-136	275-20-030	AMD-E	80-08-064	275-39-080	NEW	80-15-083
275-15-625	REP	80-02-136	275-20-030	AMD	80-12-011	275-39-085	NEW-P	80-10-050
275-15-630	REP	80-02-136	275-25-770	AMD	80-02-120	275-39-085	NEW-E	80-11-002
275-15-700	REP	80-02-136	275-34-010	AMD-P	80-08-016	275-39-085	NEW	80-15-083
275-15-705	REP	80-02-136	275-34-010	AMD	80-15-081	275-39-090	NEW-P	80-10-050
275-15-710	REP	80-02-136	275-34-020	AMD-P	80-08-016	275-39-090	NEW-E	80-11-002
275-15-715	REP	80-02-136	275-34-020	AMD	80-15-081	275-39-090	NEW	80-15-083
275-15-800	REP	80-02-136	275-34-030	AMD-P	80-08-016	275-39-100	NEW-P	80-10-050
275-15-805	REP	80-02-136	275-34-030	AMD	80-15-081	275-39-100	NEW-E	80-11-002
275-15-810	REP	80-02-136	275-34-040	AMD-P	80-08-016	275-39-100	NEW	80-15-083
275-15-815	REP	80-02-136	275-34-040	AMD	80-15-081	275-39-105	NEW-P	80-10-050
275-16-030	AMD-P	80-04-107	275-34-050	AMD-P	80-08-016	275-39-105	NEW-E	80-11-002
275-16-030	AMD-E	80-04-108	275-34-050	AMD	80-15-081	275-39-105	NEW	80-15-083
275-16-030	AMD	80-06-087	275-34-060	AMD-P	80-08-016	275-39-110	NEW-P	80-10-050
275-19-010	NEW	80-02-136	275-34-060	AMD	80-15-081	275-39-110	NEW-E	80-11-002
275-19-020	NEW	80-02-136	275-34-070	AMD-P	80-08-016	275-39-110	NEW	80-15-083
275-19-030	NEW	80-02-136	275-34-070	AMD	80-15-081	275-39-115	NEW-P	80-10-050
275-19-040	NEW	80-02-136	275-34-080	AMD-P	80-08-016	275-39-115	NEW-E	80-11-002
275-19-050	NEW	80-02-136	275-34-080	AMD	80-15-081	275-39-115	NEW	80-15-083
275-19-060	NEW	80-02-136	275-34-120	NEW-P	80-08-016	275-39-120	NEW-P	80-10-050
275-19-070	NEW	80-02-136	275-34-120	NEW	80-15-081	275-39-120	NEW-E	80-11-002
275-19-075	NEW	80-02-136	275-34-130	NEW-P	80-08-016	275-39-120	NEW	80-15-083
275-19-080	NEW	80-02-136	275-34-140	NEW-P	80-08-016	275-39-125	NEW-P	80-10-050
275-19-090	NEW	80-02-136	275-34-140	NEW	80-15-081	275-39-125	NEW-E	80-11-002
275-19-100	NEW	80-02-136	275-39-005	NEW-P	80-10-050	275-39-125	NEW	80-15-083
275-19-110	NEW	80-02-136	275-39-005	NEW-E	80-11-002	275-39-130	NEW-P	80-10-050
275-19-120	NEW	80-02-136	275-39-005	NEW	80-15-083	275-39-130	NEW-E	80-11-002
275-19-130	NEW	80-02-136	275-39-010	NEW-P	80-10-050	275-39-130	NEW	80-15-083
275-19-140	NEW	80-02-136	275-39-010	NEW-E	80-11-002	275-39-135	NEW-P	80-10-050

Table of WAC Sections Affected

WAC #	WSR #	WAC #	WSR #	WAC #	WSR #			
275-39-500	NEW-E	80-11-002	275-39-630	NEW-P	80-10-050	275-110-090	NEW	80-02-109
275-39-500	NEW	80-15-083	275-39-630	NEW-E	80-11-002	275-110-090	AMD-P	80-06-169
275-39-505	NEW-P	80-10-050	275-39-630	NEW	80-15-083	275-110-090	AMD-E	80-08-060
275-39-505	NEW-E	80-11-002	275-39-635	NEW-P	80-10-050	275-110-090	AMD-E	80-12-004
275-39-505	NEW	80-15-083	275-39-635	NEW-E	80-11-002	275-110-090	AMD-P	80-12-051
275-39-510	NEW-P	80-10-050	275-39-635	NEW	80-15-083	275-110-100	NEW	80-02-109
275-39-510	NEW-E	80-11-002	275-39-640	NEW-P	80-10-050	275-110-100	AMD-P	80-06-169
275-39-510	NEW	80-15-083	275-39-640	NEW-E	80-11-002	275-110-100	AMD-E	80-08-060
275-39-515	NEW-P	80-10-050	275-39-640	NEW	80-15-083	275-110-100	AMD-E	80-12-004
275-39-515	NEW-E	80-11-002	275-39-645	NEW-P	80-10-050	275-110-100	AMD-P	80-12-051
275-39-515	NEW	80-15-083	275-39-645	NEW-E	80-11-002	275-110-110	NEW-P	80-06-169
275-39-520	NEW-P	80-10-050	275-39-645	NEW	80-15-083	275-110-110	NEW-E	80-08-060
275-39-520	NEW-E	80-11-002	275-39-650	NEW-P	80-10-050	275-110-110	NEW-E	80-12-004
275-39-520	NEW	80-15-083	275-39-650	NEW-E	80-11-002	275-110-110	NEW-P	80-12-051
275-39-525	NEW-P	80-10-050	275-39-655	NEW-P	80-10-050	275-110-120	NEW-E	80-12-004
275-39-525	NEW-E	80-11-002	275-39-655	NEW-E	80-11-002	275-110-120	NEW-P	80-12-051
275-39-525	NEW	80-15-083	275-39-655	NEW	80-15-083	275-120-010	REP-P	80-05-142
275-39-530	NEW-P	80-10-050	275-39-660	NEW-P	80-10-050	275-120-010	REP	80-09-069
275-39-530	NEW-E	80-11-002	275-39-660	NEW-E	80-11-002	275-120-015	REP-P	80-05-142
275-39-530	NEW	80-15-083	275-39-660	NEW	80-15-083	275-120-015	REP	80-09-069
275-39-535	NEW-P	80-10-050	275-39-665	NEW-P	80-10-050	275-120-020	REP-P	80-05-142
275-39-535	NEW-E	80-11-002	275-39-665	NEW-E	80-11-002	275-120-020	REP	80-09-069
275-39-535	NEW	80-15-083	275-39-665	NEW	80-15-083	275-120-025	REP-P	80-05-142
275-39-545	NEW-P	80-10-050	275-39-670	NEW-P	80-10-050	275-120-025	REP	80-09-069
275-39-545	NEW-E	80-11-002	275-39-670	NEW-E	80-11-002	275-120-030	REP-P	80-05-142
275-39-545	NEW	80-15-083	275-39-670	NEW	80-15-083	275-120-030	REP	80-09-069
275-39-550	NEW-P	80-10-050	275-39-675	NEW-P	80-10-050	275-120-035	REP-P	80-05-142
275-39-550	NEW-E	80-11-002	275-39-675	NEW-E	80-11-002	275-120-035	REP	80-09-069
275-39-550	NEW	80-15-083	275-39-675	NEW	80-15-083	275-120-040	REP-P	80-05-142
275-39-555	NEW-P	80-10-050	275-88-060	AMD-P	80-04-076	275-120-040	REP	80-09-069
275-39-555	NEW-E	80-11-002	275-88-060	AMD	80-06-067	275-120-045	REP-P	80-05-142
275-39-555	NEW	80-15-083	275-88-110	AMD-P	80-04-091	275-120-045	REP	80-09-069
275-39-560	NEW-P	80-10-050	275-88-110	AMD	80-06-068	275-120-050	REP-P	80-05-142
275-39-560	NEW-E	80-11-002	275-110	AMD-P	80-09-082	275-120-050	REP	80-09-069
275-39-560	NEW	80-15-083	275-110-010	NEW	80-02-109	275-120-055	REP-P	80-05-142
275-39-565	NEW-P	80-10-050	275-110-010	AMD-P	80-06-169	275-120-055	REP	80-09-069
275-39-565	NEW-E	80-11-002	275-110-010	AMD-E	80-08-060	275-120-060	REP-P	80-05-142
275-39-565	NEW	80-15-083	275-110-010	AMD-E	80-12-004	275-120-060	REP	80-09-069
275-39-570	NEW-P	80-10-050	275-110-010	AMD-P	80-12-051	275-120-065	REP-P	80-05-142
275-39-570	NEW-E	80-11-002	275-110-020	NEW	80-02-109	275-120-065	REP	80-09-069
275-39-570	NEW	80-15-083	275-110-020	AMD-P	80-06-169	275-120-070	REP-P	80-05-142
275-39-575	NEW-P	80-10-050	275-110-020	AMD-E	80-08-060	275-120-070	REP	80-09-069
275-39-575	NEW-E	80-11-002	275-110-020	AMD-E	80-12-004	275-120-075	REP-P	80-05-142
275-39-575	NEW	80-15-083	275-110-020	AMD-P	80-12-051	275-120-075	REP	80-09-069
275-39-580	NEW-P	80-10-050	275-110-030	NEW	80-02-109	275-120-080	REP-P	80-05-142
275-39-580	NEW-E	80-11-002	275-110-030	AMD-P	80-06-169	275-120-080	REP	80-09-069
275-39-580	NEW	80-15-083	275-110-030	AMD-E	80-08-060	275-120-085	REP-P	80-05-142
275-39-585	NEW-P	80-10-050	275-110-030	AMD-E	80-12-004	275-120-085	REP	80-09-069
275-39-585	NEW-E	80-11-002	275-110-030	AMD-P	80-12-051	275-120-090	REP-P	80-05-142
275-39-585	NEW	80-15-083	275-110-040	NEW	80-02-109	275-120-090	REP	80-09-069
275-39-590	NEW-P	80-10-050	275-110-040	AMD-P	80-06-169	275-120-095	REP-P	80-05-142
275-39-590	NEW-E	80-11-002	275-110-040	AMD-E	80-08-060	275-120-095	REP	80-09-069
275-39-590	NEW	80-15-083	275-110-040	AMD-E	80-12-004	275-120-100	REP-P	80-05-142
275-39-595	NEW-P	80-10-050	275-110-040	AMD-P	80-12-051	275-120-100	REP	80-09-069
275-39-595	NEW-E	80-11-002	275-110-050	NEW	80-02-109	275-120-105	REP-P	80-05-142
275-39-595	NEW	80-15-083	275-110-050	AMD-P	80-06-169	275-120-105	REP	80-09-069
275-39-600	NEW-P	80-10-050	275-110-050	AMD-E	80-08-060	275-120-110	REP-P	80-05-142
275-39-600	NEW-E	80-11-002	275-110-050	AMD-E	80-12-004	275-120-110	REP	80-09-069
275-39-600	NEW	80-15-083	275-110-050	AMD-P	80-12-051	275-120-115	REP-P	80-05-142
275-39-605	NEW-P	80-10-050	275-110-060	NEW	80-02-109	275-120-115	REP	80-09-069
275-39-605	NEW-E	80-11-002	275-110-060	AMD-P	80-06-169	275-120-120	REP-P	80-05-142
275-39-605	NEW	80-15-083	275-110-060	AMD-E	80-08-060	275-120-120	REP	80-09-069
275-39-610	NEW-P	80-10-050	275-110-060	AMD-E	80-12-004	275-120-125	REP-P	80-05-142
275-39-610	NEW-E	80-11-002	275-110-060	AMD-P	80-12-051	275-120-125	REP	80-09-069
275-39-610	NEW	80-15-083	275-110-070	NEW	80-02-109	275-120-130	REP-P	80-05-142
275-39-615	NEW-P	80-10-050	275-110-070	AMD-P	80-06-169	275-120-130	REP	80-09-069
275-39-615	NEW-E	80-11-002	275-110-070	AMD-E	80-08-060	275-120-135	REP-P	80-05-142
275-39-615	NEW	80-15-083	275-110-070	AMD-E	80-12-004	275-120-135	REP	80-09-069
275-39-620	NEW-P	80-10-050	275-110-070	AMD-P	80-12-051	275-120-140	REP-P	80-05-142
275-39-620	NEW-E	80-11-002	275-110-080	NEW	80-02-109	275-120-140	REP	80-09-069
275-39-620	NEW	80-15-083	275-110-080	AMD-P	80-06-169	275-120-145	REP-P	80-05-142
275-39-625	NEW-P	80-10-050	275-110-080	AMD-E	80-08-060	275-120-145	REP	80-09-069
275-39-625	NEW-E	80-11-002	275-110-080	AMD-E	80-12-004	275-120-150	REP-P	80-05-142
275-39-625	NEW	80-15-083	275-110-080	AMD-P	80-12-051	275-120-150	REP	80-09-069

Table of WAC Sections Affected

WAC #	WSR #	WAC #	WSR #	WAC #	WSR #			
296-360-060	NEW-P	80-10-045	308-24-430	AMD-P	80-15-118	308-61-155	AMD	80-02-053
296-360-070	NEW-P	80-10-045	308-24-490	AMD-P	80-11-046	308-96A-400	NEW-E	80-09-068
296-360-080	NEW-P	80-10-045	308-24-490	AMD	80-14-022	308-96A-400	NEW-P	80-11-072
296-360-090	NEW-P	80-10-045	308-29-040	AMD-P	80-11-046	308-96A-400	NEW-P	80-13-049
296-360-100	NEW-P	80-10-045	308-29-040	AMD	80-14-022	308-96A-400	NEW-E	80-13-050
296-360-110	NEW-P	80-10-045	308-31-310	AMD-P	80-11-046	308-96A-400	NEW-W	80-13-052
296-360-120	NEW-P	80-10-045	308-31-310	AMD	80-14-022	308-97-230	NEW-E	80-09-108
296-360-130	NEW-P	80-10-045	308-33-011	AMD-P	80-15-116	308-97-230	NEW-P	80-09-110
296-360-140	NEW-P	80-10-045	308-33-015	REP-P	80-15-116	308-97-230	NEW	80-13-001
296-360-150	NEW-P	80-10-045	308-33-020	AMD-P	80-15-116	308-115-040	AMD-P	80-11-046
296-360-160	NEW-P	80-10-045	308-33-030	AMD-P	80-15-116	308-115-040	AMD	80-14-022
296-360-170	NEW-P	80-10-045	308-33-100	AMD-P	80-11-046	308-116-310	AMD-P	80-11-046
296-401-060	NEW	80-02-052	308-33-100	AMD	80-14-022	308-116-310	AMD	80-14-022
296-401-070	NEW	80-02-052	308-36-050	AMD-P	80-01-104	308-120-100	AMD-P	80-02-091
296-401-080	NEW	80-02-052	308-36-050	AMD	80-03-063	308-120-100	AMD	80-04-072
296-401-090	NEW	80-02-052	308-36-055	NEW-P	80-03-094	308-120-100	AMD-P	80-14-078
296-401-100	NEW	80-02-052	308-36-060	AMD-P	80-14-033	308-120-120	REP-P	80-02-091
296-401-110	NEW	80-02-052	308-36-065	AMD-P	80-14-079	308-120-120	REP	80-04-072
296-401-120	NEW	80-02-052	308-36-080	AMD-P	80-11-046	308-120-130	REP-P	80-02-091
296-401-130	NEW	80-02-052	308-36-080	AMD	80-14-022	308-120-130	REP	80-04-072
296-401-140	NEW	80-02-052	308-36-065	NEW	80-05-063	308-120-140	REP-P	80-02-091
296-401-150	NEW	80-02-052	308-40-101	AMD-P	80-03-094	308-120-140	REP	80-04-072
296-401-160	NEW	80-02-052	308-40-101	AMD	80-05-063	308-120-160	REP-P	80-14-078
296-401-170	NEW	80-02-052	308-40-105	NEW-P	80-03-094	308-120-161	NEW-P	80-14-078
296-401-180	NEW	80-02-052	308-40-105	NEW	80-05-063	308-120-162	NEW-P	80-14-078
304-25	AMD	80-02-041	308-40-105	AMD-P	80-14-079	308-120-163	NEW-P	80-14-078
304-25-010	AMD	80-02-041	308-40-120	AMD-P	80-11-046	308-120-164	NEW-P	80-14-078
304-25-020	AMD	80-02-041	308-40-120	AMD	80-14-022	308-120-165	NEW-P	80-14-078
304-25-030	AMD	80-02-041	308-41-020	AMD	80-14-022	308-120-166	NEW-P	80-14-078
304-25-040	AMD	80-02-041	308-41-020	AMD-P	80-11-046	308-120-168	NEW-P	80-14-078
304-25-050	AMD	80-02-041	308-42-055	NEW	80-14-011	308-120-170	AMD-P	80-14-078
304-25-060	AMD	80-02-041	308-42-055	NEW-P	80-10-039	308-120-185	AMD-P	80-14-078
304-25-070	REP	80-02-041	308-42-100	AMD-P	80-11-046	308-120-410	AMD-P	80-14-078
304-25-080	REP	80-02-041	308-42-100	AMD	80-14-022	308-120-420	AMD-P	80-14-078
304-25-090	AMD	80-02-041	308-42-120	NEW-P	80-02-166	308-120-205	NEW-P	80-02-091
304-25-100	AMD	80-02-041	308-42-120	NEW	80-04-057	308-120-206	NEW-P	80-02-091
304-25-110	AMD	80-02-041	308-48-310	AMD-P	80-11-046	308-120-207	NEW-P	80-02-091
304-25-120	AMD	80-02-041	308-48-310	AMD	80-14-022	308-120-208	NEW-P	80-02-091
304-25-510	NEW	80-02-041	308-51-030	AMD-P	80-11-046	308-120-209	NEW-P	80-02-091
304-25-520	NEW	80-02-041	308-51-030	AMD	80-14-022	308-120-210	NEW-P	80-02-091
304-25-530	NEW	80-02-041	308-51-130	AMD	80-04-012	308-120-211	NEW-P	80-02-091
304-25-540	NEW	80-02-041	308-52-139	AMD-P	80-10-031	308-120-212	NEW-P	80-02-091
304-25-550	NEW	80-02-041	308-52-139	AMD	80-15-031	308-120-213	NEW-P	80-02-091
304-25-555	NEW	80-02-041	308-52-145	NEW-P	80-10-031	308-120-214	NEW-P	80-02-091
304-25-560	NEW	80-02-041	308-52-145	NEW	80-15-031	308-120-215	NEW-P	80-02-091
304-25-570	NEW	80-02-041	308-52-310	AMD-P	80-11-046	308-120-216	NEW-P	80-02-091
304-25-580	NEW	80-02-041	308-52-310	AMD	80-14-022	308-120-217	NEW-P	80-02-091
304-25-590	NEW	80-02-041	308-53-145	NEW-P	80-01-103	308-120-218	NEW-P	80-02-091
308-04-010	AMD-P	80-09-107	308-53-145	NEW	80-04-054	308-120-219	NEW-P	80-02-091
308-04-010	AMD	80-13-002	308-53-146	NEW-P	80-01-103	308-120-220	NEW-P	80-02-091
308-13-010	AMD-P	80-03-058	308-53-146	NEW	80-04-054	308-120-221	NEW-P	80-02-091
308-13-010	AMD	80-05-141	308-53-280	NEW-P	80-01-103	308-120-222	NEW-P	80-02-091
308-13-030	AMD-P	80-03-058	308-53-280	NEW	80-04-054	308-120-260	AMD-P	80-11-046
308-13-030	AMD	80-05-141	308-53-310	AMD-P	80-11-046	308-120-260	AMD	80-14-022
308-13-040	AMD-P	80-03-058	308-53-310	AMD	80-14-022	308-120-505	NEW	80-04-072
308-13-040	AMD	80-05-141	308-54-150	AMD-P	80-02-163	308-120-506	NEW	80-04-072
308-13-080	AMD-P	80-03-058	308-54-150	AMD	80-04-069	308-120-507	NEW	80-04-072
308-13-080	AMD	80-05-141	308-54-160	AMD-P	80-05-059	308-120-508	NEW	80-04-072
308-13-120	AMD-P	80-11-046	308-54-160	AMD	80-08-066	308-120-509	NEW	80-04-072
308-13-120	AMD	80-14-022	308-54-170	AMD-P	80-05-059	308-120-509	AMD-P	80-14-078
308-16-218	NEW-P	80-15-117	308-54-170	AMD	80-08-066	308-120-510	NEW	80-04-072
308-16-211	AMD-P	80-15-117	308-54-180	AMD-P	80-05-059	308-120-510	AMD-P	80-14-078
308-16-212	AMD-P	80-15-117	308-54-180	AMD	80-08-066	308-120-511	NEW	80-04-072
308-16-215	AMD-P	80-15-117	308-54-190	REP-P	80-05-059	308-120-511	AMD-P	80-14-078
308-16-216	AMD-P	80-15-117	308-54-190	REP	80-08-066	308-120-512	NEW	80-04-072
308-16-217	AMD-P	80-15-117	308-54-225	AMD-P	80-05-059	308-120-513	NEW	80-04-072
308-16-350	AMD	80-02-079	308-54-225	AMD	80-08-066	308-120-514	NEW	80-04-072
308-16-390	AMD-P	80-15-117	308-54-310	AMD-P	80-11-046	308-120-515	NEW	80-04-072
308-16-420	AMD-P	80-11-046	308-54-310	AMD	80-14-022	308-120-516	NEW	80-04-072
308-16-420	AMD	80-14-022	308-54-320	NEW-P	80-02-166	308-120-517	NEW	80-04-072
308-24-305	AMD-P	80-15-118	308-54-320	NEW	80-04-057	308-120-518	NEW	80-04-072
308-24-320	AMD-P	80-15-118	308-55-010	NEW-P	80-05-139	308-120-519	NEW	80-04-072
308-24-403	AMD-P	80-15-118	308-55-010	NEW	80-08-003	308-120-520	NEW	80-04-072
308-24-404	AMD-P	80-15-118	308-61-110	AMD	80-02-053	308-120-521	NEW	80-04-072

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WAC #		WSR #	WAC #		WSR #	WAC #		WSR #
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308-122-020	AMD-P	80-11-046	308-150-025	REP-P	80-06-153	314-52-110	AMD-P	80-05-080
308-122-020	AMD	80-14-022	308-150-025	REP	80-09-106	314-52-110	AMD	80-09-078
308-122-040	NEW	80-02-114	308-150-040	REP-P	80-03-092	314-52-111	AMD-P	80-05-080
308-122-040	REP-P	80-15-013	308-150-040	REP-P	80-06-153	314-52-111	AMD	80-09-078
308-122-050	NEW	80-02-114	308-150-040	REP	80-09-106	314-52-112	AMD-P	80-05-080
308-122-050	REP-P	80-15-013	308-150-060	NEW-P	80-06-153	314-52-112	AMD	80-09-078
308-122-220	AMD-P	80-04-068	308-150-060	NEW	80-09-106	314-52-113	AMD-P	80-05-080
308-122-220	AMD	80-07-010	308-150-061	NEW-P	80-06-153	314-52-113	AMD	80-09-078
308-122-410	AMD-P	80-04-068	308-150-061	NEW	80-09-106	314-52-115	AMD-P	80-05-080
308-122-410	AMD	80-07-010	308-150-062	NEW-P	80-06-153	314-52-115	AMD	80-09-078
308-122-460	AMD-P	80-11-046	308-150-062	NEW	80-09-106	314-52-120	AMD-P	80-05-080
308-122-460	AMD	80-14-022	308-150-070	NEW-P	80-03-092	314-52-120	AMD	80-09-078
308-124-005	AMD-P	80-15-088	308-150-070	NEW-P	80-06-153	320-20	NEW-P	80-08-065
308-124-021	AMD-P	80-15-088	308-150-070	NEW	80-09-106	320-20-010	NEW-P	80-05-140
308-124A-010	AMD-P	80-15-088	308-150-080	NEW-P	80-03-092	320-20-010	NEW-P	80-13-051
308-124A-020	AMD-P	80-15-088	308-150-090	NEW-P	80-03-092	320-20-020	NEW-P	80-05-140
308-124A-025	AMD-P	80-15-088	308-150-100	NEW-P	80-03-092	320-20-020	NEW-P	80-13-051
308-124A-030	AMD-P	80-15-088	308-150-110	NEW-P	80-03-092	320-20-030	NEW-P	80-05-140
308-124A-040	REP-P	80-15-088	308-150-120	NEW-P	80-03-092	320-20-030	NEW-P	80-13-051
308-124A-100	AMD-P	80-15-088	308-150-130	NEW-P	80-03-092	320-20-040	NEW-P	80-05-140
308-124A-110	NEW-P	80-15-088	308-150-140	NEW-P	80-03-092	320-20-040	NEW-P	80-13-051
308-124A-120	NEW-P	80-15-088	308-150-150	NEW-P	80-03-092	320-20-050	NEW-P	80-05-140
308-124A-130	NEW-P	80-15-088	308-150-160	NEW-P	80-03-092	320-20-050	NEW-P	80-13-051
308-124A-200	AMD-P	80-15-088	308-150-170	NEW-P	80-03-092	320-20-060	NEW-P	80-05-140
308-124A-210	REP-P	80-15-088	308-150-200	NEW-P	80-03-092	320-20-060	NEW-P	80-13-051
308-124A-310	REP-P	80-15-088	308-150-210	NEW-P	80-03-092	320-20-070	NEW-P	80-05-140
308-124A-410	NEW-P	80-15-088	308-150-220	NEW-P	80-03-092	320-20-070	NEW-P	80-13-051
308-124A-420	NEW-P	80-15-088	308-150-230	NEW-P	80-03-092	320-20-080	NEW-P	80-05-140
308-124B-040	AMD-P	80-15-088	308-150-240	NEW-P	80-03-092	320-20-080	NEW-P	80-13-051
308-124B-110	AMD-P	80-15-088	308-151-080	NEW-P	80-03-092	320-20-090	NEW-P	80-05-140
308-124B-120	AMD-P	80-15-088	308-151-080	NEW	80-05-032	320-20-090	NEW-P	80-13-051
308-124C-010	AMD-P	80-15-088	308-151-090	NEW-P	80-03-092	332-10-150	NEW-E	80-04-066
308-124E-010	AMD-P	80-15-089	308-151-090	NEW	80-05-032	332-10-150	NEW-P	80-14-077
308-124F-010	AMD-P	80-15-089	308-151-100	NEW-P	80-03-092	332-10-160	NEW-E	80-04-066
308-124F-050	REP-P	80-15-089	308-151-100	NEW	80-05-032	332-10-160	NEW-P	80-14-077
308-124F-200	REP-P	80-15-089	308-151-100	AMD-P	80-13-008	332-10-170	NEW-E	80-04-066
308-124G-010	REP-P	80-15-089	308-152-010	AMD-P	80-11-046	332-10-170	NEW-P	80-14-077
308-124H-020	AMD-P	80-15-089	308-152-010	AMD	80-14-022	332-10-180	NEW-E	80-04-066
308-124H-030	AMD-P	80-15-089	308-154-040	AMD-P	80-13-008	332-10-180	NEW-P	80-14-077
308-124H-040	AMD-P	80-15-089	308-154-070	AMD-P	80-13-008	332-10-190	NEW-E	80-04-066
308-124H-045	AMD-P	80-15-089	308-154-080	NEW-P	80-13-008	332-10-190	NEW-P	80-14-077
308-124H-050	AMD-P	80-15-089	308-170-040	NEW-P	80-15-013	332-12-010	AMD-E	80-07-003
308-124H-060	AMD-P	80-15-089	308-170-050	NEW-P	80-15-013	332-12-010	AMD-E	80-11-012
308-138-060	AMD-P	80-11-046	314-08-410	AMD-P	80-09-087	332-12-010	AMD-P	80-14-074
308-138-060	AMD	80-14-022	314-08-410	AMD	80-12-021	332-12-020	AMD-E	80-07-003
308-140-150	AMD-P	80-11-035	314-16-040	AMD-P	80-02-035	332-12-020	AMD-E	80-11-012
308-140-150	AMD	80-15-059	314-16-040	AMD	80-02-094	332-12-020	AMD-P	80-14-074
308-140-210	AMD-P	80-11-035	314-16-060	AMD-P	80-13-032	332-12-050	REP-P	80-14-074
308-140-210	AMD	80-15-059	314-16-060	AMD	80-15-111	332-12-060	AMD-E	80-07-003
308-140-240	AMD-P	80-11-035	314-52	AMD-P	80-07-018	332-12-060	AMD-E	80-11-012
308-140-240	AMD	80-15-059	314-52	AMD-P	80-08-007	332-12-060	AMD-P	80-14-074
308-140-245	NEW-P	80-11-035	314-52-005	AMD-P	80-05-080	332-12-070	AMD-P	80-14-074
308-150-006	NEW-P	80-06-153	314-52-005	AMD	80-09-078	332-12-100	REP-P	80-14-074
308-150-006	NEW	80-09-106	314-52-010	AMD-P	80-05-080	332-22-010	NEW-P	80-14-073
308-150-007	NEW-P	80-06-153	314-52-010	AMD	80-09-078	332-22-020	NEW-P	80-14-073
308-150-007	NEW	80-09-106	314-52-015	AMD-P	80-05-080	332-22-030	NEW-P	80-14-073
308-150-008	NEW-P	80-06-153	314-52-015	AMD	80-09-078	332-22-040	NEW-P	80-14-073
308-150-008	NEW	80-09-106	314-52-020	AMD-P	80-05-080	332-22-050	NEW-P	80-14-073
308-150-009	NEW-P	80-06-153	314-52-020	AMD	80-09-078	332-22-060	NEW-P	80-14-073
308-150-009	NEW	80-09-106	314-52-030	AMD-P	80-05-080	332-22-070	NEW-P	80-14-073
308-150-010	REP-P	80-03-092	314-52-030	AMD-P	80-08-007	332-22-080	NEW-P	80-14-073
308-150-010	REP-P	80-06-153	314-52-030	AMD	80-09-078	332-22-090	NEW-P	80-14-073
308-150-010	REP	80-09-106	314-52-040	AMD-P	80-05-080	332-22-100	NEW-P	80-14-073
308-150-011	NEW-P	80-06-153	314-52-040	AMD	80-09-078	332-22-110	NEW-P	80-14-073
308-150-011	NEW	80-09-106	314-52-050	AMD-P	80-05-080	332-22-120	NEW-P	80-14-073
308-150-012	NEW-P	80-06-153	314-52-050	AMD	80-09-078	332-22-130	NEW-P	80-14-073
308-150-012	NEW	80-09-106	314-52-060	AMD-P	80-05-080	332-22-140	NEW-P	80-14-073
308-150-013	NEW-P	80-06-153	314-52-060	AMD	80-09-078	332-22-150	NEW-P	80-14-073
308-150-015	REP-P	80-03-092	314-52-070	AMD-P	80-05-080	332-24-061	REP-P	80-09-030
308-150-015	REP-P	80-06-153	314-52-070	AMD	80-09-078	332-24-061	REP	80-12-018
308-150-015	REP	80-09-106	314-52-080	AMD-P	80-05-080	332-24-090	AMD-E	80-04-003
308-150-020	REP-P	80-03-092	314-52-080	AMD	80-09-078	332-24-090	AMD-E	80-05-015
308-150-020	REP-P	80-06-153	314-52-090	AMD-P	80-05-080	332-26-010	NEW-E	80-09-008

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332-26-050	NEW-E 80-09-008	352-04-010	AMD 80-14-010	356-18-150	AMD-P 80-13-046
332-26-060	NEW-E 80-09-008	352-32-010	AMD-P 80-02-176	356-18-150	AMD-P 80-15-054
332-30	NEW-P 80-02-015	352-32-010	AMD 80-05-007	356-22-030	AMD-P 80-02-038
332-30	NEW-P 80-03-002	352-32-010	AMD-P 80-10-056	356-22-130	AMD-P 80-03-077
332-30	NEW-P 80-04-001	351-32-010	AMD 80-14-009	356-22-130	AMD-P 80-04-086
332-30	NEW-P 80-04-067	352-32-030	AMD-P 80-02-176	356-22-130	AMD 80-06-033
332-30-100	NEW-P 80-05-113	352-32-030	AMD 80-05-007	356-26-030	AMD-P 80-02-038
332-30-100	NEW 80-09-005	352-32-035	NEW-P 80-02-175	356-26-030	AMD-P 80-02-137
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332-30-103	NEW 80-09-005	352-32-036	NEW-P 80-10-056	356-26-030	AMD-P 80-06-132
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332-30-106	NEW 80-09-005	352-32-037	NEW-P 80-10-056	356-26-030	AMD 80-13-047
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332-30-109	NEW-P 80-05-113	352-32-045	AMD-P 80-02-176	356-26-060	AMD 80-04-025
332-30-109	NEW 80-09-005	352-32-045	AMD 80-05-007	356-26-060	AMD-P 80-10-021
332-30-112	NEW-P 80-05-113	352-32-050	AMD-P 80-02-176	356-26-060	AMD-P 80-13-046
332-30-112	NEW 80-09-005	352-32-050	AMD 80-05-007	356-26-060	AMD-P 80-15-054
332-30-115	NEW-P 80-05-113	352-32-250	AMD-P 80-02-176	356-30-070	AMD-P 80-02-137
332-30-115	NEW 80-09-005	352-32-250	AMD 80-05-007	356-30-070	AMD 80-04-025
332-30-118	NEW-P 80-05-113	352-32-265	NEW-P 80-14-025	356-30-080	AMD-P 80-12-033
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332-30-119	NEW-P 80-03-001	352-48-010	NEW 80-12-022	356-30-146	AMD-P 80-02-137
332-30-119	NEW-P 80-04-062	352-48-020	NEW-P 80-08-070	356-30-146	AMD 80-04-025
332-30-119	NEW-P 80-05-114	352-48-020	NEW 80-12-022	356-30-320	AMD-P 80-06-132
332-30-119	NEW 80-08-071	352-48-030	NEW-P 80-08-070	356-30-320	AMD-P 80-10-033
332-30-121	NEW-P 80-05-113	352-48-030	NEW 80-12-022	356-30-320	AMD 80-13-047
332-30-121	NEW 80-09-005	352-48-040	NEW-P 80-08-070	356-30-330	AMD-P 80-04-075
332-30-124	NEW-P 80-05-113	352-48-040	NEW 80-12-022	356-30-330	AMD-P 80-06-030
332-30-124	NEW 80-09-005	352-48-050	NEW-P 80-08-070	356-34 010	AMD-P 80-15-098
332-30-125	NEW-P 80-05-113	352-48-050	NEW 80-12-022	356-34-012	REP-P 80-15-098
332-30-125	NEW 80-09-005	352-48-060	NEW-P 80-08-070	356-34-020	AMD-P 80-15-098
332-30-127	NEW-P 80-05-113	352-48-060	NEW 80-12-022	356-34-030	AMD-P 80-15-098
332-30-127	NEW 80-09-005	352-48-070	NEW-P 80-08-070	356-34-040	AMD-P 80-15-098
332-30-130	NEW-P 80-05-113	352-48-070	NEW 80-12-022	356-34-050	AMD-P 80-15-098
332-30-130	NEW 80-09-005	352-48-080	NEW-P 80-08-070	356-34-060	REP-P 80-15-098
332-30-133	NEW-P 80-05-113	352-48-080	NEW 80-12-022	356-34-070	AMD-P 80-15-098
332-30-133	NEW 80-09-005	356-06-010	AMD-P 80-05-111	356-34-080	AMD-P 80-15-098
332-30-136	NEW-P 80-05-113	356-06-010	AMD-P 80-07-033	356-34-085	AMD-P 80-15-098
332-30-136	NEW 80-09-005	356-06-010	AMD 80-09-010	356-34-090	AMD-P 80-15-098
332-30-139	NEW-P 80-05-113	356-06-010	AMD-P 80-10-021	356-34-100	AMD-P 80-15-098
332-30-139	NEW 80-09-005	356-06-010	AMD 80-13-047	356-34-10501	AMD-P 80-15-098
332-30-142	NEW-P 80-05-113	356-06-020	AMD-P 80-04-075	356-34-110	AMD-P 80-15-098
332-30-142	NEW 80-09-005	356-06-020	AMD 80-06-032	356-34-113	AMD-P 80-15-098
332-30-145	NEW-P 80-05-113	356-06-040	AMD-P 80-02-137	356-34-120	AMD-P 80-15-098
332-30-145	NEW 80-09-005	356-06-040	AMD 80-04-025	356-34-130	AMD-P 80-15-098
332-30-148	NEW-P 80-05-113	356-10-050	AMD-P 80-06-132	356-34-140	AMD-P 80-15-098
332-30-148	NEW 80-09-005	356-10-050	AMD-P 80-10-033	356-34-150	AMD-P 80-15-098
332-30-151	NEW-P 80-05-113	356-10-050	AMD 80-13-047	356-34-160	AMD-P 80-15-098
332-30-151	NEW 80-09-005	356-10-060	AMD-P 80-06-132	356-34-170	AMD-P 80-15-098
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332-30-154	NEW 80-09-005	356-10-060	AMD 80-13-047	356-34-180	AMD-P 80-13-046
332-30-157	NEW-P 80-05-113	356-14-085	NEW-E 80-15-053	356-34-180	AMD-P 80-15-054
332-30-157	NEW 80-09-005	356-14-140	AMD-P 80-02-038	356-34-180	AMD-P 80-15-098
332-30-160	NEW-P 80-05-113	356-14-140	AMD 80-03-024	356-34-190	AMD-P 80-15-098
332-30-160	NEW 80-09-005	356-15-050	AMD-P 80-02-039	356-34-200	AMD-P 80-15-098
332-30-163	NEW-P 80-05-113	356-15-120	AMD-P 80-02-039	356-34-210	AMD-P 80-15-098
332-30-163	NEW 80-09-005	356-15-120	AMD-P 80-04-075	356-34-220	AMD-P 80-10-033
332-30-166	NEW-P 80-05-113	356-15-120	AMD-P 80-06-031	356-34-220	AMD-P 80-13-046
332-30-166	NEW 80-09-005	356-15-120	AMD-P 80-10-021	356-34-220	AMD-P 80-15-054
332-30-169	NEW-P 80-05-113	356-15-120	AMD-P 80-13-046	356-34-220	AMD-P 80-15-098
332-30-169	NEW 80-09-005	356-15-120	AMD-P 80-15-054	356-34-230	AMD-P 80-15-098
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332-44-100	NEW-E 80-08-012	356-18-020	AMD-P 80-02-039	356-34-260	AMD-P 80-15-098
332-44-110	NEW-E 80-06-060	356-18-025	AMD-P 80-02-039	356-34-270	AMD-P 80-15-098
332-44-110	NEW-E 80-08-012	356-18-030	AMD-P 80-02-039	356-34-280	AMD-P 80-15-098
332-44-120	NEW-E 80-06-060	356-18-040	AMD-P 80-02-039	356-34-290	AMD-P 80-15-098
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332-100-030	AMD-P 80-06-139	356-18-050	AMD-P 80-15-054	356-34-310	NEW-P 80-15-098
332-100-030	AMD 80-11-013	356-18-070	AMD 80-02-037	356-39-060	AMD-P 80-10-033
332-100-050	NEW-P 80-06-139	356-18-090	AMD-P 80-02-039	356-39-060	AMD 80-13-047
332-100-050	NEW 80-11-013	356-18-110	AMD-P 80-12-033	356-39-070	AMD-P 80-10-033
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356-42-010	AMD-P	80-07-033	365-31-010	AMD	80-05-023	365-33-730	REP-E	80-03-011
356-42-010	AMD-P	80-10-021	365-31-020	AMD-P	80-02-122	365-33-730	REP	80-05-023
356-42-010	AMD-E	80-12-032	365-31-020	AMD-E	80-03-011	365-33-740	REP-P	80-02-122
356-42-010	AMD	80-13-047	365-31-020	AMD	80-05-023	365-33-740	REP-E	80-03-011
356-42-020	AMD-P	80-10-021	365-31-110	AMD-P	80-02-122	365-33-740	REP	80-05-023
356-42-020	AMD-E	80-12-032	365-31-110	AMD-E	80-03-011	365-33-750	REP-P	80-02-122
356-42-020	AMD	80-13-047	365-31-110	AMD	80-05-023	365-33-750	REP-E	80-03-011
356-46-060	AMD-P	80-04-075	365-31-111	NEW-P	80-02-122	365-33-750	REP	80-05-023
356-46-060	AMD	80-06-033	365-31-111	NEW-E	80-03-011	365-33-760	REP-P	80-02-122
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360-11-010	AMD-P	80-06-077	365-31-120	AMD-P	80-02-122	365-33-760	REP	80-05-023
360-11-010	AMD	80-08-036	365-31-120	AMD-E	80-03-011	365-35-010	REP-P	80-02-122
360-11-023	NEW-P	80-04-071	365-31-120	AMD	80-05-023	365-35-010	REP-E	80-03-011
360-11-023	NEW-P	80-06-077	365-31-130	AMD-P	80-02-122	365-35-010	REP	80-05-023
360-11-023	NEW	80-08-036	365-31-130	AMD-E	80-03-011	365-35-900	REP-P	80-02-122
360-11-027	NEW-P	80-04-071	365-31-130	AMD	80-05-023	365-35-900	REP-E	80-03-011
360-11-027	NEW-P	80-06-077	365-31-150	AMD-P	80-02-122	365-35-900	REP	80-05-023
360-11-027	NEW	80-08-036	365-31-150	AMD-E	80-03-011	365-37-010	REP-P	80-02-122
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360-11-030	AMD-P	80-06-077	365-31-160	AMD-P	80-02-122	365-37-010	REP	80-05-023
360-11-033	NEW-P	80-04-071	365-31-160	AMD-E	80-03-011	365-37-110	REP-P	80-02-122
360-11-033	NEW-P	80-06-077	365-31-160	AMD	80-05-023	365-37-110	REP-E	80-03-011
360-11-033	NEW	80-08-036	365-31-170	AMD-P	80-02-122	365-37-110	REP	80-05-023
360-11-037	NEW-P	80-04-071	365-31-170	AMD-E	80-03-011	365-37-120	REP-P	80-02-122
360-11-037	NEW-P	80-06-077	365-31-170	AMD	80-05-023	365-37-120	REP-E	80-03-011
360-11-037	NEW	80-08-036	365-31-180	REP-P	80-02-122	365-37-120	REP	80-05-023
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360-11-040	AMD-P	80-06-077	365-31-180	REP	80-05-023	365-37-130	REP-E	80-03-011
360-11-040	AMD	80-08-036	365-31-210	AMD-P	80-02-122	365-37-130	REP	80-05-023
360-11-045	NEW-P	80-04-071	365-31-210	AMD-E	80-03-011	365-37-210	REP-P	80-02-122
360-11-045	NEW	80-08-036	365-31-210	AMD	80-05-023	365-37-210	REP-E	80-03-011
360-11-050	REP-P	80-04-071	365-31-310	REP-P	80-02-122	365-37-210	REP	80-05-023
360-11-050	REP-P	80-06-077	365-31-310	REP-E	80-03-011	365-37-220	REP-P	80-02-122
360-11-050	REP	80-08-036	365-31-310	REP	80-05-023	365-37-220	REP-E	80-03-011
360-11-060	AMD-P	80-04-071	365-31-320	REP-P	80-02-122	365-37-220	REP	80-05-023
360-11-060	AMD-P	80-06-077	365-31-320	REP-E	80-03-011	365-37-310	REP-P	80-02-122
360-11-060	AMD	80-08-036	365-31-320	REP	80-05-023	365-37-310	REP-E	80-03-011
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360-12-140	NEW	80-08-035	365-31-330	AMD-E	80-03-011	365-37-320	REP-P	80-02-122
360-18-010	NEW-P	80-03-091	365-31-330	AMD	80-05-023	365-37-320	REP-E	80-03-011
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360-18-020	NEW-P	80-03-091	365-31-340	REP-E	80-03-011	365-37-330	REP-P	80-02-122
360-18-020	AMD-P	80-05-070	365-31-340	REP	80-05-023	365-37-330	REP-E	80-03-011
360-18-020	NEW	80-05-074	365-31-350	REP-P	80-02-122	365-37-330	REP	80-05-023
360-18-020	AMD	80-08-035	365-31-350	REP-E	80-03-011	365-37-340	REP-P	80-02-122
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360-36-010	AMD	80-05-074	365-31-370	REP	80-05-023	365-37-510	REP-E	80-03-011
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360-36-100	REP	80-14-012	365-31-410	REP-E	80-03-011	365-37-520	REP-P	80-02-122
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360-36-110	REP-P	80-10-040	365-31-420	REP-P	80-02-122	365-37-520	REP	80-05-023
360-36-110	REP	80-14-012	365-31-420	REP-E	80-03-011	365-37-530	REP-P	80-02-122
360-36-120	REP-P	80-10-040	365-31-420	REP	80-05-023	365-37-530	REP-E	80-03-011
360-36-120	REP	80-14-012	365-31-430	REP-P	80-02-122	365-37-530	REP	80-05-023
360-36-130	REP-P	80-10-040	365-31-430	REP-E	80-03-011	365-37-540	REP-P	80-02-122
360-36-130	REP	80-14-012	365-31-430	REP	80-05-023	365-37-540	REP-E	80-03-011
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360-36-140	REP	80-14-012	365-31-440	REP-E	80-03-011	365-37-550	REP-P	80-02-122
360-36-230	AMD-P	80-03-091	365-31-440	REP	80-05-023	365-37-550	REP-E	80-03-011
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360-49-040	AMD-P	80-10-040	365-31-450	REP	80-05-023	365-37-560	REP-E	80-03-011
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365-50-010	REP	80-08-056	365-50-380	REP	80-08-056	388-24-255	REP-P	80-14-072
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365-50-020	REP	80-08-056	365-50-390	REP	80-08-056	388-24-260	REP-E	80-14-071
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365-50-030	REP	80-08-056	365-50-400	REP	80-08-056	388-24-265	AMD-P	80-11-065
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365-50-040	REP	80-08-056	365-50-500	REP	80-08-056	388-24-265	REP-P	80-14-072
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391-21-306	REP-P	80-09-092	391-21-721	NEW-P	80-02-156	391-21-750	REP-E	80-02-116
391-21-308	REP-P	80-09-092	391-21-721	NEW	80-04-073	391-21-750	REP-P	80-02-156
391-21-310	REP-P	80-09-092	391-21-721	NEW-E	80-04-074	391-21-750	REP	80-04-073
391-21-312	REP-P	80-09-092	391-21-721	REP-P	80-09-092	391-21-750	REP-E	80-04-074
391-21-314	REP-P	80-09-092	391-21-722	AMD-E	80-02-116	391-21-752	REP-E	80-02-116
391-21-316	REP-P	80-09-092	391-21-722	AMD-P	80-02-156	391-21-752	REP-P	80-02-156
391-21-318	REP-P	80-09-092	391-21-722	AMD	80-04-073	391-21-752	REP	80-04-073
391-21-320	REP-P	80-09-092	391-21-722	AMD-E	80-04-074	391-21-752	REP-E	80-04-074
391-21-321	REP-P	80-09-092	391-21-722	REP-P	80-09-092	391-21-754	REP-E	80-02-116

Table of WAC Sections Affected

WAC #		WSR #	WAC #		WSR #	WAC #		WSR #
391-21-754	REP-P	80-02-156	391-25-390	NEW-P	80-09-090	391-30-321	REP-P	80-09-092
391-21-754	REP	80-04-073	391-25-390	NEW	80-14-046	391-30-322	REP-P	80-09-092
391-21-754	REP-E	80-04-074	391-25-391	NEW-P	80-09-090	391-30-500	REP-P	80-09-092
391-21-756	REP-E	80-02-116	391-25-391	NEW	80-14-046	391-30-502	REP-P	80-09-092
391-21-756	REP-P	80-02-156	391-25-410	NEW-P	80-09-090	391-30-504	REP-P	80-09-092
391-21-756	REP	80-04-073	391-25-410	NEW	80-14-046	391-30-506	REP-P	80-09-092
391-21-756	REP-E	80-04-074	391-25-412	NEW-P	80-09-090	391-30-508	REP-P	80-09-092
391-21-758	REP-E	80-02-116	391-25-412	NEW	80-14-046	391-30-510	REP-P	80-09-092
391-21-758	REP-P	80-02-156	391-25-413	NEW-P	80-09-090	391-30-512	REP-P	80-09-092
391-21-758	REP	80-04-073	391-25-413	NEW	80-14-046	391-30-514	REP-P	80-09-092
391-21-758	REP-E	80-04-074	391-25-430	NEW-P	80-09-090	391-30-516	REP-P	80-09-092
391-21-760	REP-E	80-02-116	391-25-430	NEW	80-14-046	391-30-518	REP-P	80-09-092
391-21-760	REP-P	80-02-156	391-25-450	NEW-P	80-09-090	391-30-520	REP-P	80-09-092
391-21-760	REP	80-04-073	391-25-450	NEW	80-14-046	391-30-522	REP-P	80-09-092
391-21-760	REP-E	80-04-074	391-25-470	NEW-P	80-09-090	391-30-524	REP-P	80-09-092
391-21-800	REP-P	80-09-092	391-25-470	NEW	80-14-046	391-30-526	REP-P	80-09-092
391-21-802	REP-P	80-09-092	391-25-490	NEW-P	80-09-090	391-30-528	REP-P	80-09-092
391-21-804	REP-P	80-09-092	391-25-490	NEW	80-14-046	391-30-530	REP-P	80-09-092
391-21-806	REP-P	80-09-092	391-25-510	NEW-P	80-09-090	391-30-532	REP-P	80-09-092
391-21-808	REP-P	80-09-092	391-25-510	NEW	80-14-046	391-30-534	REP-P	80-09-092
391-21-810	REP-P	80-09-092	391-25-530	NEW-P	80-09-090	391-30-535	REP-P	80-09-092
391-21-812	REP-P	80-09-092	391-25-530	NEW	80-14-046	391-30-536	REP-P	80-09-092
391-21-814	REP-P	80-09-092	391-25-531	NEW-P	80-09-090	391-30-550	REP-P	80-09-092
391-21-900	REP-P	80-09-092	391-25-531	NEW	80-14-046	391-30-552	REP-P	80-09-092
391-25-001	NEW-P	80-09-090	391-25-550	NEW-P	80-09-090	391-30-554	REP-P	80-09-092
391-25-001	NEW	80-14-046	391-25-550	NEW	80-14-046	391-30-556	REP-P	80-09-092
391-25-002	NEW-P	80-09-090	391-25-570	NEW-P	80-09-090	391-30-560	REP-P	80-09-092
391-25-002	NEW	80-14-046	391-25-570	NEW	80-14-046	391-30-700	REP-P	80-09-092
391-25-010	NEW-P	80-09-090	391-25-590	NEW-P	80-09-090	391-30-702	REP-P	80-09-092
391-25-010	NEW	80-14-046	391-25-590	NEW	80-14-046	391-30-704	REP-P	80-09-092
391-25-012	NEW-P	80-09-090	391-25-610	NEW-P	80-09-090	391-30-706	REP-P	80-09-092
391-25-012	NEW	80-14-046	391-25-610	NEW	80-14-046	391-30-708	REP-P	80-09-092
391-25-030	NEW-P	80-09-090	391-25-630	NEW-P	80-09-090	391-30-710	REP-P	80-09-092
391-25-030	NEW	80-14-046	391-25-630	NEW	80-14-046	391-30-712	REP-P	80-09-092
391-25-050	NEW-P	80-09-090	391-25-650	NEW-P	80-09-090	391-30-714	REP-P	80-09-092
391-25-050	NEW	80-14-046	391-25-650	NEW	80-14-046	391-30-716	REP-P	80-09-092
391-25-070	NEW-P	80-09-090	391-25-670	NEW-P	80-09-090	391-30-718	REP-P	80-09-092
391-25-070	NEW	80-14-046	391-25-670	NEW	80-14-046	391-30-720	REP-P	80-09-092
391-25-090	NEW-P	80-09-090	391-30-001	REP-P	80-09-092	391-30-722	REP-P	80-09-092
391-25-090	NEW	80-14-046	391-30-100	REP-P	80-09-092	391-30-724	REP-P	80-09-092
391-25-092	NEW-P	80-09-090	391-30-102	REP-P	80-09-092	391-30-726	REP-P	80-09-092
391-25-092	NEW	80-14-046	391-30-104	REP-P	80-09-092	391-30-728	REP-P	80-09-092
391-25-110	NEW-P	80-09-090	391-30-106	REP-P	80-09-092	391-30-730	REP-P	80-09-092
391-25-130	NEW-P	80-09-090	391-30-108	REP-P	80-09-092	391-30-732	REP-P	80-09-092
391-25-130	NEW	80-14-046	391-30-110	REP-P	80-09-092	391-30-734	REP-P	80-09-092
391-25-150	NEW-P	80-09-090	391-30-112	REP-P	80-09-092	391-30-736	REP-P	80-09-092
391-25-150	NEW	80-14-046	391-30-113	REP-P	80-09-092	391-30-738	REP-P	80-09-092
391-25-170	NEW-P	80-09-090	391-30-114	REP-P	80-09-092	391-30-900	REP-P	80-09-092
391-25-170	NEW	80-14-046	391-30-116	REP-P	80-09-092	391-35-001	NEW-P	80-09-091
391-25-190	NEW-P	80-09-090	391-30-118	REP-P	80-09-092	391-35-002	NEW-P	80-09-091
391-25-210	NEW-P	80-09-090	391-30-120	REP-P	80-09-092	391-35-002	NEW	80-14-047
391-25-210	NEW	80-14-046	391-30-122	REP-P	80-09-092	391-35-010	NEW-P	80-09-091
391-25-230	NEW-P	80-09-090	391-30-124	REP-P	80-09-092	391-35-010	NEW	80-14-047
391-25-230	NEW	80-14-046	391-30-126	REP-P	80-09-092	391-35-030	NEW-P	80-09-091
391-25-250	NEW-P	80-09-090	391-30-128	REP-P	80-09-092	391-35-030	NEW	80-14-047
391-25-250	NEW	80-14-046	391-30-130	REP-P	80-09-092	391-35-050	NEW-P	80-09-091
391-25-252	NEW-P	80-09-090	391-30-132	REP-P	80-09-092	391-35-050	NEW	80-14-047
391-25-252	NEW	80-14-046	391-30-134	REP-P	80-09-092	391-35-070	NEW-P	80-09-091
391-25-253	NEW-P	80-09-090	391-30-136	REP-P	80-09-092	391-35-070	NEW	80-14-047
391-25-253	NEW	80-14-046	391-30-137	REP-P	80-09-092	391-35-090	NEW-P	80-09-091
391-25-270	NEW-P	80-09-090	391-30-138	REP-P	80-09-092	391-35-090	NEW	80-14-047
391-25-270	NEW	80-14-046	391-30-140	REP-P	80-09-092	391-35-099	NEW-P	80-09-091
391-25-290	NEW-P	80-09-090	391-30-142	REP-P	80-09-092	391-35-099	NEW	80-14-047
391-25-290	NEW	80-14-046	391-30-300	REP-P	80-09-092	391-35-110	NEW-P	80-09-091
391-25-299	NEW-P	80-09-090	391-30-302	REP-P	80-09-092	391-35-110	NEW	80-14-047
391-25-299	NEW	80-14-046	391-30-304	REP-P	80-09-092	391-35-130	NEW-P	80-09-091
391-25-310	NEW-P	80-09-090	391-30-306	REP-P	80-09-092	391-35-150	NEW	80-14-047
391-25-310	NEW	80-14-046	391-30-308	REP-P	80-09-092	391-35-150	NEW-P	80-09-091
391-25-330	NEW-P	80-09-090	391-30-310	REP-P	80-09-092	391-35-170	NEW-P	80-09-091
391-25-330	NEW	80-14-046	391-30-312	REP-P	80-09-092	391-35-170	NEW	80-14-047
391-25-350	NEW-P	80-09-090	391-30-314	REP-P	80-09-092	391-35-190	NEW-P	80-09-091
391-25-350	NEW	80-14-046	391-30-316	REP-P	80-09-092	391-35-190	NEW	80-14-047
391-25-370	NEW-P	80-09-090	391-30-318	REP-P	80-09-092			
391-25-370	NEW	80-14-046	391-30-320	REP-P	80-09-092			

Table of WAC Sections Affected

WAC #		WSR #	WAC #		WSR #	WAC #		WSR #
391-35-210	NEW-P	80-09-091	391-50-114	REP-P	80-09-092	391-55-210	NEW	80-14-049
391-35-210	NEW	80-14-047	391-50-116	REP-P	80-09-092	391-55-215	NEW-P	80-09-094
391-35-230	NEW-P	80-09-091	391-50-118	REP-P	80-09-092	391-55-215	NEW	80-14-049
391-35-230	NEW	80-14-047	391-50-120	REP-P	80-09-092	391-55-220	NEW-P	80-09-094
391-35-250	NEW-P	80-09-091	391-50-122	REP-P	80-09-092	392-55-220	NEW	80-14-049
391-35-250	NEW	80-14-047	391-50-124	REP-P	80-09-092	391-55-225	NEW-P	80-09-094
391-45-001	NEW-P	80-09-093	391-50-126	REP-P	80-09-092	391-55-225	NEW	80-14-049
391-45-001	NEW	80-14-048	391-50-128	REP-P	80-09-092	391-55-230	NEW-P	80-09-094
391-45-002	NEW-P	80-09-093	391-50-130	REP-P	80-09-092	391-55-230	NEW	80-14-049
391-45-002	NEW	80-14-048	391-50-132	REP-P	80-09-092	391-55-235	NEW-P	80-09-094
391-45-010	NEW-P	80-09-093	391-50-134	REP-P	80-09-092	391-55-235	NEW	80-14-049
391-45-010	NEW	80-14-048	391-50-136	REP-P	80-09-092	391-55-240	NEW-P	80-09-094
391-45-013	NEW-P	80-09-093	391-50-137	REP-P	80-09-092	391-55-240	NEW	80-14-049
391-45-013	NEW	80-14-048	391-50-138	REP-P	80-09-092	391-55-245	NEW-P	80-09-094
391-45-019	NEW-P	80-09-093	391-50-140	REP-P	80-09-092	391-55-245	NEW	80-14-049
391-45-019	NEW	80-14-048	391-50-142	REP-P	80-09-092	391-55-255	NEW-P	80-09-094
391-45-030	NEW-P	80-09-093	391-50-300	REP-P	80-09-092	391-55-255	NEW	80-14-049
391-45-030	NEW	80-14-048	391-50-302	REP-P	80-09-092	391-55-260	NEW-P	80-09-094
391-45-050	NEW-P	80-09-093	391-50-304	REP-P	80-09-092	391-55-260	NEW	80-14-049
391-45-050	NEW	80-14-048	391-50-306	REP-P	80-09-092	391-55-300	NEW-P	80-09-094
391-45-070	NEW-P	80-09-093	391-50-308	REP-P	80-09-092	391-55-300	NEW	80-14-049
391-45-070	NEW	80-14-048	391-50-310	REP-P	80-09-092	391-55-310	NEW-P	80-09-094
391-45-090	NEW-P	80-09-093	391-50-312	REP-P	80-09-092	391-55-310	NEW	80-14-049
391-45-090	NEW	80-14-048	391-50-314	REP-P	80-09-092	391-55-315	NEW-P	80-09-094
391-45-110	NEW-P	80-09-093	391-50-316	REP-P	80-09-092	391-55-315	NEW	80-14-049
391-45-110	NEW	80-14-048	391-50-318	REP-P	80-09-092	391-55-320	NEW-P	80-09-094
391-45-130	NEW-P	80-09-093	391-50-320	REP-P	80-09-092	391-55-320	NEW	80-14-049
391-45-130	NEW	80-14-048	391-50-321	REP-P	80-09-092	391-55-325	NEW-P	80-09-094
391-45-150	NEW-P	80-09-093	391-50-322	REP-P	80-09-092	391-55-325	NEW	80-14-049
391-45-150	NEW	80-14-048	391-50-700	REP-P	80-09-092	391-55-330	NEW-P	80-09-094
391-45-170	NEW-P	80-09-093	391-50-702	REP-P	80-09-092	391-55-330	NEW	80-14-049
391-45-170	NEW	80-14-048	391-50-706	REP-P	80-09-092	391-55-335	NEW-P	80-09-094
391-45-171	NEW-P	80-09-093	391-50-708	REP-P	80-09-092	391-55-340	NEW-P	80-09-094
391-45-171	NEW	80-14-048	391-50-710	REP-P	80-09-092	391-55-340	NEW	80-14-049
391-45-190	NEW-P	80-09-093	391-50-712	REP-P	80-09-092	391-55-345	NEW-P	80-09-094
391-45-190	NEW	80-14-048	391-50-714	REP-P	80-09-092	391-55-350	NEW-P	80-09-094
391-45-210	NEW-P	80-09-093	391-50-716	REP-P	80-09-092	391-55-350	NEW	80-14-049
391-45-210	NEW	80-14-048	391-50-718	REP-P	80-09-092	391-55-355	NEW-P	80-09-094
391-45-230	NEW-P	80-09-093	391-50-720	REP-P	80-09-092	391-55-355	NEW	80-14-049
391-45-230	NEW	80-14-048	391-50-722	REP-P	80-09-092	391-55-360	NEW-P	80-09-094
391-45-250	NEW-P	80-09-093	391-50-724	REP-P	80-09-092	391-55-360	NEW	80-14-049
391-45-250	NEW	80-14-048	391-50-728	REP-P	80-09-092	391-55-400	NEW-P	80-09-094
391-45-270	NEW-P	80-09-093	391-50-730	REP-P	80-09-092	391-55-400	NEW	80-14-049
391-45-270	NEW	80-14-048	391-50-732	REP-P	80-09-092	391-55-410	NEW-P	80-09-094
391-45-290	NEW-P	80-09-093	391-50-734	REP-P	80-09-092	391-55-410	NEW	80-14-049
391-45-290	NEW	80-14-048	391-55-001	NEW-P	80-09-094	391-55-415	NEW-P	80-09-094
391-45-310	NEW-P	80-09-093	391-55-001	NEW	80-14-049	391-55-415	NEW	80-14-049
391-45-310	NEW	80-14-048	391-55-002	NEW-P	80-09-094	391-55-420	NEW-P	80-09-094
391-45-330	NEW-P	80-09-093	391-55-002	NEW	80-14-049	391-55-425	NEW	80-14-049
391-45-330	NEW	80-14-048	391-55-010	NEW-P	80-09-094	391-55-425	NEW-P	80-09-094
391-45-350	NEW-P	80-09-093	391-55-010	NEW	80-14-049	391-55-425	NEW	80-14-049
391-45-350	NEW	80-14-048	391-55-030	NEW-P	80-09-094	391-55-430	NEW-P	80-09-094
391-45-370	NEW-P	80-09-093	391-55-030	NEW	80-14-049	391-55-430	NEW	80-14-049
391-45-370	NEW	80-14-048	391-55-032	NEW-P	80-09-094	391-55-435	NEW-P	80-09-094
391-45-390	NEW-P	80-09-093	391-55-032	NEW	80-14-049	391-55-435	NEW	80-14-049
391-45-390	NEW	80-14-048	391-55-033	NEW-P	80-09-094	391-55-440	NEW-P	80-09-094
391-45-410	NEW-P	80-09-093	391-55-033	NEW	80-14-049	391-55-440	NEW	80-14-049
391-45-410	NEW	80-14-048	391-55-050	NEW-P	80-09-094	391-55-445	NEW-P	80-09-094
391-45-430	NEW-P	80-09-093	391-55-050	NEW	80-14-049	391-55-445	NEW	80-14-049
391-45-430	NEW	80-14-048	391-55-070	NEW-P	80-09-094	391-55-450	NEW-P	80-09-094
391-45-431	NEW-P	80-09-093	391-55-070	NEW	80-14-049	391-55-450	NEW	80-14-049
391-45-431	NEW	80-14-048	391-55-090	NEW-P	80-09-094	391-55-455	NEW-P	80-09-094
391-45-550	NEW-P	80-09-093	391-55-090	NEW	80-14-049	391-55-455	NEW	80-14-049
391-45-550	NEW	80-14-048	391-55-110	NEW-P	80-09-094	391-55-500	NEW-P	80-09-094
391-50-001	REP-P	80-09-092	391-55-110	NEW	80-14-049	391-55-500	NEW	80-14-049
391-50-100	REP-P	80-09-092	391-55-130	NEW-P	80-09-094	391-55-505	NEW-P	80-09-094
391-50-102	REP-P	80-09-092	391-55-130	NEW	80-14-049	391-55-505	NEW	80-14-049
391-50-104	REP-P	80-09-092	391-55-150	NEW-P	80-09-094	391-55-510	NEW-P	80-09-094
391-50-105	REP-P	80-09-092	391-55-150	NEW	80-14-049	391-55-510	NEW	80-14-049
391-50-106	REP-P	80-09-092	391-55-200	NEW-P	80-09-094	391-55-515	NEW-P	80-09-094
391-50-108	REP-P	80-09-092	391-55-200	NEW	80-14-049	391-55-515	NEW	80-14-049
391-50-110	REP-P	80-09-092	391-55-205	NEW-P	80-09-094	391-55-520	NEW-P	80-09-094
391-50-112	REP-P	80-09-092	391-55-205	NEW	80-14-049	391-55-520	NEW	80-14-049
391-50-113	REP-P	80-09-092	391-55-210	NEW-P	80-09-094	391-55-525	NEW-P	80-09-094

Table of WAC Sections Affected

WAC #	WSR #	WAC #	WSR #	WAC #	WSR #			
391-55-525	NEW	80-14-049	391-70-220	REP-P	80-09-092	392-109-040	NEW-P	80-05-136
391-55-530	NEW-P	80-09-094	391-70-245	REP-P	80-09-092	392-109-040	NEW	80-07-038
391-55-530	NEW	80-14-049	391-70-260	REP-P	80-09-092	392-109-045	NEW-P	80-05-136
391-55-535	NEW-P	80-09-094	391-70-300	REP-P	80-09-092	392-109-045	NEW	80-07-038
391-55-535	NEW	80-14-049	391-95-001	NEW-P	80-09-092	392-109-050	NEW-P	80-05-136
391-55-540	NEW-P	80-09-094	391-95-001	NEW	80-14-051	392-109-050	NEW	80-07-038
391-55-540	NEW	80-14-049	391-95-010	NEW-P	80-09-092	392-109-055	NEW-P	80-05-136
391-55-545	NEW-P	80-09-094	391-95-010	NEW	80-14-051	392-109-055	NEW	80-07-038
391-55-545	NEW	80-14-049	391-95-030	NEW-P	80-09-092	392-109-060	NEW-P	80-05-136
391-55-560	NEW-P	80-09-094	391-95-030	NEW	80-14-051	392-109-060	NEW	80-07-038
391-55-560	NEW	80-14-049	391-95-050	NEW-P	80-09-092	392-109-065	NEW-P	80-05-136
391-65-001	NEW-P	80-09-095	391-95-050	NEW	80-14-051	392-109-065	NEW	80-07-038
391-65-001	NEW	80-14-050	391-95-070	NEW-P	80-09-092	392-109-070	NEW-P	80-05-136
391-65-002	NEW-P	80-09-095	391-95-070	NEW	80-14-051	392-109-070	NEW	80-07-038
391-65-002	NEW	80-14-050	391-95-090	NEW-P	80-09-092	392-109-075	NEW-P	80-05-136
391-65-010	NEW	80-14-050	391-95-090	NEW	80-14-051	392-109-075	NEW	80-07-038
391-65-030	NEW-P	80-09-095	391-95-110	NEW-P	80-09-092	392-109-080	NEW-P	80-05-136
391-65-030	NEW	80-14-050	391-95-110	NEW	80-14-051	392-109-080	NEW	80-07-038
391-65-050	NEW-P	80-09-095	391-95-130	NEW-P	80-09-092	392-109-085	NEW-P	80-05-136
391-65-050	NEW	80-14-050	391-95-150	NEW-P	80-09-092	392-109-085	NEW	80-07-038
391-65-070	NEW-P	80-09-095	391-95-150	NEW	80-14-051	392-109-090	NEW-P	80-05-136
391-65-070	NEW	80-14-050	391-95-170	NEW-P	80-09-092	392-109-090	NEW	80-07-038
391-65-072	NEW-P	80-09-095	391-95-170	NEW	80-14-051	392-109-095	NEW-P	80-05-136
391-65-072	NEW	80-14-050	391-95-190	NEW-P	80-09-092	392-109-095	NEW	80-07-038
391-65-073	NEW-P	80-09-095	391-95-190	NEW	80-14-051	392-109-100	NEW-P	80-05-136
391-65-073	NEW	80-14-050	391-95-210	NEW-P	80-09-092	392-109-100	NEW	80-07-038
391-65-074	NEW-P	80-09-095	391-95-210	NEW	80-14-051	392-109-105	NEW-P	80-05-136
391-65-074	NEW	80-14-050	391-95-230	NEW-P	80-09-092	392-109-105	NEW	80-07-038
391-65-090	NEW-P	80-09-095	391-95-230	NEW	80-14-051	392-109-110	NEW-P	80-05-136
391-65-090	NEW	80-14-050	391-95-250	NEW-P	80-09-092	392-109-110	NEW	80-07-038
391-65-094	NEW-P	80-09-095	391-95-250	NEW	80-14-051	392-109-115	NEW-P	80-05-136
391-65-094	NEW	80-14-050	391-95-270	NEW-P	80-09-092	392-109-115	NEW	80-07-038
391-65-110	NEW-P	80-09-095	391-95-270	NEW	80-14-051	392-109-120	NEW-P	80-05-136
391-65-110	NEW	80-14-050	391-95-290	NEW-P	80-09-092	392-109-120	NEW	80-07-038
391-65-130	NEW-P	80-09-095	391-95-290	NEW	80-14-051	392-121	AMD-P	80-09-014
391-65-130	NEW	80-14-050	391-95-310	NEW-P	80-09-092	392-121	AMD-P	80-09-099
391-65-150	NEW-P	80-09-095	392-105-001	NEW-P	80-03-103	392-121-005	REP-P	80-06-176
391-65-150	NEW	80-14-050	392-105-001	NEW	80-05-034	392-121-005	REP	80-10-010
391-65-500	NEW-P	80-09-095	392-105-003	NEW-P	80-03-103	392-121-010	REP-P	80-06-176
391-65-500	NEW	80-14-050	392-105-003	NEW	80-05-034	392-121-010	REP	80-10-010
391-65-510	NEW-P	80-09-095	392-105-005	NEW-P	80-03-103	392-121-015	REP-P	80-06-176
391-65-510	NEW	80-14-050	392-105-005	NEW	80-05-034	392-121-015	REP	80-10-010
391-65-515	NEW-P	80-09-095	392-105-010	AMD-P	80-03-103	392-121-020	REP-P	80-06-176
391-65-515	NEW	80-14-050	392-105-010	AMD	80-05-034	392-121-020	REP	80-10-010
391-65-525	NEW-P	80-09-095	392-105-013	NEW-P	80-03-103	392-121-025	REP-P	80-06-176
391-65-525	NEW	80-14-050	392-105-013	NEW	80-05-034	392-121-025	REP	80-10-010
391-65-530	NEW-P	80-09-095	392-105-015	AMD-P	80-03-103	392-121-030	REP-P	80-06-176
391-65-530	NEW	80-14-050	392-105-015	AMD	80-05-034	392-121-030	REP	80-10-010
391-65-535	NEW-P	80-09-095	392-105-020	AMD-P	80-03-103	392-121-035	REP-P	80-06-176
391-65-535	NEW	80-14-050	392-105-020	AMD	80-05-034	392-121-035	REP	80-10-010
391-65-540	NEW-P	80-09-095	392-105-025	AMD-P	80-03-103	392-121-040	REP-P	80-06-176
391-65-540	NEW	80-14-050	392-105-025	AMD	80-05-034	392-121-040	REP	80-10-010
391-65-545	NEW-P	80-09-095	392-105-030	AMD-P	80-03-103	392-121-045	REP-P	80-06-176
391-65-545	NEW	80-14-050	392-105-030	AMD	80-05-034	392-121-045	REP	80-10-010
391-65-550	NEW-P	80-09-095	392-105-035	NEW-P	80-03-103	392-121-050	REP-P	80-06-176
391-65-550	NEW	80-14-050	392-105-035	NEW	80-05-034	392-121-050	REP	80-10-010
391-65-555	NEW-P	80-09-095	392-109-005	REP-P	80-05-136	392-121-055	REP-P	80-06-176
391-65-555	NEW	80-14-050	392-109-005	REP	80-07-038	392-121-055	REP	80-10-010
391-65-560	NEW	80-14-050	392-109-006	REP-P	80-05-136	392-121-060	REP-P	80-06-176
391-65-560	NEW-P	80-09-095	392-109-006	REP	80-07-038	392-121-060	REP	80-10-010
391-70-010	REP-P	80-09-092	392-109-010	REP-P	80-05-136	392-121-065	AMD-E	80-04-019
391-70-020	REP-P	80-09-092	392-109-010	REP	80-07-038	392-121-065	REP-P	80-06-176
391-70-030	REP-P	80-09-092	392-109-015	REP-P	80-05-136	392-121-065	REP	80-10-010
391-70-040	REP-P	80-09-092	392-109-015	REP	80-07-038	392-121-100	NEW-P	80-06-176
391-70-050	REP-P	80-09-092	392-109-020	REP-P	80-05-136	392-121-100	NEW	80-10-010
391-70-070	REP-P	80-09-092	392-109-020	REP	80-07-038	392-121-105	NEW-P	80-06-176
391-70-080	REP-P	80-09-092	392-109-025	REP-P	80-05-136	392-121-105	NEW	80-10-010
391-70-090	REP-P	80-09-092	392-109-025	REP	80-07-038	392-121-110	NEW-P	80-06-176
391-70-105	REP-P	80-09-092	392-109-026	REP-P	80-05-136	392-121-110	NEW	80-10-010
391-70-110	REP-P	80-09-092	392-109-026	REP	80-07-038	392-121-115	NEW-P	80-06-176
391-70-120	REP-P	80-09-092	392-109-030	REP-P	80-05-136	392-121-115	NEW	80-10-010
391-70-140	REP-P	80-09-092	392-109-030	REP	80-07-038	392-121-120	NEW-P	80-06-176
391-70-170	REP-P	80-09-092	392-109-035	REP-P	80-05-136	392-121-120	NEW	80-10-010
			392-109-035	REP	80-07-038	392-121-125	NEW-P	80-06-176

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WAC #		WSR #	WAC #		WSR #	WAC #		WSR #
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392-139-026	NEW-P	80-15-119	392-141-060	REP	80-09-055	392-161-118	NEW	80-09-016
392-139-030	REP-E	80-15-041	392-141-061	NEW-P	80-09-100	392-161-135	AMD-P	80-06-177
392-139-030	REP-P	80-15-119	392-141-061	NEW	80-12-030	392-161-135	AMD	80-09-016
392-139-031	NEW-E	80-15-041	392-145-030	AMD-P	80-06-174	392-161-145	AMD-P	80-06-177
392-139-031	NEW-P	80-15-119	392-145-030	AMD	80-09-081	392-161-145	AMD	80-09-016
392-139-035	REP-E	80-15-041	392-151-015	AMD-P	80-06-172	392-161-150	AMD-P	80-06-177
392-139-035	REP-P	80-15-119	392-151-015	AMD	80-09-015	392-161-150	AMD	80-09-016
392-139-036	NEW-E	80-15-041	392-151-050	AMD-P	80-06-172	392-161-155	AMD-P	80-06-177
392-139-036	NEW-P	80-15-119	392-151-050	AMD	80-09-015	392-161-155	AMD	80-09-016
392-139-040	REP-E	80-15-041	392-151-090	AMD-P	80-06-172	392-161-160	AMD-P	80-06-177
392-139-040	REP-P	80-15-119	392-151-090	AMD	80-09-015	392-161-160	AMD	80-09-016
392-139-045	REP-E	80-15-041	392-153-010	AMD-P	80-06-171	392-161-170	NEW-P	80-06-177
392-139-045	REP-P	80-15-119	392-153-010	AMD	80-09-027	392-161-170	NEW	80-09-016
392-140-001	AMD-P	80-03-107	392-153-015	AMD-P	80-06-171	392-161-175	NEW-P	80-06-177
392-140-001	AMD	80-05-038	392-153-015	AMD	80-09-027	392-161-175	NEW	80-09-016
392-140-002	REP-P	80-03-107	392-153-020	AMD-P	80-06-171	392-161-180	NEW-P	80-06-177
392-140-002	REP	80-05-038	392-153-020	AMD	80-09-027	392-161-180	NEW	80-09-016
392-140-003	REP-P	80-03-107	392-153-032	AMD-P	80-06-171	392-161-185	NEW-P	80-06-177
392-140-003	REP	80-05-038	392-153-032	AMD	80-09-027	392-161-185	NEW	80-09-016
392-140-004	REP-P	80-03-107	392-153-035	AMD-P	80-06-171	392-167-005	REP-P	80-03-109
392-140-004	REP	80-05-038	392-153-035	AMD	80-09-027	392-167-005	REP	80-05-040
392-140-005	REP-P	80-03-107	392-153-040	AMD-P	80-06-171	392-167-010	REP-P	80-03-109
392-140-005	REP	80-05-038	392-153-040	AMD	80-09-027	392-167-010	REP	80-05-040
392-140-006	REP-P	80-03-107	392-160-001	NEW-P	80-05-135	392-167-015	REP-P	80-03-109
392-140-006	REP	80-05-038	392-160-001	NEW	80-07-039	392-167-015	REP	80-05-040
392-140-007	REP-P	80-03-107	392-160-005	NEW-P	80-05-135	392-167-020	REP-P	80-03-109
392-140-007	REP	80-05-038	392-160-005	NEW	80-07-039	392-167-020	REP	80-05-040
392-140-008	REP-P	80-03-107	392-160-010	NEW-P	80-05-135	392-167-025	REP-P	80-03-109
392-140-008	REP	80-05-038	392-160-010	NEW	80-07-039	392-167-025	REP	80-05-040
392-141-005	AMD-P	80-03-108	392-160-015	NEW-P	80-05-135	392-167-030	REP-P	80-03-109
392-141-005	AMD	80-05-039	392-160-015	NEW	80-07-039	392-167-030	REP	80-05-040
392-141-007	NEW-P	80-03-108	392-160-020	NEW-P	80-05-135	392-167-035	REP-P	80-03-109
392-141-007	NEW	80-05-039	392-160-020	NEW	80-07-039	392-167-035	REP	80-05-040
392-141-008	NEW-P	80-03-108	392-160-025	NEW-P	80-05-135	392-167-040	REP-P	80-03-109
392-141-008	NEW	80-05-039	392-160-025	NEW	80-07-039	392-167-040	REP	80-05-040
392-141-010	REP-P	80-06-036	392-160-030	NEW-P	80-05-135	392-167-045	REP-P	80-03-109
392-141-010	REP	80-09-055	392-160-030	NEW	80-07-039	392-167-045	REP	80-05-040
392-141-015	REP-P	80-06-036	392-160-035	NEW-P	80-05-135	392-167-050	REP-P	80-03-109
392-141-015	REP	80-09-055	392-160-035	NEW	80-07-039	392-167-050	REP	80-05-040
392-141-017	NEW-P	80-03-108	392-160-040	NEW-P	80-05-135	392-167-055	REP-P	80-03-109
392-141-017	NEW	80-05-039	392-160-040	NEW	80-07-039	392-167-055	REP	80-05-040
392-141-018	NEW-P	80-03-108	392-160-045	NEW-P	80-05-135	392-167-060	REP-P	80-03-109
392-141-018	NEW	80-05-039	392-160-045	NEW	80-07-039	392-167-060	REP	80-05-040
392-141-020	REP-P	80-06-036	392-161-005	AMD-P	80-06-177	392-167-065	REP-P	80-03-109
392-141-020	REP	80-09-055	392-161-005	AMD	80-09-016	392-167-065	REP	80-05-040
392-141-025	REP-P	80-06-036	392-161-010	AMD-P	80-06-177	392-167-070	REP-P	80-03-109
392-141-025	REP	80-09-055	392-161-010	AMD	80-09-016	392-167-070	REP	80-05-040
392-141-027	NEW-P	80-03-108	392-161-025	AMD-P	80-06-177	392-167-075	REP-P	80-03-109
392-141-027	NEW	80-05-039	392-161-025	AMD	80-09-016	392-167-075	REP	80-05-040
392-141-028	NEW-P	80-03-108	392-161-040	AMD-P	80-06-177	392-171	AMD-P	80-08-002
392-141-028	NEW	80-05-039	392-161-040	AMD	80-09-016	392-171	AMD-P	80-09-058
392-141-030	REP-P	80-06-036	392-161-065	AMD-P	80-06-177	392-171	AMD-P	80-11-036
392-141-030	REP	80-09-055	392-161-065	AMD	80-09-016	392-171-300	AMD-P	80-05-137
392-141-035	REP-P	80-06-036	392-161-080	AMD-P	80-06-177	392-171-300	AMD	80-11-054
392-141-035	REP	80-09-055	392-161-080	AMD	80-09-016	392-171-300	AMD-E	80-12-020
392-141-037	NEW-P	80-03-108	392-161-085	AMD-P	80-06-177	392-171-305	NEW-P	80-05-137
392-141-037	NEW	80-05-039	392-161-085	AMD	80-09-016	392-171-310	AMD-P	80-05-137
392-141-038	NEW-P	80-03-108	392-161-090	AMD-P	80-06-177	392-171-310	AMD	80-11-054
392-141-038	NEW	80-05-039	392-161-090	AMD	80-09-016	392-171-310	AMD-E	80-12-020
392-141-040	REP-P	80-06-036	392-161-100	REP-P	80-06-177	392-171-311	NEW-P	80-05-137
392-141-040	REP	80-09-055	392-161-100	REP	80-09-016	392-171-311	NEW	80-11-054
392-141-042	NEW-P	80-03-108	392-161-101	NEW-P	80-06-177	392-171-311	NEW-E	80-12-020
392-141-042	NEW	80-05-039	392-161-101	NEW	80-09-016	392-171-315	AMD-P	80-05-137
392-141-043	NEW-P	80-03-108	392-161-104	NEW-P	80-06-177	392-171-315	AMD	80-11-054
392-141-043	NEW	80-05-039	392-161-104	NEW	80-09-016	392-171-315	AMD-E	80-12-020
392-141-045	AMD-P	80-03-108	392-161-105	REP-P	80-06-177	392-171-320	AMD-P	80-05-137
392-141-045	AMD	80-05-039	392-161-105	REP	80-09-016	392-171-320	AMD	80-11-054
392-141-050	REP-P	80-06-036	392-161-110	REP-P	80-06-177	392-171-320	AMD-E	80-12-020
392-141-050	REP	80-09-055	392-161-110	REP	80-09-016	392-171-325	AMD-P	80-05-137
392-141-054	NEW-P	80-09-100	392-161-115	REP-P	80-06-177	392-171-325	AMD	80-11-054
392-141-054	NEW	80-12-030	392-161-115	REP	80-09-016	392-171-325	AMD-E	80-12-020
392-141-055	AMD-P	80-03-108	392-161-116	NEW-P	80-06-177	392-171-330	REP-P	80-05-137
392-141-055	AMD	80-05-039	392-161-116	NEW	80-09-016	392-171-330	REP	80-11-054

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392-171-331	NEW-E 80-12-020	392-171-391	NEW 80-11-054	392-171-455	AM/DE-P 80-05-137
392-171-335	REP-P 80-05-137	392-171-391	NEW-E 80-12-020	392-171-455	REP 80-11-054
392-171-335	REP 80-11-054	392-171-395	AM/DE-P 80-05-137	392-171-455	REP-E 80-12-020
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392-171-336	NEW-E 80-12-020	392-171-396	NEW 80-11-054	392-171-460	AM/DE-P 80-05-137
392-171-340	REP-P 80-05-137	392-171-396	NEW-E 80-12-020	392-171-460	AM/DE 80-11-054
392-171-340	REP 80-11-054	392-171-400	AM/DE-P 80-05-137	392-171-460	AM/DE-E 80-12-020
392-171-340	REP-E 80-12-020	392-171-400	AM/DE 80-11-054	392-171-461	RECOD-P 80-05-137
392-171-341	RECOD-P 80-05-137	392-171-400	AM/DE-E 80-12-020	392-171-461	RECOD 80-11-054
392-171-341	RECOD 80-11-054	392-171-401	NEW-P 80-05-137	392-171-461	RECOD-E 80-12-020
392-171-341	RECOD-E 80-12-020	392-171-401	NEW 80-11-054	392-171-465	REP-P 80-05-137
392-171-345	REP-P 80-05-137	392-171-401	NEW-E 80-12-020	392-171-465	REP 80-11-054
392-171-345	REP 80-11-054	392-171-405	AM/DE-P 80-05-137	392-171-465	REP-E 80-12-020
392-171-345	REP-E 80-12-020	392-171-405	AM/DE 80-11-054	392-171-466	RECOD-P 80-05-137
392-171-346	RECOD-P 80-05-137	392-171-405	AM/DE-E 80-12-020	392-171-466	RECOD 80-11-054
392-171-346	RECOD 80-11-054	392-171-406	RECOD-P 80-05-137	392-171-466	RECOD-E 80-12-020
392-171-346	RECOD-E 80-12-020	392-171-406	RECOD 80-11-054	392-171-470	REP-P 80-05-137
392-171-350	AM/DE-P 80-05-137	392-171-406	RECOD-E 80-12-020	392-171-470	REP 80-11-054
392-171-350	AM/DE 80-11-054	392-171-410	REP-P 80-05-137	392-171-470	REP-E 80-12-020
392-171-350	AM/DE-E 80-12-020	392-171-410	REP 80-11-054	392-171-471	RECOD-P 80-05-137
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392-171-351	RECOD-E 80-12-020	392-171-411	RECOD 80-11-054	392-171-475	REP-P 80-05-137
392-171-355	AM/DE-P 80-05-137	392-171-411	RECOD-E 80-12-020	392-171-475	REP 80-11-054
392-171-355	AM/DE 80-11-054	392-171-415	REP-P 80-05-137	392-171-475	REP-E 80-12-020
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392-171-356	AM/DE-P 80-05-137	392-171-415	REP-E 80-12-020	392-171-476	NEW 80-11-054
392-171-356	AM/DE 80-11-054	392-171-416	RECOD-P 80-05-137	392-171-476	NEW-E 80-12-020
392-171-356	AM/DE-E 80-12-020	392-171-416	RECOD 80-11-054	392-171-480	AM/DE-P 80-05-137
392-171-358	RECOD-P 80-05-137	392-171-416	RECOD-E 80-12-020	392-171-480	AM/DE 80-11-054
392-171-358	RECOD 80-11-054	392-171-420	AM/DE-P 80-05-137	392-171-480	AM/DE-E 80-12-020
392-171-358	RECOD-E 80-12-020	392-171-420	AM/DE 80-11-054	392-171-481	RECOD-P 80-05-137
392-171-360	REP-P 80-05-137	392-171-420	AM/DE-E 80-12-020	392-171-481	RECOD 80-11-054
392-171-360	REP 80-11-054	392-171-421	NEW-P 80-05-137	392-171-481	RECOD-E 80-12-020
392-171-360	REP-E 80-12-020	392-171-421	NEW 80-11-054	392-171-485	AM/DE-P 80-05-137
392-171-361	RECOD-P 80-05-137	392-171-421	NEW-E 80-12-020	392-171-485	AM/DE 80-11-054
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392-171-361	RECOD-E 80-12-020	392-171-425	AM/DE 80-11-054	392-171-486	RECOD-P 80-05-137
392-171-365	REP-P 80-05-137	392-171-425	AM/DE-E 80-12-020	392-171-486	RECOD 80-11-054
392-171-365	REP 80-11-054	392-171-426	RECOD-P 80-05-137	392-171-486	RECOD-E 80-12-020
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392-171-366	RECOD-P 80-05-137	392-171-426	RECOD-E 80-12-020	392-171-490	AM/DE 80-11-054
392-171-366	RECOD 80-11-054	392-171-430	AM/DE-P 80-05-137	392-171-490	AM/DE-E 80-12-020
392-171-366	RECOD-E 80-12-020	392-171-430	AM/DE 80-11-054	392-171-491	RECOD-P 80-05-137
392-171-370	REP-P 80-05-137	392-171-430	AM/DE-E 80-12-020	392-171-491	RECOD 80-11-054
392-171-370	REP 80-11-054	392-171-431	RECOD-P 80-05-137	392-171-491	RECOD-E 80-12-020
392-171-370	REP-E 80-12-020	392-171-431	RECOD 80-11-054	392-171-495	AM/DE-P 80-05-137
392-171-371	RECOD-P 80-05-137	392-171-431	RECOD-E 80-12-020	392-171-495	AM/DE 80-11-054
392-171-371	RECOD 80-11-054	392-171-435	AM/DE-P 80-05-137	392-171-495	AM/DE-E 80-12-020
392-171-371	RECOD-E 80-12-020	392-171-435	AM/DE 80-11-054	392-171-496	RECOD-P 80-05-137
392-171-375	AM/DE-P 80-05-137	392-171-435	AM/DE-E 80-12-020	392-171-496	RECOD 80-11-054
392-171-375	AM/DE 80-11-054	392-171-436	NEW-P 80-05-137	392-171-496	RECOD-E 80-12-020
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392-171-376	NEW-P 80-05-137	392-171-436	NEW-E 80-12-020	392-171-500	AM/DE 80-11-054
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392-171-376	NEW-E 80-12-020	392-171-440	AM/DE 80-11-054	392-171-501	RECOD-P 80-05-137
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392-171-381	NEW-P 80-05-137	392-171-441	NEW-E 80-12-020	392-171-505	AM/DE 80-11-054
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392-171-531	RECOD 80-11-054	392-171-595	AM/DE-P 80-05-137	392-171-655	REP-E 80-12-020
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392-171-536	RECOD 80-11-054	392-171-600	AM/DE-P 80-05-137	392-171-660	AM/DE 80-11-054
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392-171-545	AM/DE 80-11-054	392-171-606	RECOD-P 80-05-137	392-171-666	NEW 80-11-054
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392-171-551	RECOD-P 80-05-137	392-171-611	NEW-E 80-12-020	392-171-675	AM/DE-P 80-05-137
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392-171-555	AM/DE-P 80-05-137	392-171-615	AM/DE-E 80-12-020	392-171-676	RECOD-P 80-05-137
392-171-555	REP 80-11-054	392-171-616	RECOD-P 80-05-137	392-171-676	NEW 80-11-054
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392-171-570	REP-E 80-12-020	392-171-631	NEW 80-11-054	392-171-695	AM/DE-P 80-05-137
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392-171-705	AM/DE-E 80-12-020	392-171-771	RECOD 80-11-054	392-190-010	AMD 80-09-017
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392-171-711	RECOD-P 80-05-137	392-171-781	RECOD-E 80-12-020	392-190-050	AMD-P 80-06-173
392-171-711	RECOD 80-11-054	392-171-786	NEW-P 80-05-137	392-190-050	AMD 80-09-017
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392-171-715	AM/DE 80-11-054	392-173	AMD-P 80-05-088	392-190-075	AMD-P 80-06-173
392-171-715	AM/DE-E 80-12-020	392-173	AMD-P 80-08-001	392-190-075	AMD 80-09-017
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392-171-741	RECOD-P 80-05-137	392-173-075	AMD-P 80-05-088	402-22-110	AMD-P 80-12-055
392-171-741	RECOD 80-11-054	392-173-075	AMD 80-11-038	402-22-200	AMD-P 80-12-055
392-171-741	RECOD-E 80-12-020	392-173-080	AMD-P 80-05-088	402-24-020	AMD-P 80-12-055
392-171-745	AM/DE-P 80-05-137	392-173-080	AMD 80-11-038	402-24-024	AMD-P 80-12-055
392-171-745	AM/DE 80-11-054	392-181-005	REP-P 80-03-110	402-24-027	NEW-P 80-12-055
392-171-745	AM/DE-E 80-12-020	392-181-005	REP 80-05-041	402-24-030	AMD-P 80-12-055
392-171-746	RECOD-P 80-05-137	392-181-010	REP-P 80-03-110	402-24-035	AMD-P 80-12-055
392-171-746	RECOD 80-11-054	392-181-010	REP 80-05-041	402-24-040	AMD-P 80-12-055
392-171-746	RECOD-E 80-12-020	392-181-015	REP-P 80-03-110	402-24-060	AMD-P 80-12-055
392-171-750	AM/DE-P 80-05-137	392-181-015	REP 80-05-041	402-24-070	AMD-P 80-12-055
392-171-750	AM/DE 80-11-054	392-181-020	REP-P 80-03-110	402-24-085	AMD-P 80-12-055
392-171-750	AM/DE-E 80-12-020	392-181-020	REP 80-05-041	402-24-090	AMD-P 80-12-055
392-171-751	RECOD-P 80-05-137	392-181-025	REP-P 80-03-110	402-24-095	AMD-P 80-12-055
392-171-751	RECOD 80-11-054	392-181-025	REP 80-05-041	402-24-125	AMD-P 80-12-055
392-171-751	RECOD-E 80-12-020	392-181-030	REP-P 80-03-110	402-24-130	AMD-P 80-12-055
392-171-755	AM/DE-P 80-05-137	392-181-030	REP 80-05-041	402-24-140	AMD-P 80-12-055
392-171-755	AM/DE 80-11-054	392-181-035	REP-P 80-03-110	402-24-150	AMD-P 80-12-055
392-171-755	AM/DE-E 80-12-020	392-181-035	REP 80-05-041	402-24-170	AMD-P 80-12-055
392-171-756	RECOD-P 80-05-137	392-183-005	REP-P 80-03-111	402-24-180	AMD-P 80-12-055
392-171-756	RECOD 80-11-054	392-183-005	REP 80-05-042	402-24-190	AMD-P 80-12-055
392-171-756	RECOD-E 80-12-020	392-183-010	REP-P 80-03-111	402-24-200	AMD-P 80-12-055
392-171-760	AM/DE-P 80-05-137	392-183-010	REP 80-05-042	402-24-220	AMD-P 80-12-055

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402-24-230	AMD-P	80-12-055	434-62-030	NEW	80-15-008	446-20-120	NEW-P	80-05-101
402-28-010	AMD-P	80-12-055	434-62-040	NEW-P	80-11-045	446-20-120	NEW-E	80-05-102
402-28-020	AMD-P	80-12-055	434-62-040	NEW	80-15-008	446-20-120	NEW	80-08-057
402-28-031	AMD-P	80-12-055	434-62-050	NEW-P	80-11-045	446-20-130	NEW-P	80-05-101
402-28-035	AMD-P	80-12-055	434-62-050	NEW	80-15-008	446-20-130	NEW-E	80-05-102
402-28-040	AMD-P	80-12-055	434-62-060	NEW-P	80-11-045	446-20-130	NEW	80-08-057
402-28-051	AMD-P	80-12-055	434-62-060	NEW	80-15-008	446-20-140	NEW-P	80-05-101
402-28-052	AMD-P	80-12-055	434-62-070	NEW-P	80-11-045	446-20-140	NEW-E	80-05-102
402-28-053	AMD-P	80-12-055	434-62-070	NEW	80-15-008	446-20-140	NEW	80-08-057
402-28-054	AMD-P	80-12-055	434-62-080	NEW-P	80-11-045	446-20-150	NEW-P	80-05-101
402-28-055	AMD-P	80-12-055	434-62-080	NEW	80-15-008	446-20-150	NEW-E	80-05-102
402-28-080	AMD-P	80-12-055	434-62-090	NEW-P	80-11-045	446-20-150	NEW	80-08-057
402-28-090	REP-P	80-12-055	434-62-090	NEW	80-15-008	446-20-160	NEW-P	80-05-101
402-28-091	NEW-P	80-12-055	434-62-100	NEW-P	80-11-045	446-20-160	NEW-E	80-05-102
402-28-100	REP-P	80-12-055	434-62-100	NEW	80-15-008	446-20-160	NEW	80-08-057
402-28-101	NEW-P	80-12-055	434-62-110	NEW-P	80-11-045	446-20-170	NEW-P	80-05-101
402-28-110	AMD-P	80-12-055	434-62-110	NEW	80-15-008	446-20-170	NEW-E	80-05-102
402-28-120	AMD-P	80-12-055	434-62-120	NEW-P	80-11-045	446-20-170	NEW	80-08-057
402-28-99004	NEW-P	80-12-055	434-62-120	NEW	80-15-008	446-20-180	NEW-P	80-05-101
402-32	AMD-P	80-12-055	434-62-130	NEW-P	80-11-045	446-20-180	NEW-E	80-05-102
402-32-020	AMD-P	80-12-055	434-62-130	NEW	80-15-008	446-20-180	NEW	80-08-057
402-32-030	AMD-P	80-12-055	434-62-140	NEW-P	80-11-045	446-20-180	NEW	80-05-101
402-32-100	NEW-P	80-12-055	434-62-140	NEW	80-15-008	446-20-190	NEW-P	80-05-102
402-36-025	AMD-P	80-12-055	434-69-005	NEW-P	80-03-119	446-20-190	NEW-E	80-05-102
402-36-030	AMD-P	80-12-055	434-69-005	NEW	80-05-013	446-20-190	NEW	80-08-057
402-36-040	AMD-P	80-12-055	434-69-010	NEW-P	80-03-119	446-20-200	NEW-P	80-05-101
402-36-050	AMD-P	80-12-055	434-69-010	NEW	80-05-013	446-20-200	NEW-E	80-05-102
402-36-060	AMD-P	80-12-055	434-69-020	NEW-P	80-03-119	446-20-200	NEW	80-08-057
402-36-070	AMD-P	80-12-055	434-69-020	NEW	80-05-013	446-20-210	NEW-P	80-05-101
402-36-080	AMD-P	80-12-055	434-69-030	NEW-P	80-03-119	446-20-210	NEW-E	80-05-102
402-36-090	AMD-P	80-12-055	434-69-030	NEW	80-05-013	446-20-210	NEW	80-08-057
402-36-095	AMD-P	80-12-055	434-69-040	NEW-P	80-03-119	446-20-220	NEW-P	80-05-101
402-36-100	AMD-P	80-12-055	434-69-040	NEW	80-05-013	446-20-220	NEW-E	80-05-102
402-36-110	AMD-P	80-12-055	434-69-050	NEW-P	80-03-119	446-20-220	NEW	80-08-057
402-36-120	AMD-P	80-12-055	434-69-050	NEW	80-05-013	446-20-230	NEW-P	80-05-101
402-36-125	NEW-P	80-12-055	434-69-060	NEW-P	80-03-119	446-20-230	NEW-E	80-05-102
402-36-130	AMD-P	80-12-055	434-69-060	NEW	80-05-013	446-20-230	NEW	80-08-057
402-36-140	AMD-P	80-12-055	434-69-070	NEW-P	80-03-119	446-20-240	NEW-P	80-05-101
402-36-150	AMD-P	80-12-055	434-69-070	NEW	80-05-013	446-20-240	NEW-E	80-05-102
402-36-153	NEW-P	80-12-055	434-69-080	NEW-P	80-03-119	446-20-240	NEW	80-08-057
402-36-155	AMD-P	80-12-055	434-69-080	NEW	80-05-013	446-20-250	NEW-P	80-05-101
402-36-157	NEW-P	80-12-055	446-20-010	NEW-P	80-05-101	446-20-250	NEW-E	80-05-102
402-36-160	AMD-P	80-12-055	446-20-010	NEW-E	80-05-102	446-20-250	NEW	80-08-057
402-40-020	AMD-P	80-12-055	446-20-010	NEW	80-08-057	446-20-260	NEW-P	80-05-101
402-40-030	AMD-P	80-12-055	446-20-020	NEW-P	80-05-101	446-20-260	NEW-E	80-05-102
402-40-040	AMD-P	80-12-055	446-20-020	NEW-E	80-05-102	446-20-270	NEW	80-08-057
402-40-050	AMD-P	80-12-055	446-20-020	NEW	80-08-057	446-20-270	NEW-P	80-05-101
402-44-010	AMD-P	80-12-055	446-20-030	NEW-P	80-05-101	446-20-270	NEW-E	80-05-102
402-44-030	AMD-P	80-12-055	446-20-030	NEW-E	80-05-102	446-20-270	NEW	80-08-057
402-44-040	AMD-P	80-12-055	446-20-030	NEW	80-08-057	446-20-400	NEW-P	80-05-101
402-44-050	AMD-P	80-12-055	446-20-040	NEW-P	80-05-101	446-20-400	NEW-E	80-05-102
402-44-060	AMD-P	80-12-055	446-20-040	NEW-E	80-05-102	446-20-400	NEW	80-08-057
402-44-070	AMD-P	80-12-055	446-20-040	NEW	80-08-057	446-20-410	NEW-P	80-05-101
402-44-080	AMD-P	80-12-055	446-20-050	NEW-P	80-05-101	446-20-410	NEW-E	80-05-102
402-44-090	AMD-P	80-12-055	446-20-050	NEW-E	80-05-102	446-20-410	NEW	80-08-057
402-44-100	AMD-P	80-12-055	446-20-050	NEW	80-08-057	446-20-420	NEW-P	80-05-101
402-44-110	AMD-P	80-12-055	446-20-060	NEW-P	80-05-101	446-20-420	NEW-E	80-05-102
402-44-120	AMD-P	80-12-055	446-20-060	NEW-E	80-05-102	446-20-430	NEW	80-08-057
402-48-010	AMD-P	80-12-055	446-20-060	NEW	80-08-057	446-20-430	NEW-P	80-05-101
402-48-020	AMD-P	80-12-055	446-20-070	NEW-P	80-05-101	446-20-430	NEW-E	80-05-102
402-48-030	AMD-P	80-12-055	446-20-070	NEW-E	80-05-102	446-20-440	NEW	80-08-057
402-48-040	AMD-P	80-12-055	446-20-070	NEW	80-08-057	446-20-440	NEW-P	80-05-101
434-28-010	AMD-P	80-03-115	446-20-080	NEW-P	80-05-101	446-20-440	NEW-E	80-05-102
434-28-010	REP	80-05-014	446-20-080	NEW-E	80-05-102	446-20-450	NEW	80-08-057
434-28-012	NEW	80-05-014	446-20-080	NEW	80-08-057	446-20-450	NEW-P	80-05-101
434-28-030	REP-P	80-03-115	446-20-090	NEW-P	80-05-101	446-20-450	NEW-E	80-05-102
434-28-030	REP	80-05-014	446-20-090	NEW-E	80-05-102	448-12-015	NEW	80-08-057
434-62-005	NEW-P	80-11-045	446-20-090	NEW	80-08-057	448-12-015	AMD-E	80-04-005
434-62-005	NEW	80-15-008	446-20-100	NEW-P	80-05-101	448-12-020	AMD-P	80-04-004
434-62-010	NEW-P	80-11-045	446-20-100	NEW-E	80-05-102	448-12-020	AMD-E	80-04-005
434-62-010	NEW	80-15-008	446-20-100	NEW	80-08-057	448-12-020	AMD	80-05-112
434-62-020	NEW-P	80-11-045	446-20-110	NEW-P	80-05-101	448-12-090	AMD-P	80-04-004
434-62-020	NEW	80-15-008	446-20-110	NEW-E	80-05-102	448-12-090	AMD-E	80-04-005
434-62-030	NEW-P	80-11-045	446-20-110	NEW	80-08-057	448-12-090	AMD	80-05-112

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460-80-905	NEW-P	80-02-099	478-160-060	AMD	80-15-082	480-40-075	NEW	80-11-030
460-80-910	REP-P	80-02-099	478-160-105	AMD-P	80-11-050	480-70-330	AMD-P	80-04-029
460-80-910	REP	80-04-036	478-160-105	AMD	80-15-082	480-70-330	AMD-E	80-04-030
460-80-915	NEW-P	80-02-099	478-160-110	AMD-P	80-11-050	480-70-330	AMD-P	80-06-154
460-80-925	NEW-P	80-02-099	478-160-110	AMD	80-15-082	480-70-330	AMD-P	80-09-025
460-80-935	NEW-P	80-02-099	478-160-120	AMD-P	80-11-050	480-70-330	AMD-P	80-09-105
460-80-945	NEW-P	80-02-099	478-160-120	AMD	80-15-082	480-70-330	AMD	80-11-007
461-08-006	NEW-P	80-06-052	478-160-145	AMD-P	80-11-050	480-70-400	AMD-P	80-04-029
461-08-070	AMD	80-02-100	478-160-145	AMD	80-15-082	480-70-400	AMD-E	80-04-030
466-06-010	REP-P	80-06-148	478-160-210	AMD-P	80-11-050	480-70-400	AMD-P	80-06-154
466-06-010	REP	80-09-056	478-160-210	AMD	80-15-082	480-70-400	AMD-P	80-09-025
468-34-030	NEW-P	80-10-024	478-160-215	AMD-P	80-11-050	480-70-400	AMD-P	80-09-105
468-34-030	NEW	80-13-042	478-160-215	AMD	80-15-082	480-70-400	AMD	80-11-007
468-38-450	AMD-P	80-03-043	478-160-216	NEW-P	80-11-050	480-70-405	NEW-P	80-04-029
468-38-450	AMD-E	80-04-043	478-160-216	NEW	80-15-082	480-70-405	NEW-E	80-04-030
468-38-450	AMD	80-04-044	478-160-225	AMD-P	80-11-050	480-70-405	NEW-P	80-06-154
468-42-014	AMD-E	80-02-042	478-160-225	AMD	80-15-082	480-70-405	NEW-P	80-09-025
468-42-125	NEW	80-02-088	478-160-231	AMD-P	80-11-050	480-70-405	NEW-P	80-09-105
468-42-129	AMD	80-03-020	478-160-231	AMD	80-15-082	480-70-405	NEW	80-11-007
468-42-542	AMD-P	80-03-065	478-160-251	REP-P	80-11-050	480-120-056	AMD-P	80-05-131
468-42-542	AMD-E	80-03-066	478-160-251	REP	80-15-082	480-120-056	AMD-P	80-08-031
468-42-542	AMD	80-05-028	479-16-015	AMD-P	80-06-063	480-120-056	AMD	80-09-049
468-58-050	AMD-P	80-03-015	479-16-015	AMD-P	80-10-012	480-120-061	AMD-P	80-05-131
468-58-050	AMD-E	80-03-055	479-20-036	AMD-P	80-06-063	480-120-061	AMD-P	80-08-031
468-58-050	AMD	80-05-027	479-20-036	AMD	80-10-013	480-120-061	AMD	80-09-049
468-66-010	AMD-P	80-02-141	480-12-180	AMD-P	80-06-157	480-120-081	AMD-P	80-05-131
468-66-010	AMD-P	80-04-035	480-12-180	AMD-P	80-09-024	480-120-081	AMD-P	80-08-031
468-66-010	AMD-P	80-05-026	480-12-180	AMD-P	80-13-033	480-120-081	AMD	80-09-049
468-66-010	AMD	80-06-057	480-12-186	NEW-P	80-06-157	482-12-010	REP-P	80-05-142
468-66-030	AMD-P	80-02-141	480-12-186	NEW-P	80-09-024	482-12-010	REP	80-09-069
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468-66-030	AMD	80-04-095	480-12-195	AMD-E	80-08-029	482-12-015	REP	80-09-069
468-66-040	REP-P	80-02-141	480-12-195	AMD-P	80-08-032	482-12-020	REP-P	80-05-142
468-66-040	REP-P	80-04-035	480-12-195	AMD	80-11-008	482-12-020	REP	80-09-069
468-66-040	REP	80-04-095	480-12-210	AMD-P	80-09-102	482-12-025	REP-P	80-05-142
468-66-050	AMD-P	80-02-141	480-12-210	AMD-P	80-12-024	482-12-025	REP	80-09-069
468-66-050	AMD-P	80-04-035	480-12-210	AMD	80-13-061	482-12-030	REP-P	80-05-142
468-66-050	AMD	80-05-055	480-12-260	AMD-E	80-08-029	482-12-030	REP	80-09-069
468-66-070	AMD-P	80-02-141	480-12-260	AMD-P	80-08-032	482-12-035	REP-P	80-05-142
468-66-070	AMD-P	80-04-035	480-12-260	AMD	80-11-008	482-12-035	REP	80-09-069
468-66-070	AMD	80-05-055	480-12-340	AMD-P	80-09-111	482-12-040	REP-P	80-05-142
468-66-140	AMD-P	80-02-141	480-12-340	AMD	80-12-023	482-12-040	REP	80-09-069
468-66-140	AMD	80-04-095	480-12-445	AMD-P	80-15-120	482-12-050	REP-P	80-05-142
468-95	AMD-P	80-02-110	480-12-465	NEW-P	80-09-111	482-12-050	REP	80-09-069
468-95	AMD	80-04-045	480-12-465	NEW	80-12-023	482-12-060	REP-P	80-05-142
468-300-005	AMD-P	80-02-174	480-30-045	NEW-P	80-09-019	482-12-060	REP	80-09-069
468-300-005	AMD	80-04-104	480-30-045	NEW	80-12-025	482-12-100	REP-P	80-05-142
468-300-010	AMD-P	80-02-174	480-30-095	NEW-P	80-04-033	482-12-100	REP	80-09-069
468-300-010	AMD	80-04-104	480-30-095	NEW-E	80-04-034	482-12-105	REP-P	80-05-142
468-300-010	AMD-P	80-13-028	480-30-095	NEW-P	80-06-156	482-12-105	REP	80-09-069
468-300-020	AMD-P	80-02-174	480-30-095	NEW-P	80-09-022	482-12-110	REP-P	80-05-142
468-300-020	AMD	80-04-104	480-30-095	NEW-P	80-09-104	482-12-110	REP	80-09-069
468-300-030	AMD-P	80-02-174	480-30-095	NEW-P	80-11-006	482-12-150	REP-P	80-05-142
468-300-030	AMD	80-04-104	480-30-095	NEW	80-11-029	482-12-150	REP	80-09-069
468-300-040	AMD-P	80-02-174	480-30-100	AMD-P	80-04-033	482-12-160	REP-P	80-05-142
468-300-040	AMD	80-04-104	480-30-100	AMD-E	80-04-034	482-12-160	REP	80-09-069
468-300-050	AMD-P	80-02-174	480-30-100	AMD-P	80-06-156	482-12-190	REP-P	80-05-142
468-300-050	AMD	80-04-104	480-30-100	AMD-P	80-09-022	482-12-190	REP	80-09-069
468-300-100	NEW-P	80-06-148	480-30-100	AMD-P	80-09-104	482-12-210	REP-P	80-05-142
468-300-100	NEW	80-09-056	480-30-100	AMD-P	80-11-006	482-12-210	REP	80-09-069
468-300-110	NEW-P	80-06-148	480-30-100	AMD	80-11-029	482-16-010	REP-P	80-05-142
468-300-500	REP-P	80-02-174	480-40-070	AMD-P	80-04-031	482-16-010	REP	80-09-069
468-300-500	REP	80-04-104	480-40-070	AMD-E	80-04-032	482-16-015	REP-P	80-05-142
468-300-700	NEW-P	80-06-148	480-40-070	AMD-P	80-06-155	482-16-015	REP	80-09-069
468-300-700	NEW	80-09-056	480-40-070	AMD-P	80-09-023	482-16-025	REP-P	80-05-142
478-116-240	AMD-P	80-06-133	480-40-070	AMD-P	80-09-103	482-16-025	REP	80-09-069
478-116-240	AMD	80-12-002	480-40-070	AMD-P	80-11-005	482-16-035	REP-P	80-05-142
478-116-600	AMD-P	80-06-133	480-40-070	AMD	80-11-030	482-16-035	REP	80-09-069
478-116-600	AMD	80-12-002	480-40-075	NEW-P	80-04-031	482-16-045	REP-P	80-05-142
478-132-030	AMD	80-03-049	480-40-075	NEW-E	80-04-032	482-16-045	REP	80-09-069
478-138-050	AMD-P	80-06-133	480-40-075	NEW-P	80-06-155	482-16-050	REP-P	80-05-142
478-156-016	AMD	80-03-005	480-40-075	NEW-P	80-09-023	482-16-050	REP	80-09-069
478-156-017	AMD	80-03-005	480-40-075	NEW-P	80-09-103	482-16-060	REP-P	80-05-142

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