

# IDAHO ADMINISTRATIVE BULLETIN

May 2, 2018 – Vol. 18-5

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# IDAHO ADMINISTRATIVE BULLETIN

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# PREFACE

The Idaho Administrative Bulletin is an electronic-only, online monthly publication of the Office of the Administrative Rules Coordinator, Department of Administration, that is published pursuant to Section 67-5203, Idaho Code. The Bulletin is a compilation of all official rulemaking notices, official rule text, executive orders of the Governor, and all legislative documents affecting rules that are statutorily required to be published in the Bulletin. It may also include other rules-related documents an agency may want to make public through the Bulletin.

State agencies are required to provide public notice of all rulemaking actions and must invite public input. This is done through negotiated rulemaking procedures or after proposed rulemaking has been initiated. The public receives notice that an agency has initiated proposed rulemaking procedures through the Idaho Administrative Bulletin and a legal notice (Public Notice of Intent) that publishes in authorized newspapers throughout the state. The legal notice provides reasonable opportunity for the public to participate when a proposed rule publishes in the Bulletin. Interested parties may submit written comments to the agency or request public hearings of the agency, if none have been scheduled. Such submissions or requests must be presented to the agency within the time and manner specified in the individual “Notice of Rulemaking - Proposed Rule” for each proposed rule that is published in the Bulletin.

Once the comment period closes, the agency considers fully all comments and information submitted regarding the proposed rule. Changes may be made to the proposed rule at this stage of the rulemaking, but changes must be based on comments received and must be a “logical outgrowth” of the proposed rule. The agency may now adopt and publish the pending rule. A pending rule is “pending” legislative review for final approval. The pending rule is the agency’s final version of the rulemaking that will be forwarded to the legislature for review and final approval. Comment periods and public hearings are not provided for when the agency adopts a temporary or pending rule.

## CITATION TO THE IDAHO ADMINISTRATIVE BULLETIN

The Bulletin is identified by the calendar year and issue number. For example, Bulletin **13-1** refers to the first Bulletin issued in calendar year **2013**; Bulletin **14-1** refers to the first Bulletin issued in calendar year **2014**. Volume numbers, which proceed from 1 to 12 in a given year, correspond to the months of publication, i.e.; Volume No. **13-1** refers to January 2013; Volume No. **13-2** refers to February 2013; and so forth. Example: The Bulletin published in January 2014 is cited as Volume **14-1**. The December 2015 Bulletin is cited as Volume **15-12**.

## RELATIONSHIP TO THE IDAHO ADMINISTRATIVE CODE

The **Idaho Administrative Code** is an electronic-only, online compilation of all final and enforceable administrative rules of the state of Idaho that are of full force and effect. Any temporary rule that is adopted by an agency and is of force and effect is codified into the Administrative Code upon becoming effective. All pending rules that have been approved by the legislature during the legislative session as final rules and any temporary rules that are extended supplement the Administrative Code. These rules are codified into the Administrative Code upon becoming effective. Because proposed and pending rules are not enforceable, they are published in the Administrative Bulletin only and cannot be codified into the Administrative Code until approved as final.

To determine if a particular rule remains in effect or whether any amendments have been made to the rule, refer to the **Cumulative Rulemaking Index**. Link to it on the Administrative Rules homepage at [adminrules.idaho.gov](http://adminrules.idaho.gov).

## THE DIFFERENT RULES PUBLISHED IN THE ADMINISTRATIVE BULLETIN

Idaho’s administrative rulemaking process, governed by the Administrative Procedure Act, Title 67, Chapter 52, Idaho Code, comprises distinct rulemaking actions: negotiated, proposed, temporary, pending and final rulemaking. Not all rulemakings incorporate or require all of these actions. At a minimum, a rulemaking includes proposed, pending and final rulemaking. Many rules are adopted as temporary rules when they meet the required statutory criteria and agencies must, when feasible, engage in negotiated rulemaking at the beginning of the process to facilitate consensus building. In the majority of cases, the process begins with proposed rulemaking and ends with the final rulemaking. The following is a brief explanation of each type of rule.

## **1. NEGOTIATED RULEMAKING**

Negotiated rulemaking is a process in which all interested persons and the agency seek consensus on the content of a rule through dialogue. Agencies are required to conduct negotiated rulemaking whenever it is feasible to do so. The agency files a “Notice of Intent to Promulgate - Negotiated Rulemaking” for publication in the Administrative Bulletin inviting interested persons to contact the agency if interested in discussing the agency’s intentions regarding the rule changes. This process is intended to result in the formulation of a proposed rule and the initiation of regular rulemaking procedures. One result, however, may also be that regular (proposed) rulemaking is not initiated and no further action is taken by the agency.

## **2. PROPOSED RULEMAKING**

A proposed rulemaking is an action by an agency wherein the agency is proposing to amend or repeal an existing rule or to adopt a new rule. Prior to the adoption, amendment, or repeal of a rule, the agency must publish a “Notice of Rulemaking - Proposed Rule” in the Bulletin. This notice must include very specific information regarding the rulemaking including all relevant state or federal statutory authority occasioning the rulemaking, a non-technical description of the changes being made, any associated costs, guidance on how to participate through submission of written comments and requests for public hearings, and the text of the proposed rule in legislative format.

## **3. TEMPORARY RULEMAKING**

Temporary rules may be adopted only when the governor finds that it is necessary for:

- a) protection of the public health, safety, or welfare; or
- b) compliance with deadlines in amendments to governing law or federal programs; or
- c) conferring a benefit.

If a rulemaking meets one or more of these criteria, and with the Governor’s approval, the agency may adopt and make a temporary rule effective prior to receiving legislative authorization and without allowing for any public input. The law allows an agency to make a temporary rule immediately effective upon adoption. A temporary rule expires at the conclusion of the next succeeding regular legislative session unless the rule is extended by concurrent resolution, is replaced by a final rule, or expires under its own terms.

## **4. PENDING RULEMAKING**

A pending rule is a rule that has been adopted by an agency under regular rulemaking procedures and remains subject to legislative review before it becomes a final, enforceable rule. When a pending rule is published in the Bulletin, the agency is required to include certain information in the “Notice of Rulemaking - Pending Rule.” This includes a statement giving the reasons for adopting the rule, a statement regarding when the rule becomes effective, a description of how it differs from the proposed rule, and identification of any fees being imposed or changed.

Agencies are required to republish the text of the pending rule when substantive changes have been made to the proposed rule. An agency may adopt a pending rule that varies in content from that which was originally proposed if the subject matter of the rule remains the same, the pending rule change is a logical outgrowth of the proposed rule, and the original notice was written so as to assure that members of the public were reasonably notified of the subject. It is not always necessary to republish all the text of the pending rule.

## **5. FINAL RULEMAKING**

A final rule is a rule that has been adopted by an agency under the regular rulemaking procedures and is of full force and effect.



## HOW TO USE THE IDAHO ADMINISTRATIVE BULLETIN

Rulemaking documents produced by state agencies and published in the **Idaho Administrative Bulletin** are organized by a numbering schematic. Each state agency has a two-digit identification code number known as the **“IDAPA”** number. (The **“IDAPA”** Codes are listed in the alphabetical/numerical index at the end of this Preface.) Within each agency there are divisions or departments to which a two-digit **“TITLE”** number is assigned. There are **“CHAPTER”** numbers assigned within the Title and the rule text is divided among major sections that are further subdivided into subsections. An example IDAPA number is as follows:

### **IDAPA 38.05.01.200.02.c.ii.**

**“IDAPA”** refers to Administrative Rules in general that are subject to the Administrative Procedures Act and are required by this act to be published in the Idaho Administrative Code and the Idaho Administrative Bulletin.

1. **“38.”** refers to the Idaho Department of Administration

**“05.”** refers to Title **05**, which is the Department of Administration’s Division of Purchasing

**“01.”** refers to Chapter **01** of Title 05, “Rules of the Division of Purchasing”

**“200.”** refers to Major Section **200**, “Content of the Invitation to Bid”

**“02.”** refers to Subsection **200.02**.

**“c.”** refers to Subsection **200.02.c**.

**“ii.”** refers to Subsection **200.02.c.ii**.

## DOCKET NUMBERING SYSTEM

Internally, the Bulletin is organized sequentially using a rule docketing system. Each rulemaking that is filed with the Coordinator is assigned a **“DOCKET NUMBER.”** The docket number is a series of numbers separated by a hyphen **“-”**, (**38-0501-1401**). Rulemaking dockets are published sequentially by IDAPA number (the two-digit agency code) in the Bulletin. The following example is a breakdown of a typical rule docket number:

### **“DOCKET NO. 38-0501-1401”**

**“38-”** denotes the agency's **IDAPA** number; in this case the Department of Administration.

**“0501-”** refers to the **TITLE AND CHAPTER** numbers of the agency rule being promulgated; in this case the Division of Purchasing (**TITLE 05**), Rules of the Division of Purchasing (**Chapter 01**).

**“1401”** denotes the year and sequential order of the docket being published; in this case the numbers refer to the first rulemaking action published in **calendar year 2014**. A subsequent rulemaking on this same rule chapter in calendar year 2014 would be designated as **“1402”**. The docket number in this scenario would be **38-0501-1402**.

Within each Docket, only the affected sections of chapters are printed. (See **Sections Affected Index** in each Bulletin for a listing of these.) The individual sections affected are printed in the Bulletin sequentially (e.g. Section **“200”** appears before Section **“345”** and so on). Whenever the sequence of the numbering is broken the following statement will appear:

**(BREAK IN CONTINUITY OF SECTIONS)**

**BULLETIN PUBLICATION SCHEDULE FOR CALENDAR YEAR 2018**

<b>Vol. No.</b>	<b>Monthly Issue of Bulletin</b>	<b>Closing Date for Agency Filing</b>	<b>Publication Date</b>	<b>21-day Comment Period End Date</b>
18-1	January 2018	<b>*November 24, 2017</b>	January 3, 2018	January 24, 2018
18-2	February 2018	January 5, 2018	February 7, 2018	February 28, 2018
18-3	March 2018	February 2, 2018	March 7, 2018	March 28, 2018
18-4	April 2018	March 2, 2018	April 4, 2018	April 25, 2018
18-5	May 2018	April 6, 2018	May 2, 2018	May 23, 2018
18-6	June 2018	May 4, 2018	June 6, 2018	June 27, 2018
18-7	July 2018	June 8, 2018	July 4, 2018	July 25, 2018
18-8	August 2018	July 6, 2018	August 1, 2018	August 22, 2018
18-9	September 2018	August 3, 2018	September 5, 2018	September 26, 2018
18-10	October 2018	<b>**August 31, 2018</b>	October 3, 2018	October 24, 2018
18-11	November 2018	October 5, 2018	November 7, 2018	November 28, 2018
18-12	December 2018	November 2, 2018	December 5, 2018	December 26, 2018

**BULLETIN PUBLICATION SCHEDULE FOR CALENDAR YEAR 2019**

<b>Vol. No.</b>	<b>Monthly Issue of Bulletin</b>	<b>Closing Date for Agency Filing</b>	<b>Publication Date</b>	<b>21-day Comment Period End Date</b>
19-1	January 2019	<b>*November 30, 2018</b>	January 2, 2019	January 23, 2019
19-2	February 2019	January 4, 2019	February 6, 2019	February 27, 2019
19-3	March 2019	February 8, 2019	March 6, 2019	March 27, 2019
19-4	April 2019	March 8, 2019	April 3, 2019	April 24, 2019
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19-8	August 2019	July 5, 2019	August 7, 2019	August 28, 2019
19-9	September 2019	August 2, 2019	September 4, 2019	September 25, 2019
19-10	October 2019	<b>**August 30, 2019</b>	October 2, 2019	October 23, 2019
19-11	November 2019	October 4, 2019	November 6, 2019	November 27, 2019
19-12	December 2019	November 1, 2019	December 4, 2019	December 25, 2018

***\*Last day to submit a proposed rulemaking before moratorium begins and last day to submit a pending rule to be reviewed by the legislature.***

***\*\*Last day to submit a proposed rule in order to have the rulemaking completed and submitted for review by legislature.***

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<b>IDAPA 39</b>	<b>Transportation Department, Idaho</b>
<b>IDAPA 54</b>	<b>Treasurer, Office of the State</b>
<b>IDAPA 21</b>	<b>Veterans Services, Division of</b>
<b>IDAPA 46</b>	<b>Veterinary Medical Examiners, Board of</b>
<b>IDAPA 47</b>	<b>Vocational Rehabilitation, Division of</b>
<b>IDAPA 37</b>	<b>Water Resources, Department of</b>
<b>IDAPA 42</b>	<b>Wheat Commission</b>

**OFFICE OF THE ADMINISTRATIVE RULES COORDINATOR  
IDAHO DEPARTMENT OF ADMINISTRATION**

**ADMINISTRATIVE RULES REVIEWED BY THE SIXTY-FOURTH LEGISLATURE  
OF THE STATE OF IDAHO, SECOND REGULAR SESSION – 2018**

**OMNIBUS NOTICE OF LEGISLATIVE ACTION – SUMMARY OF ACTION TAKEN  
ON PENDING, PENDING FEE, TEMPORARY, AND FINAL RULES**

**AUTHORITY:** In compliance with Sections 67-5224(5), 67-5224(7), 67-5226(3), and 67-5291, Idaho Code, the Administrative Rules Coordinator hereby gives notice that the standing committees of the Sixty-Fourth Legislature in the Second Regular Session, 2018, completed the review of certain administrative rules of the state agencies of the executive branch. Additionally, in compliance with Section 67-5291, Idaho Code, this notice also serves as official notice of final rulemaking for those state agencies whose rules have been approved as final or rejected in whole or in part by concurrent resolution. The following is a brief explanation of the action taken by the legislature:

It has reviewed the pending rules submitted for review and final approval and has rejected, by concurrent resolution, all or parts of any pending rules that do not meet legislative intent; it has reviewed and approved, by concurrent resolution, pending fees rules, with exceptions; and it has reviewed and approved for extension, by concurrent resolution, certain temporary rules that continue to be of full force and effect.

**DESCRIPTIVE SUMMARY:** The following tables list those rules that were reviewed as pending, pending fee, and temporary rules during the Second Regular Session of the Sixty-Fourth Legislature of the state of Idaho, 2018.

All pending rules reviewed by the legislature that were not rejected in whole or in part have been approved and are now final and of full force and effect, unless otherwise specified in the rule. Any pending rule that was rejected in whole or in part is listed in this notice with the corresponding house or senate concurrent resolution affecting it. Pending rule dockets that were rejected in whole or any parts of any pending rule that were rejected, are null, void and of no force and effect. Those pending rules that were partially rejected by concurrent resolution are being promulgated as final rules and are reprinted in this Bulletin in their final, codified version. Those rules that were acted on by concurrent resolution became final and of full force and effect upon adoption of the concurrent resolution by both houses of the legislature, unless otherwise specified in the rule. The concurrent resolutions affecting the rules that were reviewed during the 2018 legislative session are also printed in this Bulletin.

In accordance with Section 67-5224(5)(c), Idaho Code, all pending rules imposing or changing a fee or charge that were approved by [Senate Concurrent Resolution \(SCR\) No. 149](#) are now final rules and are of full force and effect pursuant to the adoption of the concurrent resolution, unless another effective date has been specified in the pending rule and the concurrent resolution. Pursuant to SCR 149 those pending fee rules that were rejected in their entirety, and those parts of any pending fee rule that were rejected, are null, void and of no force and effect.

In accordance with Section 67-5226(3), Idaho Code, all temporary rules that were submitted for extension have been reviewed and approved by [Senate Concurrent Resolution \(SCR\) No. 150](#), with exceptions. As specified in the concurrent resolution, all temporary rules that were reviewed and extended will continue to be of full force and effect until the end of the next legislative session, unless they expire under their own terms or other provision of law or are rescinded, and any part of a temporary rule that was rejected is declared null, void and of no force and effect.

**TEMPORARY, PENDING, AND PENDING FEE RULES:** The following tables list all temporary, pending and pending fee rulemakings that were submitted for legislative review for the 2018 legislative session. The list includes the docket number of each pending fee, pending, and temporary rulemaking, the volume number of the Bulletin in which the proposed, pending, and temporary rule notices and text were published, the final effective dates of all approved pending fee and pending rules, the effective dates of any temporary rules, and the number of the senate or house concurrent resolution, if applicable, affecting the rulemaking. These tables provide final status of all pending, pending fee and temporary rules submitted for legislative review.

<b>TEMPORARY RULES</b>				
<b>AFFECTED BY SENATE CONCURRENT RESOLUTION 150</b>				
<b>Temporary Rule Docket Number</b>	<b>Bulletin Vol. No.</b>	<b>Temporary Effective Date</b>	<b>Rejected Rule</b>	<b>Action Taken in SCR 150</b>
11-0201-1701	17-11	(10-2-17)T		Approved
11-0301-1801	18-1	(12-14-17)T		Approved
38-0409-1801	18-2	(12-21-17)T		Approved
59-0103-1801	18-1	(12-5-17)T		Approved
61-0104-1701	17-4	(3-3-17)T		Approved

<b>PENDING FEE RULES</b>				
<b>AFFECTED BY SENATE CONCURRENT RESOLUTION 149</b>				
<b>Fee Rule Docket Number</b>	<b>Bulletin Vol. No. Pending</b>	<b>Bulletin Vol. No. Proposed</b>	<b>Final Effective Date</b>	<b>Action Taken in SCR 149</b>
16-0318-1701	17-12	17-10	(3-22-18)	Fee Approved
24-0101-1701	18-1	17-10	(3-22-18)	Fee Approved
24-0301-1701	18-1	17-10	(3-22-18)	Fee Approved
24-0601-1701	18-1	17-10	(3-22-18)	Fee Approved
24-0701-1701	18-1	17-10	(3-22-18)	Fee Approved
24-0801-1701	18-1	17-10	(3-22-18)	Fee Approved
24-1801-1701	18-1	17-10	(3-22-18)	Fee Approved
24-2301-1702	18-1	17-10	(3-22-18)	Fee Approved
24-2401-1701	18-1	17-10	(3-22-18)	Fee Approved
24-2501-1701	18-1	17-10	(3-22-18)	Fee Approved
27-0102-1701	17-12	17-10	(7-1-18)	Fee Approved



<b>PENDING RULES</b>					
<b>REVIEWED BY THE 2018 IDAHO LEGISLATURE</b>					
<b>Docket Number</b>	<b>Bulletin Vol. No. Pending</b>	<b>Bulletin Vol. No. Proposed</b>	<b>Final Rule Effective Date</b>	<b>Action Taken &amp; Rejected Rule</b>	<b>Concurrent Resolution Number</b>
01-0101-1701	17-11	17-9	(3-28-18)	Approved	
01-0101-1702	17-11	17-9	(3-28-18)	Approved	
01-0101-1703	17-11	17-9	(3-28-18)	Approved	
01-0101-1704	17-11	17-9	(3-28-18)	Approved	
02-0101-1701	17-11	17-7	(3-28-18)	Approved	
02-0101-1702	17-11	17-7	(3-28-18)	Approved	
02-0214-1701	17-11	17-9	(3-28-18)	Approved	
02-0214-1702	17-11	17-9	(3-28-18)	Approved	
02-0214-1703	17-11	17-7	(3-28-18)	Approved	
02-0414-1702	17-12	17-10	(3-28-18)	Approved	
02-0602-1701	17-11	17-9	(3-28-18)	Approved	
02-0612-1701	17-11	17-9	(3-28-18)	Approved	
02-0621-1701	17-11	17-9	(3-28-18)	Approved	
02-0641-1701	17-11	17-9	(3-28-18)	Approved	
02-0801-1701	18-1	17-11	(3-28-18)	Approved	
<b>05-0102-1701</b>	<b>17-12</b>	<b>17-10</b>	<b>(3-21-18)</b>	<b>Partial Rejection: 010.37</b>	<b>HCR 55</b>
07-0106-1701	17-11	17-9	(3-28-18)	Approved	
07-0204-1701	17-11	17-9	(3-28-18)	Approved	
07-0206-1701	17-11	17-9	(3-28-18)	Approved	
07-0301-1701	17-11	17-9	(3-28-18)	Approved	
07-0311-1701	17-11	17-9	(3-28-18)	Approved	
07-0312-1701	17-11	17-9	(3-28-18)	Approved	
07-0401-1701	17-11	17-9	(3-28-18)	Approved	
07-0402-1701	17-11	17-9	(3-28-18)	Approved	
07-0701-1701	17-11	17-9	(3-28-18)	Approved	
07-0701-1702	17-11	17-9	(3-28-18)	Approved	
07-0817-1701	17-9	17-6	(3-28-18)	Approved	
07-0901-1701	17-11	17-9	(3-28-18)	Approved	
07-1001-1701	17-11	17-9	(3-28-18)	Approved	

<b>PENDING RULES</b>					
<b>REVIEWED BY THE 2018 IDAHO LEGISLATURE</b>					
<b>Docket Number</b>	<b>Bulletin Vol. No. Pending</b>	<b>Bulletin Vol. No. Proposed</b>	<b>Final Rule Effective Date</b>	<b>Action Taken &amp; Rejected Rule</b>	<b>Concurrent Resolution Number</b>
08-0111-1701	18-1	17-10	(3-28-18)	Approved	
08-0113-1701	18-1	17-10	(3-28-18)	Approved	
08-0202-1701	18-1	17-10	(3-28-18)	Approved	
08-0202-1702	18-1	17-10	(3-28-18)	Approved	
08-0202-1703	18-1	17-10	(3-28-18)	Approved	
08-0202-1705	18-1	17-10	(3-28-18)	Approved	
08-0202-1707	18-1	17-10	(3-28-18)	Approved	
08-0202-1708	18-1	17-10	(3-28-18)	Approved	
08-0203-1702	17-12	17-8	(3-28-18)	Approved	
08-0203-1703	18-1	17-10	(3-28-18)	Approved	
08-0203-1704	18-1	17-10	(3-28-18)	Approved	
08-0203-1705	18-1	17-10	(3-28-18)	Approved	
08-0203-1707	18-1	17-10	(3-28-18)	Approved	
08-0203-1708	17-12	17-6	(3-28-18)	Approved	
08-0203-1709	18-1	17-10	(3-28-18)	Approved	
08-0203-1710	18-1	17-10	(3-28-18)	Approved	
08-0203-1711	17-12	17-8	(3-28-18)	Approved	
08-0203-1712	18-1	17-10	(3-28-18)	Approved	
08-0204-1701	18-1	17-10	(3-28-18)	Approved	
08-0301-1701	18-1	17-10	(3-28-18)	Approved	
08-0401-1701	18-1	17-10	(3-28-18)	Approved	
08-0501-1701	18-1	17-10	(3-28-18)	Approved	
09-0130-1701	18-1	17-7	(3-28-18)	Approved	
10-0101-1701	17-11	17-8	(3-28-18)	Approved	
10-0102-1701	17-9	17-7	(3-28-18)	Approved	
10-0104-1701	17-11	17-8	(3-28-18)	Approved	
11-0406-1701	18-1	17-11	(3-28-18)	Approved	
<b>11-1101-1701</b>	<b>18-1</b>	<b>17-11</b>	<b>(3-15-18)</b>	<b>Partial Rejection: 064.05 &amp; 201.01.d.</b>	<b>SCR 137 SCR 139</b>
11-1105-1701	18-1	17-11	(3-28-18)	Approved	
12-0110-1701	17-12	17-10	(3-28-18)	Approved	

<b>PENDING RULES</b>					
<b>REVIEWED BY THE 2018 IDAHO LEGISLATURE</b>					
<b>Docket Number</b>	<b>Bulletin Vol. No. Pending</b>	<b>Bulletin Vol. No. Proposed</b>	<b>Final Rule Effective Date</b>	<b>Action Taken &amp; Rejected Rule</b>	<b>Concurrent Resolution Number</b>
13-0104-1701	18-1	17-10	(3-28-18)	Approved	
13-0104-1702	18-1	17-10	(3-28-18)	Approved	
13-0104-1703	18-1	17-10	(3-28-18)	Approved	
13-0106-1701	18-1	17-10	(3-28-18)	Approved	
13-0108-1704	18-1	17-10	(3-28-18)	Approved	
<b>13-0108-1706</b>	<b>18-1</b>	<b>17-10</b>	<b>(2-21-18)</b>	<b>Partial Rejection: 421.02</b>	<b>HCR 33</b>
15-0103-1701	17-11	17-9	(3-28-18)	Approved	
15-0202-1701	17-11	17-9	(3-28-18)	Approved	
15-0401-1701	18-1	17-11	(3-28-18)	Approved	
16-0104-1701	18-1	17-9	(7-1-18)	Approved	
16-0202-1701	18-1	17-10	(7-1-18)	Approved	
16-0204-1701	18-1	17-9	(7-1-18)	Approved	
16-0210-1701	18-1	17-1	(3-28-18)	Approved	
16-0212-1701	18-1	17-9	(7-1-18)	Approved	
16-0301-1701	17-12	17-10	(3-28-18)	Approved	
16-0301-1702	18-1	17-10	(3-28-18)	Approved	
16-0305-1701	18-1	17-10	(3-28-18)	Approved	
<b>16-0308-1701</b>	<b>17-12</b>	<b>17-10</b>	<b>Rejected</b>	<b>Rejected All</b>	<b>HCR 47</b>
16-0309-1701	17-12	17-8	(3-28-18)	Approved	
16-0309-1702	18-1	17-10	(7-1-18)	Approved	
16-0309-1703	18-1	17-10	(7-1-18)	Approved	
16-0309-1704	17-12	17-10	(7-1-18)	Approved	
16-0310-1701	17-12	17-8	(3-28-18)	Approved	
16-0310-1702	18-1	17-10	(7-1-18)	Approved	
16-0310-1703	18-1	17-10	(7-1-18)	Approved	
16-0310-1705	17-12	17-7	(3-28-18)	Approved	
16-0310-1706	17-12	17-10	(3-28-18)	Approved	
16-0310-1707	17-12	17-10	(7-1-18)	Approved	
16-0319-1701	18-1	17-9	(7-1-18)	Approved	
16-0417-1701	18-1	17-8	(7-1-18)	Approved	

<b>PENDING RULES</b>					
<b>REVIEWED BY THE 2018 IDAHO LEGISLATURE</b>					
<b>Docket Number</b>	<b>Bulletin Vol. No. Pending</b>	<b>Bulletin Vol. No. Proposed</b>	<b>Final Rule Effective Date</b>	<b>Action Taken &amp; Rejected Rule</b>	<b>Concurrent Resolution Number</b>
16-0417-1702	18-1	17-8	(7-1-18)	Approved	
16-0503-1701	18-1	17-9	(3-28-18)	Approved	
16-0507-1701	17-12	17-10	(3-28-18)	Approved	
16-0601-1701	18-1	17-7	(3-28-18)	Approved	
16-0601-1702	18-1	17-9	(3-28-18)	Approved	
16-0612-1701	17-12	17-10	(3-28-18)	Approved	
16-0715-1701	18-1	17-9	(7-1-18)	Approved	
16-0717-1701	18-1	17-9	(7-1-18)	Approved	
16-0730-1701	17-12	17-9	(7-1-18)	Approved	
16-0733-1701	17-12	17-9	(7-1-18)	Approved	
16-0737-1701	17-12	17-10	(3-28-18)	Approved	
16-0750-1701	18-1	17-9	(7-1-18)	Approved	
17-0204-1701	18-1	17-11	(3-28-18)	Approved	
17-0207-1701	18-1	17-11	(3-28-18)	Approved	
17-0208-1701	18-1	17-11	(3-28-18)	Approved	
17-0210-1701	18-1	17-11	(3-28-18)	Approved	
17-0211-1701	18-1	17-11	(3-28-18)	Approved	
18-0102-1701	17-11	17-9	(3-28-18)	Approved	
18-0108-1701	17-11	17-9	(3-28-18)	Approved	
18-0120-1701	17-11	17-9	(3-28-18)	Approved	
18-0122-1701	17-11	17-9	(3-28-18)	Approved	
18-0125-1701	17-11	17-9	(3-28-18)	Approved	
18-0130-1701	17-11	17-9	(3-28-18)	Approved	
18-0135-1701	17-11	17-9	(3-28-18)	Approved	
18-0156-1701	17-11	17-9	(3-28-18)	Approved	
18-0173-1701	17-11	17-9	(3-28-18)	Approved	
18-0175-1701	17-10	17-8	(3-28-18)	Approved	
18-0181-1701	17-10	17-8	(3-28-18)	Approved	
<b>19-0101-1701</b>	<b>17-11</b>	<b>17-9</b>	<b>Rejected</b>	<b>Rejected All</b>	<b>HCR 46</b>
19-0101-1702	17-11	17-9	(3-28-18)	Approved	
19-0101-1703	17-11	17-9	(3-28-18)	Approved	

<b>PENDING RULES</b>					
<b>REVIEWED BY THE 2018 IDAHO LEGISLATURE</b>					
<b>Docket Number</b>	<b>Bulletin Vol. No. Pending</b>	<b>Bulletin Vol. No. Proposed</b>	<b>Final Rule Effective Date</b>	<b>Action Taken &amp; Rejected Rule</b>	<b>Concurrent Resolution Number</b>
21-0101-1701	17-9	17-7	(3-28-18)	Approved	
22-0113-1701	17-12	17-10	(3-28-18)	Approved	
23-0101-1701	17-11	17-9	(3-28-18)	Approved	
24-1201-1701	18-1	17-10	(3-28-18)	Approved	
24-1301-1701	18-1	17-10	(3-28-18)	Approved	
24-2301-1701	18-1	17-10	(3-28-18)	Approved	
27-0101-1701	17-12	17-10	(7-1-18)	Approved	
27-0101-1702	17-12	17-10	(7-1-18)	Approved	
27-0103-1701	17-12	17-10	(7-1-18)	Approved	
27-0104-1701	17-12	17-10	(7-1-18)	Approved	
27-0105-1701	17-12	17-10	(7-1-18)	Approved	
27-0106-1701	17-12	17-10	(7-1-18)	Approved	
31-1101-1701	17-12	17-10	(3-28-18)	Approved	
35-0101-1701	17-12	17-7	(3-28-18)	Approved	
35-0102-1701	17-12	17-8	(3-28-18)	Approved	
35-0102-1702	18-1	17-9	(3-28-18)	Approved	
35-0102-1703	17-12	17-9	(3-28-18)	Approved	
35-0103-1701	17-12	17-10	(3-28-18)	Approved	
35-0103-1704	18-1	17-10	(3-28-18)	Approved	
35-0103-1706	17-12	17-10	(3-28-18)	Approved	
35-0103-1707	17-12	17-10	(3-28-18)	Approved	
35-0103-1709	17-12	17-10	(3-28-18)	Approved	
35-0105-1701	17-12	17-10	(3-28-18)	Approved	
35-0105-1702	17-12	17-9	(3-28-18)	Approved	
35-0106-1701	17-12	17-9	(3-28-18)	Approved	
35-0106-1702	17-12	17-10	(3-28-18)	Approved	
35-0109-1701	17-12	17-7	(3-28-18)	Approved	
35-0109-1702	17-12	17-10	(3-28-18)	Approved	
35-0110-1701	17-12	17-7	(3-28-18)	Approved	
35-0112-1701	17-12	17-7	(3-28-18)	Approved	
35-0112-1702	17-12	17-10	(3-28-18)	Approved	

<b>PENDING RULES</b>					
<b>REVIEWED BY THE 2018 IDAHO LEGISLATURE</b>					
<b>Docket Number</b>	<b>Bulletin Vol. No. Pending</b>	<b>Bulletin Vol. No. Proposed</b>	<b>Final Rule Effective Date</b>	<b>Action Taken &amp; Rejected Rule</b>	<b>Concurrent Resolution Number</b>
35-0201-1701	17-12	17-10	(3-28-18)	Approved	
35-0201-1703	17-12	17-10	(3-28-18)	Approved	
39-0202-1701	17-12	17-9	(3-28-18)	Approved	
39-0271-1701	17-12	17-9	(3-28-18)	Approved	
39-0310-1701	17-12	17-9	(3-28-18)	Approved	
39-0316-1701	17-12	17-9	(3-28-18)	Approved	
42-0101-1701	17-12	17-10	(3-28-18)	Approved	
47-0101-1701	18-1	17-10	(3-28-18)	Approved	
<b>50-0101-1701</b>	<b>18-1</b>	<b>17-11</b>	<b>(3-21-18)</b>	<b>Partial Rejection: 551.03.c. &amp; 03.d.</b>	<b>HCR 57</b>
55-0103-1701	18-1	17-10	(3-28-18)	Approved	
55-0104-1701	18-1	17-10	(3-28-18)	Approved	
57-0101-1701	18-1	17-10	(3-28-18)	Approved	
58-0101-1601	17-5	16-9	(3-28-18)	Approved	
58-0101-1702	18-1	17-8	(3-28-18)	Approved	
58-0102-1502	18-1	17-9	(3-28-18)	Approved	
58-0102-1701	18-1	17-9	(3-28-18)	Approved	
58-0102-1702	18-1	17-8	(3-28-18)	Approved	
58-0105-1701	18-1	17-8	(3-28-18)	Approved	
58-0125-1701	18-1	17-8	(3-28-18)	Approved	
59-0102-1701	17-8	17-6	(3-28-18)	Approved	
<b>59-0103-1702</b>	<b>17-8</b>	<b>17-5</b>	<b>Rejected</b>	<b>Rejected All</b>	<b>HCR 62</b>
61-0106-1701	18-1	17-10	(5-1-18)	Approved	
<b>61-0107-1701</b>	<b>18-1</b>	<b>17-10</b>	<b>(5-1-18)</b>	<b>Partial Rejection: 020.01.d.</b>	<b>HCR 56</b>
61-0108-1701	18-1	17-11	(5-1-18)	Approved	

**ASSISTANCE ON TECHNICAL QUESTIONS:** For assistance on questions concerning this notice, contact Dennis Stevenson (208) 332-1820.

DATED this 20th day of April, 2018.

Dennis Stevenson  
Administrative Rules Coordinator  
Office of the Administrative Rules Coordinator  
Department of Administration  
P.O. Box 83720, Boise, ID 83720-0306  
Phone: (208) 332-1820

**OFFICE OF THE ADMINISTRATIVE RULES COORDINATOR  
IDAHO DEPARTMENT OF ADMINISTRATION**

**HISTORY NOTES INDEX OF ADMINISTRATIVE RULES REVIEWED AND APPROVED  
FOR FINAL ADOPTION DURING THE 2018 SECOND REGULAR SESSION  
OF THE SIXTY-FOURTH LEGISLATURE OF THE STATE OF IDAHO**

The following table lists all pending rulemakings that were reviewed during the 2018 legislative session and shows the individual rule sections that were affected by these rulemakings. The table includes the docket number of affected chapters, the amended section numbers, the Bulletin publication volumes, and the final effective date of the rule.

If the rule was affected (approved or rejected) by concurrent resolution, the resolution number is listed. If a section or subsection of the pending rule or a final rule was rejected by concurrent resolution, the affected section(s) is listed as rejected. The rejection of an amended section (pending rule) means the previously codified rule remains unchanged.

Effective dates for the pending rules reviewed and approved by the 2018 Idaho Legislature are as follows:

**Pending Rules (non-fee):** effective date – March 28, 2018 (3-28-18), unless otherwise specified in the pending rule.

**Pending Fee Rules** approved or partially rejected by [SCR 149](#): effective date – March 22, 2018 (3-22-18).

Pending Rules that were partially rejected by Concurrent Resolution are effective upon adoption of the Concurrent Resolution by the Legislature or as specified in the Pending Rule. All pending rules rejected by Concurrent Resolution are null and void and of no force and effect.

<i><b>History Notes of Sections Affected – Legislative Session 2018</b></i>				
<i><b>Chapter and Docket Number</b></i>	<i><b>Sections Affected</b></i>	<i><b>Bulletin Vol. Proposed Rule</b></i>	<i><b>Bulletin Vol. Pending Rule</b></i>	<i><b>Final Effective Date</b></i>
<b>IDAPA 01 – Idaho Board of Accountancy</b>				
<b>01.01.01 – Idaho Accountancy Rules</b>				
01-0101-1701	004	17-9	17-11	(3-28-18)
01-0101-1702	020	17-9	17-11	(3-28-18)
01-0101-1703	506	17-9	17-11	(3-28-18)
01-0101-1704	602	17-9	17-11	(3-28-18)
<b>IDAPA 02 – Department of Agriculture</b>				
<b>02.01.01 – Idaho Rules of Practice and Procedure of the Idaho Department of Agriculture</b>				
02-0101-1701	Chapter Repeal (000-999)	17-7	17-11	(3-28-18)
<b>02.01.01 – Rules of Procedure</b>				
02-0101-1702	Chapter Rewrite (000-999)	17-7	17-11	(3-28-18)
<b>02.02.14 – Rules for Weights and Measures</b>				
02-0214-1701	004	17-9	17-11	(3-28-18)
02-0214-1702	010, 300	17-9	17-11	(3-28-18)
02-0214-1703	004	17-7	17-11	(3-28-18)



## *History Notes of Sections Affected – Legislative Session 2018*

<i>Chapter and Docket Number</i>	<i>Sections Affected</i>	<i>Bulletin Vol. Proposed Rule</i>	<i>Bulletin Vol. Pending Rule</i>	<i>Final Effective Date</i>
<b>02.04.14 – Rules Governing Dairy Byproduct</b>				
02-0414-1702	004, 010, 030, 031	17-10	17-12	(3-28-18)
<b>02.06.02 – Rules Pertaining to the Idaho Commercial Feed Law</b>				
02-0602-1701	004	17-9	17-11	(3-28-18)
<b>02.06.12 – Rules Pertaining to the Idaho Fertilizer Law</b>				
02-0612-1701	004	17-9	17-11	(3-28-18)
<b>02.06.21 – Rules for Voluntary Public Services of the Idaho Department of Agriculture Laboratories</b>				
02-0621-1701	Chapter Repeal (000-999)	17-9	17-11	(3-28-18)
<b>02.06.41 – Rules Pertaining to the Idaho Soil and Plant Amendment Act of 2001</b>				
02-0641-1701	004	17-9	17-11	(3-28-18)
<b>02.08.01 – Sheep and Goat Rules of the Idaho Sheep and Goat Health Board</b>				
02-0801-1701	004, 100, 200	17-11	18-1	(3-28-18)

### **IDAPA 05 – Department of Juvenile Corrections**

<b>05.01.02 – Rules and Standards for Secure Juvenile Detention Centers</b>				
05-0102-1701	010-200, 204-210, 212-216, 223, 225, 227, 235, 245-265 (Pending Rule Subsection 010.37 rejected by <a href="#">HCR 55</a> )	17-10	17-12	(3-21-18)

### **IDAPA 07 – Division of Building Safety**

<b>07.01.06 – Rules Governing the Use of National Electrical Code</b>				
07-0106-1701	011	17-9	17-11	(3-28-18)
<b>07.02.04 – Rules Governing Plumbing Safety Inspections</b>				
07-0204-1701	012	17-9	17-11	(3-28-18)
<b>07.02.06 – Rules Concerning Idaho State Plumbing Code</b>				
07-0206-1701	011	17-9	17-11	(3-28-18)
<b>07.03.01 – Rules of Building Safety</b>				
07-0301-1701	004	17-9	17-11	(3-28-18)
<b>07.03.11 – Rules Governing Manufactured/Mobile Home Industry Licensing</b>				
07-0311-1701	000, 010, 014	17-9	17-11	(3-28-18)
<b>07.03.12 – Rules Governing Manufactured or Mobile Home Installations</b>				
07-0312-1701	004, 018	17-9	17-11	(3-28-18)

## *History Notes of Sections Affected – Legislative Session 2018*

<i>Chapter and Docket Number</i>	<i>Sections Affected</i>	<i>Bulletin Vol. Proposed Rule</i>	<i>Bulletin Vol. Pending Rule</i>	<i>Final Effective Date</i>
<b>07.04.01 – Rules Governing Safety Inspections – General</b>				
07-0401-1701	000-013	17-9	17-11	(3-28-18)
<b>07.04.02 – Safety Rules for Elevators, Escalators, and Moving Walks</b>				
07-0402-1701	004	17-9	17-11	(3-28-18)
<b>07.07.01 – Rules Governing Installation of Heating, Ventilation, and Air Conditioning Systems, Division of Building Safety</b>				
07-0701-1701	006	17-9	17-11	(3-28-18)
07-0701-1702	061	17-9	17-11	(3-28-18)
<b>07.08.17 – Idaho Minimum Safety Standards and Practices for Logging – Cable-Assisted Logging Systems</b>				
07-0817-1701	New Chapter (000-999)	17-6	17-9	(3-28-18)
<b>07.09.01 – Safety and Health Rules for Places of Public Employment</b>				
07-0901-1701	Chapter Repeal (000-999)	17-9	17-11	(3-28-18)
<b>07.10.01 – Rules Governing the Damage Prevention Board, Division of Building Safety</b>				
07-1001-1701	007-020	17-9	17-11	(3-28-18)

### **IDAPA 08 – State Board of Education / State Department of Education**

<b>08.01.11– Registration of Post-Secondary Educational Institutions and Proprietary Schools</b>				
08-0111-1701	201, 301	17-10	18-1	(3-28-18)
<b>08.01.13 – Rules Governing the Opportunity Scholarship Program</b>				
08-0113-1701	000, 101-302, 501	17-10	18-1	(3-28-18)
<b>08.02.02 – Rules Governing Uniformity</b>				
08-0202-1701	004, 015-042, 075-076	17-10	18-1	(3-28-18)
08-0202-1702	004	17-10	18-1	(3-28-18)
08-0202-1703	140	17-10	18-1	(3-28-18)
08-0202-1705	007, 015, 016, 021, 042-060, 120, 121	17-10	18-1	(3-28-18)
08-0202-1707	190	17-10	18-1	(3-28-18)
08-0202-1708	015	17-10	18-1	(3-28-18)
<b>08.02.03 – Rules Governing Thoroughness</b>				
08-0203-1702	105	17-8	17-12	(3-28-18)
08-0203-1703	004	17-10	18-1	(3-28-18)
08-0203-1704	004	17-10	18-1	(3-28-18)
08-0203-1705	004	17-10	18-1	(3-28-18)

## *History Notes of Sections Affected – Legislative Session 2018*

<i>Chapter and Docket Number</i>	<i>Sections Affected</i>	<i>Bulletin Vol. Proposed Rule</i>	<i>Bulletin Vol. Pending Rule</i>	<i>Final Effective Date</i>
08-0203-1707	007	17-10	18-1	(3-28-18)
08-0203-1708	004	17-6	17-12	(3-28-18)
08-0203-1709	004, 007, 104, 105	17-10	18-1	(3-28-18)
08-0203-1710	004	17-10	18-1	(3-28-18)
08-0203-1711	004	17-8	17-12	(3-28-18)
08-0203-1712	115	17-10	18-1	(3-28-18)
<b>08.02.04 – Rules Governing Public Charter Schools</b>				
08-0204-1701	100, 101, 200, 202-303, 403	17-10	18-1	(3-28-18)
<b>08.03.01 – Rules of the Public Charter School Commission</b>				
08-0301-1701	300-302, 401	17-10	18-1	(3-28-18)
<b>08.04.01 – Rules of the Idaho Digital Learning Academy</b>				
08-0401-1701	005, 010, 101, 102	17-10	18-1	(3-28-18)
<b>08.05.01 – Rules Governing Seed and Plant Certification</b>				
08-0501-1701	004	17-10	18-1	(3-28-18)

### **IDAPA 09 – Department of Labor**

<b>09.01.30 – Unemployment Insurance Benefits Administration Rules</b>				
09-0130-1701	010, 425, 575	17-7	18-1	(3-28-18)

### **IDAPA 10 – Board of Professional Engineers and Land Surveyors**

<b>10.01.01 – Rules of Procedure</b>				
10-0101-1701	013, 017, 019	17-8	17-11	(3-28-18)
<b>10.01.02 – Rules of Professional Responsibility</b>				
10-0102-1701	009	17-7	17-9	(3-28-18)
<b>10.01.04 – Rules of Continuing Professional Development</b>				
10-0104-1701	009	17-8	17-11	(3-28-18)

### **IDAPA 11 – Idaho State Police**

<b>11.04.06 – Rules Governing Racing Officials</b>				
11-0406-1701	051	17-11	18-1	(3-28-18)

## *History Notes of Sections Affected – Legislative Session 2018*

<i>Chapter and Docket Number</i>	<i>Sections Affected</i>	<i>Bulletin Vol. Proposed Rule</i>	<i>Bulletin Vol. Pending Rule</i>	<i>Final Effective Date</i>
<b>11.11.01 – Rules of the Idaho Peace Officer Standards and Training Council</b>				
11-1101-1701	001, 010-030, 041, 042, 050, 053, 057, 059, 060, 064, 065, 081, 090, 091, 096, 099, 116-119, 171, 177, 196-203, 361-362 (Pending Rule Subsection 064.05 rejected by <a href="#">SCR 139</a> ) (Pending Rule Subsection 201.01.d. rejected by <a href="#">SCR 137</a> )	17-11	18-1	(3-15-18)
<b>11.11.05 – Rules of the Idaho Peace Officer Standards and Training Council for Idaho Department of Juvenile Corrections Direct Care Staff</b>				
11-1105-1701	010	17-11	18-1	(3-28-18)

### **IDAPA 12 – Department of Finance**

<b>12.01.10 – Rules Pursuant to the Idaho Residential Mortgage Practices Act</b>				
12-0110-1701	005	17-10	17-12	(3-28-18)

### **IDAPA 13 – Department of Fish and Game**

<b>13.01.04 – Rules Governing Licensing</b>				
13-0104-1701	900, 901	17-10	18-1	(3-28-18)
13-0104-1702	700, 800	17-10	18-1	(3-28-18)
13-0104-1703	505	17-10	18-1	(3-28-18)
<b>13.01.06 – Rules Governing Classification and Protection of Wildlife</b>				
13-0106-1701	101, 200	17-10	18-1	(3-28-18)
<b>13.01.08 – Rules Governing the Taking of Big Game Animals in the State of Idaho</b>				
13-0108-1704	260	17-10	18-1	(3-28-18)
13-0108-1706	260, 270, 421, 422 (Pending Rule Subsection 421.02 rejected by <a href="#">HCR 33</a> )	17-10	18-1	(2-21-18)

### **IDAPA 15 – Office of the Governor**

<b>Division of Human Resources &amp; Personnel Commission</b>				
<b>15.04.01 – Rules of the Division of Human Resources and Idaho Personnel Commission</b>				
15-0401-1701	010, 040, 074, 080, 111, 119, 143, 150, 200, 250, 251	17-11	18-1	(3-28-18)
<b>Idaho Commission for the Blind and Visually Impaired</b>				
<b>15.02.02 – Vocational Rehabilitation Services</b>				
15-0202-1701	000, 001, 004, 010, 210-300, 356	17-9	17-11	(3-28-18)

## *History Notes of Sections Affected – Legislative Session 2018*

<i>Chapter and Docket Number</i>	<i>Sections Affected</i>	<i>Bulletin Vol. Proposed Rule</i>	<i>Bulletin Vol. Pending Rule</i>	<i>Final Effective Date</i>
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**Idaho Commission on Aging**

**15.01.03 – Rules Governing the Ombudsman for the Elderly Program**

15-0103-1701	010-043	17-9	17-11	(3-28-18)
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### **IDAPA 16 – Department of Health and Welfare**

**16.01.04 – Emergency Medical Services (EMS) – Account III Grants**

16-0104-1701	New Chapter (000-999)	17-9	18-1	(7-1-18)
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**16.02.02 – Rules of the Idaho Emergency Medical Services (EMS) Physician Commission**

16-0202-1701	004	17-10	18-1	(7-1-18)
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**16.02.04 – Rules Governing Emergency Medical Services Account III Grants**

16-0204-1701	Chapter Repeal (000-999)	17-9	18-1	(7-1-18)
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**16.02.10 – Idaho Reportable Diseases**

16-0210-1701	004, 010, 011, 050, 125, 610, 800	17-1	18-1	(3-28-18)
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**16.02.12 – Procedures and Testing to be Performed on Newborn Infants**

16-0212-1701	001-005, 010-100, 301	17-9	18-1	(7-1-18)
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**16.03.01 – Eligibility for Health Care Assistance for Families and Children**

16-0301-1701	540	17-10	17-12	(3-28-18)
16-0301-1702	221, 500, 535, 536	17-10	18-1	(3-28-18)

**16.03.05 – Rules Governing Eligibility for Aid to the Aged, Blind and Disabled (AABD)**

16-0305-1701	051, 279, 513, 781, 841	17-10	18-1	(3-28-18)
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**16.03.08 – Rules Governing the Temporary Assistance for Families in Idaho (TAFI) Program**

16-0308-1701	010, 125, 215, 240 (Pending rule rejected by <a href="#">HCR 47</a> )	17-10	17-12	Null & Void
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**16.03.09 – Medicaid Basic Plan Benefits**

16-0309-1701	853, 854	17-8	17-12	(3-28-18)
16-0309-1702	402, 403, 405, 500-502, 700-706	17-10	18-1	(7-1-18)
16-0309-1703	011, 585-587, 732, 735	17-10	18-1	(7-1-18)
16-0309-1704	004	17-10	17-12	(7-1-18)

**16.03.10 – Medicaid Enhanced Plan Benefits**

16-0310-1701	267, 268	17-8	17-12	(3-28-18)
16-0310-1702	100, 101	17-10	18-1	(7-1-18)
16-0310-1703	660, 661, 664, 665, 680, 684, 685	17-10	18-1	(7-1-18)

## *History Notes of Sections Affected – Legislative Session 2018*

<i>Chapter and Docket Number</i>	<i>Sections Affected</i>	<i>Bulletin Vol. Proposed Rule</i>	<i>Bulletin Vol. Pending Rule</i>	<i>Final Effective Date</i>
16-0310-1705	515	17-7	17-12	(3-28-18)
16-0310-1706	310, 635-638	17-10	17-12	(3-28-18)
16-0310-1707	004, 503, 508, 509, 512, 514, 584, 682	17-10	17-12	(7-1-18)
<b>16.03.18 – Medicaid Cost-Sharing</b>				
16-0318-1701	001, 207 (Fee approved by <a href="#">SCR 149</a> )	17-10	17-12	(3-22-18)
<b>16.03.19 – Rules Governing Certified Family Homes</b>				
16-0319-1701	000-950	17-9	18-1	(7-1-18)
<b>16.04.17 – Rules Governing Residential Habilitation Agencies</b>				
16-0417-1701	Chapter Repeal (000-999)	17-8	18-1	(7-1-18)
16-0417-1702	Chapter Rewrite (000-999)	17-8	18-1	(7-1-18)
<b>16.05.03 – Rules Governing Contested Case Proceedings and Declaratory Rulings</b>				
16-0503-1701	005, 006, 008-010, 101, 103, 106, 122, 124, 150, 199-201, 203, 204, 298-302, 504-751	17-9	18-1	(3-28-18)
<b>16.05.07 – The Investigation and Enforcement of Fraud, Abuse, and Misconduct</b>				
16-0507-1701	010, 210	17-10	17-12	(3-28-18)
<b>16.06.01 – Child and Family Services</b>				
16-0601-1701	483	17-7	18-1	(3-28-18)
16-0601-1702	425-434, 437	17-9	18-1	(3-28-18)
<b>16.06.12 – Rules Governing the Idaho Child Care Program (ICCP)</b>				
16-0612-1701	010, 011, 070, 072, 077, 103, 104, 200, 500-502, 600, 602, 701, 702, 802, 803	17-10	17-12	(3-28-18)
<b>16.07.15 – Behavioral Health Programs</b>				
16-0715-1701	009	17-9	18-1	(7-1-18)
<b>16.07.17 – Substance Use Disorders Services</b>				
16-0717-1701	000, 009	17-9	18-1	(7-1-18)
<b>16.07.30 – Behavioral Health Community Crisis Centers</b>				
16-0730-1701	009	17-9	17-12	(7-1-18)
<b>16.07.33 – Adult Mental Health Services</b>				
16-0733-1701	000, 009	17-9	17-12	(7-1-18)
<b>16.07.37 – Children's Mental Health Services</b>				
16-0737-1701	003, 283, 284	17-10	17-12	(3-28-18)

## *History Notes of Sections Affected – Legislative Session 2018*

<i>Chapter and Docket Number</i>	<i>Sections Affected</i>	<i>Bulletin Vol. Proposed Rule</i>	<i>Bulletin Vol. Pending Rule</i>	<i>Final Effective Date</i>
<b>16.07.50 – Minimum Standards for Nonhospital, Medically Monitored Detoxification/Mental Health Diversion Units</b>				
16-0750-1701	009	17-9	18-1	(7-1-18)

### **IDAPA 17 – Industrial Commission**

<b>17.02.04 – Administrative Rules of the Industrial Commission Under the Workers' Compensation Law -- Benefits</b>				
17-0204-1701	004	17-11	18-1	(3-28-18)
<b>17.02.07 – Procedures to Obtain Compensation</b>				
17-0207-1701	012	17-11	18-1	(3-28-18)
<b>17.02.08 – Miscellaneous Provisions</b>				
17-0208-1701	061	17-11	18-1	(3-28-18)
<b>17.02.10 – Administrative Rules of the Industrial Commission Under the Workers' Compensation Law -- Security for Compensation -- Insurance Carriers</b>				
17-0210-1701	010, 051	17-11	18-1	(3-28-18)
<b>17.02.11 – Administrative Rules of the Industrial Commission Under the Workers' Compensation Law -- Security for Compensation -- Self-Insured Employers</b>				
17-0211-1701	010, 051	17-11	18-1	(3-28-18)

### **IDAPA 18 – Department of Insurance**

<b>18.01.02 – Insurance Policy Titles</b>				
18-0102-1701	Chapter Repeal (000-999)	17-9	17-11	(3-28-18)
<b>18.01.08 – Filing of Life Policy Forms</b>				
18-0108-1701	Chapter Repeal (000-999)	17-9	17-11	(3-28-18)
<b>18.01.20 – Automobile Insurance Policies</b>				
18-0120-1701	000-010, 016, 017, Appendix A	17-9	17-11	(3-28-18)
<b>18.01.22 – Sale of Insurance by Vending Machines</b>				
18-0122-1701	Chapter Repeal (000-999)	17-9	17-11	(3-28-18)
<b>18.01.25 – Title Insurance and Title Insurance Agents and Escrow Officers</b>				
18-0125-1701	004	17-9	17-11	(3-28-18)
<b>18.01.30 – Individual Disability and Group Supplemental Disability Insurance Minimum Standards Rule</b>				
18-0130-1701	006-011	17-9	17-11	(3-28-18)

## *History Notes of Sections Affected – Legislative Session 2018*

<i>Chapter and Docket Number</i>	<i>Sections Affected</i>	<i>Bulletin Vol. Proposed Rule</i>	<i>Bulletin Vol. Pending Rule</i>	<i>Final Effective Date</i>
<b>18.01.35 – Guidelines Respecting the Use of Claim Forms for Disability Insurance Claims</b>				
18-0135-1701	Chapter Repeal (000-999)	17-9	17-11	(3-28-18)
<b>18.01.56 – Rebates and Illegal Inducements to Obtaining Title Insurance Business Rules</b>				
18-0156-1701	010, Exhibit 1	17-9	17-11	(3-28-18)
<b>18.01.73 – Rule to Implement the Individual Health Insurance Availability Act Plan Design</b>				
18-0173-1701	Chapter Repeal (000-999)	17-9	17-11	(3-28-18)
<b>18.01.75 – Credit for Reinsurance Rules</b>				
18-0175-1701	001, 003-112, Forms	17-8	17-10	(3-28-18)
<b>18.01.81 – Corporate Governance Annual Disclosure</b>				
18-0181-1701	New Chapter (000-999)	17-8	17-10	(3-28-18)

### **IDAPA 19 – Board of Dentistry**

<b>19.01.01 – Rules of the Idaho State Board of Dentistry</b>				
19-0101-1701	004, 060 (Pending rule rejected by <a href="#">HCR 46</a> )	17-9	17-11	Null & Void
19-0101-1702	010, 014, 035, 040	17-9	17-11	(3-28-18)
19-0101-1703	028, 029, 066	17-9	17-11	(3-28-18)

### **IDAPA 21 – Division of Veterans Services**

<b>21.01.01 – Rules Governing Admission, Residency, and Maintenance Charges in Idaho State Veterans Homes and Division of Veterans Services Administrative Procedure</b>				
21-0101-1701	203	17-7	17-9	(3-28-18)

### **IDAPA 22 – Board of Medicine**

<b>22.01.13 – Rules for the Licensure of Dietitians</b>				
22-0113-1701	010-023, 032-050	17-10	17-12	(3-28-18)

### **IDAPA 23 – Board of Nursing**

<b>23.01.01 – Rules of the Idaho Board of Nursing</b>				
23-0101-1701	132, 640, 643	17-9	17-11	(3-28-18)



## *History Notes of Sections Affected – Legislative Session 2018*

<i>Chapter and Docket Number</i>	<i>Sections Affected</i>	<i>Bulletin Vol. Proposed Rule</i>	<i>Bulletin Vol. Pending Rule</i>	<i>Final Effective Date</i>
<b>IDAPA 24 – Bureau of Occupational Licenses</b>				
<b>24.01.01 – Rules of the Board of Architectural Examiners</b>				
24-0101-1701	200 (Fee approved by <a href="#">SCR 149</a> )	17-10	18-1	(3-22-18)
<b>24.03.01 – Rules of the State Board of Chiropractic Physicians</b>				
24-0301-1701	020, 150, 700-709 (Fee approved by <a href="#">SCR 149</a> )	17-10	18-1	(3-22-18)
<b>24.06.01 – Rules for the Licensure of Occupational Therapists and Occupational Therapy Assistants</b>				
24-0601-1701	041 (Fee approved by <a href="#">SCR 149</a> )	17-10	18-1	(3-22-18)
<b>24.07.01 – Rules of the Idaho State Board of Landscape Architects</b>				
24-0701-1701	101, 400 (Fee approved by <a href="#">SCR 149</a> )	17-10	18-1	(3-22-18)
<b>24.08.01 – Rules of the State Board of Morticians</b>				
24-0801-1701	380, 500 (Fee approved by <a href="#">SCR 149</a> )	17-10	18-1	(3-22-18)
<b>24.12.01 – Rules of the Idaho State Board of Psychologist Examiners</b>				
24-1201-1701	300, 450, 601	17-10	18-1	(3-28-18)
<b>24.13.01 – Rules Governing the Physical Therapy Licensure Board</b>				
24-1301-1701	250	17-10	18-1	(3-28-18)
<b>24.18.01 – Rules of the Real Estate Appraiser Board</b>				
24-1801-1701	004, 150 (Fee approved by <a href="#">SCR 149</a> )	17-10	18-1	(3-22-18)
<b>24.23.01 – Rules of the Speech, Hearing and Communication Services Licensure Board</b>				
24-2301-1701	212, 400	17-10	18-1	(3-28-18)
24-2301-1702	004, 010, 150, 175, 260-301, 320, 480, 700 (Fee approved by <a href="#">SCR 149</a> )	17-10	18-1	(3-22-18)
<b>24.24.01 – Rules of the Genetic Counselors Licensing Board</b>				
24-2401-1701	250 (Fee approved by <a href="#">SCR 149</a> )	17-10	18-1	(3-22-18)
<b>24.25.01 – Rules of the Idaho Driving Businesses Licensure Board</b>				
24-2501-1701	175 (Fee approved by <a href="#">SCR 149</a> )	17-10	18-1	(3-22-18)

## *History Notes of Sections Affected – Legislative Session 2018*

<i>Chapter and Docket Number</i>	<i>Sections Affected</i>	<i>Bulletin Vol. Proposed Rule</i>	<i>Bulletin Vol. Pending Rule</i>	<i>Final Effective Date</i>
<b>IDAPA 27 – Board of Pharmacy</b>				
<b>27.01.01 – Rules of the Idaho State Board of Pharmacy</b>				
27-0101-1701	Chapter Repeal (000-999)	17-10	17-12	(7-1-18)
<b>27.01.01 – General Provisions</b>				
27-0101-1702	New Chapter (000-999)	17-10	17-12	(7-1-18)
<b>27.01.02 – Rules Governing Licensure and Registration</b>				
27-0102-1701	New Chapter (000-999) (Fee approved by <a href="#">SCR 149</a> )	17-10	17-12	(7-1-18)
<b>27.01.03 – Rules Governing Pharmacy Practice</b>				
27-0103-1701	New Chapter (000-999)	17-10	17-12	(7-1-18)
<b>27.01.04 – Rules Governing Pharmacist Prescriptive Authority</b>				
27-0104-1701	New Chapter (000-999)	17-10	17-12	(7-1-18)
<b>27.01.05 – Rules Governing Drug Compounding</b>				
27-0105-1701	New Chapter(000-999)	17-10	17-12	(7-1-18)
<b>27.01.06 – Rules Governing DME, Manufacturing, and Distribution</b>				
27-0106-1701	New Chapter (000-999)	17-10	17-12	(7-1-18)

<b>IDAPA 31 – Public Utilities Commission</b>				
<b>31.11.01 – Safety and Accident Reporting Rules for Utilities Regulated by the Idaho Public Utilities Commission</b>				
31-1101-1701	201	17-10	17-12	(3-28-18)

<b>IDAPA 35 – State Tax Commission</b>				
<b>35.01.01 – Income Tax Administrative Rules</b>				
35-0101-1701	075, 263, 771	17-7	17-12	(3-28-18)
<b>35.01.02 – Idaho Sales and Use Tax Administrative Rules</b>				
35-0102-1701	067	17-8	17-12	(3-28-18)
35-0102-1702	013, 044, 061, 079, 099, 107, 128	17-9	18-1	(3-28-18)
35-0102-1703	028, 103	17-9	17-12	(3-28-18)
<b>35.01.03 – Property Tax Administrative Rules</b>				
35-0103-1701	509, 609, 619, 700, 804, 995	17-10	17-12	(3-28-18)
35-0103-1704	314, 404, 612, 631, 803	17-10	18-1	(3-28-18)

## *History Notes of Sections Affected – Legislative Session 2018*

<i>Chapter and Docket Number</i>	<i>Sections Affected</i>	<i>Bulletin Vol. Proposed Rule</i>	<i>Bulletin Vol. Pending Rule</i>	<i>Final Effective Date</i>
35-0103-1706	610, 709	17-10	17-12	(3-28-18)
35-0103-1707	020	17-10	17-12	(3-28-18)
35-0103-1709	006, 406	17-10	17-12	(3-28-18)
<b>35.01.05 – Idaho Motor Fuels Tax Administrative Rules</b>				
35-0105-1701	270-292	17-10	17-12	(3-28-18)
35-0105-1702	420	17-9	17-12	(3-28-18)
<b>35.01.06 – Hotel/Motel Room and Campground Sales Tax Administrative Rules</b>				
35-0106-1701	001, 018, 019	17-9	17-12	(3-28-18)
35-0106-1702	006	17-10	17-12	(3-28-18)
<b>35.01.09 – Idaho County Option Kitchen and Table Wine Tax Administrative Rules</b>				
35-0109-1701	003, 006, 017	17-7	17-12	(3-28-18)
35-0109-1702	011, 015	17-10	17-12	(3-28-18)
<b>35.01.10 – Idaho Cigarette and Tobacco Products Tax Administrative Rules</b>				
35-0110-1701	006	17-7	17-12	(3-28-18)
<b>35.01.12 – Idaho Beer Tax Administrative Rules</b>				
35-0112-1701	003, 006, 014	17-7	17-12	(3-28-18)
35-0112-1702	011, 016	17-10	17-12	(3-28-18)
<b>35.02.01 – Tax Commission Administration and Enforcement Rules</b>				
35-0201-1701	326-328	17-10	17-12	(3-28-18)
35-0201-1703	310	17-10	17-12	(3-28-18)

### **IDAPA 39 – Idaho Transportation Department**

<b>39.02.02 – Rules Governing Vehicle and Vessel Dealer License Requirements - Motor Vehicles</b>				
39-0202-1701	400	17-9	17-12	(3-28-18)
<b>39.02.71 – Rules Governing Driver's License Violation Point System</b>				
39-0271-1701	200	17-9	17-12	(3-28-18)
<b>39.03.10 – Rules Governing When An Overlegal Permit Is Required</b>				
39-0310-1701	300	17-9	17-12	(3-28-18)
<b>39.03.16 – Rules Governing Oversize Permits for Non-Reducible Vehicles and/or Loads</b>				
39-0316-1701	400	17-9	17-12	(3-28-18)

## *History Notes of Sections Affected – Legislative Session 2018*

<i>Chapter and Docket Number</i>	<i>Sections Affected</i>	<i>Bulletin Vol. Proposed Rule</i>	<i>Bulletin Vol. Pending Rule</i>	<i>Final Effective Date</i>
<b>IDAPA 42 – Idaho Wheat Commission</b>				
<b>42.01.01 – Rules of the Idaho Wheat Commission</b>				
42-0101-1701	301	17-10	17-12	(3-28-18)

<b>IDAPA 47 – Division of Vocational Rehabilitation</b>				
<b>47.01.01 – Rules of the Idaho Division of Vocational Rehabilitation</b>				
47-0101-1701	004	17-10	18-1	(3-28-18)

<b>IDAPA 50 – Commission of Pardons and Parole</b>				
<b>50.01.01 – Rules of the Commission of Pardons and Parole</b>				
50-0101-1701	001, 006-010, 101, 104, 108-800 (Pending Rule Subsection 551.03.c. & 03.d. rejected by <a href="#">HCR 57</a> )	17-11	18-1	(3-21-18)

<b>IDAPA 55 – Division of Career Technical Education</b>				
<b>55.01.03 – Rules of Career Technical Schools</b>				
55-0103-1701	005, 101, 102, 104-108	17-10	18-1	(3-28-18)
<b>55.01.04 – Rules Governing Idaho Quality Program Standards Incentive Grants and Agricultural Education Program Start-Up Grants</b>				
55-0104-1701	100-300	17-10	18-1	(3-28-18)

<b>IDAPA 57 – Sexual Offender Management Board</b>				
<b>57.01.01 – Rules of the Sexual Offender Management Board</b>				
57-0101-1701	004, 011, 300	17-10	18-1	(3-28-18)

<b>IDAPA 58 – Department of Environmental Quality</b>				
<b>58.01.01 – Rules for the Control of Air Pollution in Idaho</b>				
58-0101-1601	621	16-9	17-5	(3-28-18)
58-0101-1702	107	17-8	18-1	(3-28-18)
<b>58.01.02 – Water Quality Standards</b>				
58-0102-1502	004, 210	17-9	18-1	(3-28-18)
58-0102-1701	210, 287	17-9	18-1	(3-28-18)

## *History Notes of Sections Affected – Legislative Session 2018*

<i>Chapter and Docket Number</i>	<i>Sections Affected</i>	<i>Bulletin Vol. Proposed Rule</i>	<i>Bulletin Vol. Pending Rule</i>	<i>Final Effective Date</i>
58-0102-1702	007-010, 210, 401	17-8	18-1	(3-28-18)
<b>58.01.05 – Rules and Standards for Hazardous Waste</b>				
58-0105-1701	002, 004-018	17-8	18-1	(3-28-18)
<b>58.01.25 – Rules Regulating the Idaho Pollutant Discharge Elimination System Program</b>				
58-0125-1701	003, 010, 090, 105, 109, 110, 130, 201, 203, 300-302, 304, 370	17-8	18-1	(3-28-18)

### **IDAPA 59 – Public Employee Retirement System of Idaho (PERSI)**

<b>59.01.02 – PERSI Rules for Eligibility</b>				
59-0102-1701	005	17-6	17-8	(3-28-18)
<b>59.01.03 – PERSI Contribution Rules</b>				
59-0103-1702	026-028, 100, 101 (Pending rule rejected by <a href="#">HCR 62</a> )	17-5	17-8	Null & Void

### **IDAPA 61 – State Public Defense Commission**

<b>61.01.06 – Rules Governing Procedures for the Oversight, Implementation, Enforcement and Modification of Indigent Defense Standards</b>				
61-0106-1701	New Chapter (000-999)	17-10	18-1	(5-1-18)
<b>61.01.07 – Rules Governing Standards for Defending Attorneys That Utilize Idaho’s Principles of an Indigent Defense Delivery System</b>				
61-0107-1701	004-020 (Pending Rule Subsection 020.01.d. rejected by <a href="#">HCR 56</a> )	17-10	18-1	(5-1-18)
<b>61.01.08 – Rules Governing the Administration of Idaho’s Indigent Defense Delivery Systems – Rule Definitions</b>				
61-0108-1701	New Chapter (000-999)	17-11	18-1	(5-1-18)

## IDAPA 02 – DEPARTMENT OF AGRICULTURE

### 02.05.01 – RULES GOVERNING PRODUCE SAFETY

#### DOCKET NO. 02-0501-1801 (NEW CHAPTER)

#### NOTICE OF INTENT TO PROMULGATE RULES – NEGOTIATED RULEMAKING

**AUTHORITY:** In compliance with Sections 67-5220(1) and 67-5220(2), Idaho Code, notice is hereby given that this agency intends to promulgate rules and desires public comment prior to initiating formal rulemaking procedures. This negotiated rulemaking action is authorized pursuant to Sections 22-101(3), 22-113, and 22-5404, Idaho Code.

**MEETING SCHEDULE:** Public meetings on the negotiated rulemaking will be held as follows:

<b>PUBLIC MEETINGS (ALL TIMES ARE LOCAL)</b>		
<b>Tuesday, May 15, 2018 9:00 a.m – 12:00 p.m.</b>	<b>Tuesday, May 22, 2018 10:00 a.m – 12:00 p.m.</b>	<b>Tuesday, May 29, 2018 10:00 a.m – 12:00 p.m.</b>
<b>Clarion Inn 1249 Tapadera Avenue Ontario, OR 97914</b>	<b>Fairfield Inn and Suites 1000 W. Pullman Road Moscow, ID 83843</b>	<b>Best Western Plus Burley Inn 800 N. Overland Avenue Burley, ID 83318</b>

The meeting sites will be accessible to persons with disabilities, if needed. Requests for accommodation must be made not later than five (5) days prior to the meeting to the agency address below.

**METHOD OF PARTICIPATION:** Persons wishing to participate in the negotiated rulemaking must do the following:

Interested members of the public who wish to participate must submit any written comments, questions, recommendations, or ideas to the Idaho State Department of Agriculture addressed to Pamm Juker, Chief of Staff, 2270 Old Penitentiary Road, Boise, ID 83712, or by email to [fsma@isda.idaho.gov](mailto:fsma@isda.idaho.gov). Individuals may also attend the public meeting to be conducted on the above dates during which the Idaho State Department of Agriculture will allow oral comments or presentations to be made.

Upon conclusion of the negotiated rulemaking, any unresolved issues, all key issues considered, and conclusion reached during the negotiated rulemaking will be addressed in a written summary. The summary will be made available to interested persons who contact the agency and will be posted on the agency website.

**DESCRIPTIVE SUMMARY AND STATEMENT OF PURPOSE:** The following is a statement in nontechnical language of the substance and purpose of the intended negotiated rulemaking and the principal issues involved:

The Produce Safety Rule is part of the new FDA Food Safety Modernization Act (FSMA) and establishes science-based minimum standards for the safe growing, harvesting, packing, and holding of fruits and vegetables grown for human consumption. These minimum standards were developed to ensure the safe production and harvesting of produce by domestic and foreign farms. Farms that meet the criteria may be subject to on-farm inspections. ISDA was given statutory authority to conduct on-farm inspections of farms subject to the FDA Produce Safety Rule by the 2018 Legislature in House Bill No. 537.

**ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS, OBTAINING DRAFT COPIES:** For assistance on technical questions concerning this negotiated rulemaking or to obtain a preliminary draft copy of the rule text contact Pamm Juker, Chief of Staff at (208) 332-8502. Materials pertaining to the negotiated rulemaking, including any available preliminary rule drafts, can be found on the ISDA web site at the following web address: [www.agri.idaho.gov](http://www.agri.idaho.gov).

Anyone may submit written comments regarding this negotiated rulemaking. All written comments must be directed to the undersigned and must be delivered on or before May 31, 2018.

Dated this 6th day of April, 2018.

Brian Oakey  
Deputy Director  
Idaho Department of Agriculture  
2270 Old Penitentiary Road  
P.O. Box 790  
Boise, Idaho 83701  
Phone: (208) 332-8550  
Fax: (208) 334-2710

**IDAPA 05 – IDAHO DEPARTMENT OF JUVENILE CORRECTIONS**  
**05.01.02 – RULES AND STANDARDS FOR SECURE JUVENILE DETENTION CENTERS**  
**DOCKET NO. 05-0102-1701**  
**NOTICE OF FINAL RULE – AGENCY FILING**

**AUTHORITY:** In compliance with Sections 67-5224 and 67-5291, Idaho Code, notice is hereby given that the legislature has taken action by concurrent resolution on the pending rule promulgated under Docket No. 05-0102-1701. Only that section of the rule effected by House Concurrent Resolution (HCR) 55 is being reprinted here as a final rule.

**DESCRIPTIVE SUMMARY:** The following is a concise explanatory statement regarding the partial rejection:

Pursuant to **HCR 55**, IDAPA 05.01.02, “Rules and Standards for Secure Juvenile Detention Centers,” the amendment to Section 010, Subsection 37, only, adopted as a pending rule under Docket Number **05-0102-1701**, is not consistent with legislative intent and is rejected and declared null, void and of no force and effect. Only Section 010 is reprinted here as affected by HCR 55 following this notice.

**ASSISTANCE ON TECHNICAL QUESTIONS:** For assistance on technical questions concerning this notice, contact Dennis Stevenson, Administrative Rules Coordinator, at (208) 332-1820.

DATED this 20th day of April, 2018.

Dennis Stevenson  
Administrative Rules Coordinator  
Office of the Administrative Rules Coordinator  
Department of Administration  
P. O. Box 83720, Boise, ID 83720-0306  
E-mail: [rulescoordinator@adm.idaho.gov](mailto:rulescoordinator@adm.idaho.gov)

**The pending rule adopted under this docket was partially rejected by HCR 55.  
The following rule text is the codified final rule and includes the rejected  
pending rule text shown here as underscored and stricken.**

**010. DEFINITIONS.**

As used in this chapter: (4-5-00)

**01. Adult.** A person eighteen (18) years of age or older. (4-5-00)

**02. Body Cavity Search.** The manual internal examination into the rectal or vaginal cavities to detect contraband, performed only by a medical authority. (3-21-18)

**03. Chemical Agent.** An active substance, such as oleoresin capsicum, used to deter disturbances that might cause personal injury or property damage. (4-5-00)

**04. Classification.** A process for determining the needs and requirements of those for whom confinement has been ordered and for assigning them to housing units and/or programs according to their needs and existing resources, while addressing the safety and security of all detained juveniles. (3-20-14)



- 05. Commit.** Commit means to transfer legal custody to the Idaho Department of Juvenile Corrections. (3-30-07)
- 06. Community-Based Program.** An in-home detention program or a nonsecure or staff secure residential or nonresidential program operated to supervise and provide competency development to juvenile offenders in the least restrictive setting, consistent with public safety, operated by the state or under contract with the state or by the county. (3-30-07)
- 07. Contact Visiting.** A program that permits juvenile offenders to visit with designated person(s). The area is free of obstacles or barriers that prohibit physical contact. (3-30-07)
- 08. Contraband.** Any item not issued or authorized by the detention center. (3-30-07)
- 09. Corporal Punishment.** Any act of inflicting punishment directly on the body, causing pain or injury. (4-5-00)
- 10. Court.** Idaho district court or magistrate's division thereof. (3-30-07)
- 11. Day Room/Multi-Purpose Room.** That portion of the housing unit used for varied juvenile offender activities which is separate and distinct from the sleeping rooms. (3-30-07)
- 12. Department.** The Idaho Department of Juvenile Corrections. (3-30-07)
- 13. Detention.** Detention means the temporary placement of juvenile offenders who require secure custody for their own or the community's protection in physically restricting facilities. (3-30-07)
- 14. Detention Center.** A facility established pursuant to Title 20, Chapter 5, Sections 20-517 and 20-518, Idaho Code, for the temporary placement of juvenile offenders who require secure confinement. (3-30-07)
- 15. Detention Records.** Information regarding the maintenance and operation of the detention center including but not limited to correspondence, memorandums, complaints regarding the detention center, daily activity logs, security and fire safety checks, head counts, health inspection records, and safety inspection records, use of physical force records and use of restraints records, incident reports, employee training and certification for use of security equipment. (3-30-07)
- 16. Direct Care Staff.** Any care staff member charged with day-to-day supervision of juvenile offenders housed in a juvenile detention center. (3-30-07)
- 17. Director.** The Director of the Idaho Department of Juvenile Corrections. (3-30-07)
- 18. Electroshock Device.** A device which delivers an electric shock designed to temporarily disrupt muscle function. (3-21-18)
- 19. Emergency Care.** Care for an acute illness or unexpected health care need that cannot be deferred until the next scheduled sick call. Emergency care shall be provided to the juvenile offender population by the medical staff, physician, other appropriately trained staff, local ambulance services or outside hospital emergency rooms. (3-30-07)
- 20. Emergency Plans.** Written documents that address specific actions to be taken in an institutional emergency or catastrophe such as a medical emergency, fire, flood, riot or other major disruption. (4-5-00)
- 21. Health Appraisal.** An evaluation of a patient's current physical and mental condition and medical histories conducted by the health authority or medical employee. (3-30-07)
- 22. Health Authority.** The physician, health administrator, or agency responsible for the provision of health care services at the detention center. (3-30-07)

- 23. Health-Trained Employee.** A person who operates within the limits of any license or certification to provide assistance to a physician, nurse, physician's assistant, or other professional medical staff. Duties may include preparing and reviewing screening forms for needed follow-up; preparing juvenile offenders and their records for sick call; and assisting in the implementation of medical orders regarding diets, housing, and work assignments. (3-29-12)
- 24. Housing Unit.** The total living area available to a group or classification of juvenile offenders in a detention center. This area may consist of a dormitory or a combination of the space in each sleeping room and day room/ multi-purpose room. (3-30-07)
- 25. Incident Report.** A written document reporting any occurrence or event, or an incident which threatens the safety and security of direct care staff, juvenile offenders or others, or which threatens the security of the program and which requires a staff response. (3-21-18)
- 26. Judge.** A district judge or a magistrate. (4-5-00)
- 27. Juvenile.** A person less than eighteen (18) years of age. (3-30-07)
- 28. Juvenile Detention Records.** Information maintained in hard copy or electronic format concerning the individual's delinquent or criminal, personal, and medical history and behavior and activities while in detention. (3-30-07)
- 29. Juvenile Offender.** A person who was under the age of eighteen (18) at the time of any act, omission or status bringing the person within the purview of the Juvenile Corrections Act. (3-30-07)
- 30. Legal Custody.** The relationship created by the court's decree which imposes upon the custodian responsibilities of physical possession of the juvenile offender, the duty to protect, train and discipline him and to provide him with food, shelter, education and ordinary medical care. (3-30-07)
- 31. Legal Guardian.** A person appointed as guardian of a minor under the laws of Idaho. For the purposes of this chapter, legal guardian does not include and shall not be construed to include the owner, operator or the agent of an owner or operator of a detention center, observation and assessment center, secure facility, residential facility or other facility having temporary or long-term physical custody of the juvenile offender. (4-5-00)
- 32. Mechanical Restraints.** Devices used to restrict physical activity. (3-30-07)
- 33. Medical Employee.** A certified or licensed person such as a physician, nurse, physician's assistant, or emergency medical technician who works under the supervision and authority of the health authority consistent with their respective levels of licensure, certification, training, education and experience. (3-29-12)
- 34. Medical Records.** Records maintained by the health authority, to include medical examinations, diagnoses, and any medical care provided. (3-21-18)
- 35. Intake Medical Screening.** A system of structured observation/initial health assessment of newly arrived juvenile offenders. Medical screenings may be performed by a medical employee or health-trained employee, or by a juvenile detention officer using a checklist approved by the Health Authority. (3-29-12)
- 36. Observation and Assessment Program.** A residential or nonresidential program designed to complete assessments of juvenile offenders. (3-30-07)
- 37. Pat Search.** The touching or feeling of a subject's clothed body to detect contraband. *A passing of the hands over the clothed body of a person by direct care staff to determine whether the individual possesses contraband.* (4-5-00)
- 38. Perimeter Security.** A system that controls ingress and egress to the interior of a detention center or institution. The system may include electronic devices, walls, fence, patrols or towers. (3-30-07)

- 39. Perimeter Security Check.** Physical inspection of the perimeter of the detention center performed for the purpose of discovering or preventing security breach. May include the inspection of the perimeter of the detention center and adjacent containment fence or areas as designated by detention center policy and procedures. (3-30-07)
- 40. Petition for Exemption.** A formal written document addressed to the Director of the Idaho Department of Juvenile Corrections requesting exception from a detention center standard. (3-21-18)
- 41. Physical Intervention.** Physical contact to guide, restrict, or prevent movement in order to take immediate control of a situation. (3-21-18)
- 42. Policy and Procedures.** Standard operating strategies and processes developed by the administrative authority governing detention center operations. (3-30-07)
- a.** Policy is a course of action that guides and determines present and future decisions and actions. Policies indicate the general course or direction of an organization within which the activities of the direct care staff must operate. (3-30-07)
- b.** Procedure is the detailed and sequential action which must be executed to ensure that policy is implemented. It is the method of performing an operation or a manner of proceeding on a course of action. It differs from a policy in that it directs actions required to perform a specific task within the guidelines of the policy. (4-5-00)
- 43. Prison Rape Elimination Act (PREA).** A federal act promulgating standards that promote zero (0) tolerance toward sexual abuse of juvenile offenders by staff or by other juvenile offenders. Also known as Public Law 108-79 or PREA. (3-20-14)
- 44. Rated Capacity.** The maximum number of juvenile offenders which may be housed in a particular room, housing unit, or detention center based upon available square footage, sanitation fixtures, and other physical plant features specified in these rules. (3-30-07)
- 45. Renovation.** The alteration of the structure of any existing juvenile detention center, or portion thereof, for the purposes of changing or improving its function. This may include, but not be limited to, altering the physical layout of essential areas within the detention center or reconstruction of the existing structure, areas, or interior features. (3-30-07)
- 46. Rule Infraction.** A violation of detention center rules of conduct or policy and procedures as governed by detention center policy and procedures. (3-30-07)
- 47. Safety Equipment.** Devices primarily used for safety purposes such as but not limited to firefighting equipment, for example, chemical extinguishers, hoses, nozzles, water supplies, alarm systems, sprinkler systems, portable breathing devices, gas masks, fans, first aid kits, stretchers, and emergency alarms. (4-5-00)
- 48. Secure Perimeter.** The outer portions of a detention center that provide for secure confinement of juvenile offenders. (3-30-07)
- 49. Security Devices.** Equipment used primarily to confine and control detained persons and may include but is not limited to locks, gates, doors, bars, fences, screens, ceilings, floors, walls, and barriers, electronic monitoring equipment, security alarm systems, security light units, auxiliary power supplies, and other equipment used to maintain detention center security. (3-30-07)
- 50. Staffing Plan.** A documented schedule which includes staffing of direct care staff, staffing ratios, resident activities, and the certification level of staff. (3-30-07)
- 51. Standards.** Rules for Secure Juvenile Detention Centers, IDAPA 05, Title 01, Chapter 02. (3-30-07)
- 52. Strip Search.** A visual examination of a juvenile offender's naked body for weapons, contraband,

injuries, or a medical condition that may require further attention. This also includes a thorough search of the juvenile offender's clothing while such is not being worn. (3-21-18)

**53. Volunteer.** A person who freely chooses to provide services to juvenile offenders or staff at a juvenile detention center, and is not compensated for the services or time. Volunteers are supervised by direct care staff. Volunteers shall not be unsupervised with juvenile offenders and will be supervised by direct care staff at the detention center. (3-29-12)

**IDAPA 07 – DIVISION OF BUILDING SAFETY**

**07.02.06 – RULES CONCERNING IDAHO STATE PLUMBING CODE**

**DOCKET NO. 07-0206-1702**

**(THIRD) NOTICE OF INTENT TO PROMULGATE RULES – NEGOTIATED RULEMAKING**

**AUTHORITY:** In compliance with Sections 67-5220(1) and 67-5220(2), Idaho Code, notice is hereby given that this agency intends to promulgate rules and desires public comment prior to initiating formal rulemaking procedures. This negotiated rulemaking action is authorized pursuant to Section 54-2606, Idaho Code.

**MEETING SCHEDULE:** A public meeting on the negotiated rulemaking will be held as follows:

**Thursday, June 7, 2018  
9:30 a.m. (MDT)**

**Idaho Division of Building Safety  
1090 E. Watertower St., Suite 150  
Meridian, ID 83642**

**via VIDEO-TELECONFERENCE  
(same date and time as above)  
at the following Division of Building Safety locations:**

**Coeur d’Alene Regional Office  
1250 Ironwood Drive, Suite 220  
Coeur d’Alene, ID 83814**

**Pocatello Regional Office  
2055 Garrett Way, Bldg. 1, Suite 4  
Pocatello, ID 83201**

Additional negotiated rulemaking meetings may be established, if necessary. Adequate notice of the dates, locations, and manner of participation of any such additional meetings will be posted on the Division of Building Safety website at <http://dbs.idaho.gov/>.

**NOTE: The public meeting previously scheduled for Thursday May 17, 2018, has been cancelled.**

The meeting sites will be accessible to persons with disabilities, if needed. Requests for accommodation must be made not later than five (5) days prior to the meeting to the agency address below.

**METHOD OF PARTICIPATION:** Persons wishing to participate in the negotiated rulemaking must do the following:

Interested members of the public who wish to participate must submit any written comments, questions, recommendations, or ideas to the Idaho Plumbing Board on designated forms available at the Division’s website at <http://dbs.idaho.gov/> and at the Division’s offices in Meridian, Coeur d’Alene and Pocatello. Individuals may also attend the public meeting to be conducted on the date listed above. The Board will allow oral comments or presentations to be made at the meeting. More information on the meeting is available by contacting Deputy Administrator Ron Whitney at (208) 332-7150 or at [ron.whitney@dbs.idaho.gov](mailto:ron.whitney@dbs.idaho.gov).

Upon conclusion of the negotiated rulemaking, any unresolved issues, all key issues considered, and conclusion reached during the negotiated rulemaking will be addressed in a written summary. The summary will be made available to interested persons who contact the agency or, if the agency chooses, the summary may be posted on the agency website.

**DESCRIPTIVE SUMMARY AND STATEMENT OF PURPOSE:** The following is a statement in nontechnical language of the substance and purpose of the intended negotiated rulemaking and the principal issues involved:

Pursuant to Section 54-2606, Idaho Code, the Board has the authority, through the promulgation of rules, to adopt and amend the Idaho State Plumbing Code. The Board desires to amend provisions of the code as it determines necessary through the negotiated rulemaking process. The Board seeks the participation of the affected industry, enforcement jurisdictions and the public at large in this rulemaking process to ensure that due consideration is given to the varying views about the adoption of amendments to this code for application in Idaho.

**ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS, OBTAINING DRAFT COPIES:** For assistance on technical questions concerning this negotiated rulemaking or to obtain a preliminary draft copy of the rule text, if available, contact John Nielsen, Plumbing Program Manager, Division of Building Safety at (208) 332-7112 or at [john.nielsen@dbs.idaho.gov](mailto:john.nielsen@dbs.idaho.gov). Materials pertaining to the negotiated rulemaking, including any available preliminary rule drafts, can be found on the Division's website at <http://dbs.idaho.gov/>.

Anyone may submit written comments regarding this negotiated rulemaking. All written comments must be directed to the undersigned and must be delivered by June 1, 2018.

Dated this 27th day of March, 2018.

Ron Whitney, Deputy Administrator  
Division of Building Safety  
1090 E. Watertower St., Ste. 150  
P. O. Box 83720  
Meridian, ID 83642  
Phone: (208) 332-7150  
Fax: (877) 810-2840

## IDAPA 07 – DIVISION OF BUILDING SAFETY

### 07.04.01 – RULES GOVERNING SAFETY INSPECTIONS – GENERAL

DOCKET NO. 07-0401-1801

#### NOTICE OF INTENT TO PROMULGATE RULES – NEGOTIATED RULEMAKING

**AUTHORITY:** In compliance with Sections 67-5220(1) and 67-5220(2), Idaho Code, notice is hereby given that this agency intends to promulgate rules and desires public comment prior to initiating formal rulemaking procedures. This negotiated rulemaking action is authorized pursuant to Section 67-2601A, Idaho Code.

**MEETING SCHEDULE:** A public meeting on the negotiated rulemaking will be held as follows:

**Tuesday, May 22, 2018  
9:30 a.m. (MDT)**

**Idaho Division of Building Safety  
1090 E. Watertower St., Suite 150  
Meridian, ID 83642**

**via VIDEO-TELECONFERENCE  
(same date and time as above)  
at the following Division of Building Safety locations:**

**Coeur d’Alene Regional Office  
1250 Ironwood Drive, Suite 220  
Coeur d’Alene, ID 83814**

**Pocatello Regional Office  
2055 Garrett Way, Bldg. 1, Suite 4  
Pocatello, ID 83201**

Additional negotiated rulemaking meetings may be established, if necessary. Adequate notice of the dates, locations, and manner of participation of any such additional meetings will be posted on the Division of Building Safety website at <http://dbs.idaho.gov/>.

The meeting sites will be accessible to persons with disabilities, if needed. Requests for accommodation must be made not later than five (5) days prior to the meeting to the agency address below.

**METHOD OF PARTICIPATION:** Persons wishing to participate in the negotiated rulemaking must do the following:

Interested members of the public who wish to participate must submit any written comments, questions, recommendations, or ideas to the Division of Building Safety on designated forms available at the Division’s website at <http://dbs.idaho.gov/> and at the Division’s offices in Meridian, Coeur d’Alene and Pocatello. Individuals may also attend the public meeting to be conducted on the date listed above. The Board will allow oral comments or presentations to be made at the meeting. More information on the meeting is available by contacting Deputy Administrator Ron Whitney at (208) 332-7150 or at [ron.whitney@dbs.idaho.gov](mailto:ron.whitney@dbs.idaho.gov).

Upon conclusion of the negotiated rulemaking, any unresolved issues, all key issues considered, and conclusion reached during the negotiated rulemaking will be addressed in a written summary. The summary will be made available to interested persons who contact the agency or, if the agency chooses, the summary may be posted on the agency website.

**DESCRIPTIVE SUMMARY AND STATEMENT OF PURPOSE:** The following is a statement in nontechnical language of the substance and purpose of the intended negotiated rulemaking and the principal issues involved:

Pursuant to Sections 67-2311 through 67-2318, Idaho Code, the Administrator of the Division of Building Safety has authority to perform inspections of state buildings to determine the existence of any unsafe or hazardous

conditions. Additionally, pursuant to Section 67-2601A, Idaho Code, the Administrator has authority to conduct safety inspections of buildings owned or maintained by political subdivisions of the state upon request and promulgate rules adopting minimum safety standards and procedures for conducting inspections and safety training. The Division desires to amend provisions of the existing safety and health rules applicable to places of public employment through the negotiated rulemaking process. Specifically, the Division seeks to amend outdated provisions and update the adopted safety standards applicable to the safety inspections it conducts on state-owned buildings or for a political subdivision. The Division seeks the participation of the affected industry, owners and operators of public buildings, other interested parties, and the public at large in this rulemaking process to ensure that due consideration is given to the varying views about the adoption of safety rules for application in Idaho.

**ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS, OBTAINING DRAFT COPIES:** For assistance on technical questions concerning this negotiated rulemaking or to obtain a preliminary draft copy of the rule text, if available, contact Ron Whitney, Deputy Administrator, at (208) 332-7150 or at [ron.whitney@dbs.idaho.gov](mailto:ron.whitney@dbs.idaho.gov). Materials pertaining to the negotiated rulemaking, including any available preliminary rule drafts, can be found on the Division's web site at <http://dbs.idaho.gov>.

Anyone may submit written comments regarding this negotiated rulemaking. All written comments must be directed to the undersigned and must be delivered by May 17, 2018.

Dated this 13th day of March, 2018.

Ron Whitney, Deputy Administrator  
Division of Building Safety  
1090 E. Watertower St., Ste. 150  
P. O. Box 83720  
Meridian, ID 83642  
Phone: (208) 332-7150  
Fax: (877) 810-2840



## IDAPA 07 – DIVISION OF BUILDING SAFETY

### 07.09.01 – SAFETY AND HEALTH RULES FOR PLACES OF PUBLIC EMPLOYMENT

DOCKET NO. 07-0901-1801

#### NOTICE OF INTENT TO PROMULGATE RULES – NEGOTIATED RULEMAKING

**AUTHORITY:** In compliance with Sections 67-5220(1) and 67-5220(2), Idaho Code, notice is hereby given that this agency intends to promulgate rules and desires public comment prior to initiating formal rulemaking procedures. This negotiated rulemaking action is authorized pursuant to Section 67-2601A, Idaho Code.

**MEETING SCHEDULE:** A public meeting on the negotiated rulemaking will be held as follows:

**Tuesday, May 22, 2018  
9:30 a.m. (MDT)**

**Idaho Division of Building Safety  
1090 E. Watertower St., Suite 150  
Meridian, ID 83642**

**via VIDEO-TELECONFERENCE  
(same date and time as above)  
at the following Division of Building Safety locations:**

**Coeur d’Alene Regional Office  
1250 Ironwood Drive, Suite 220  
Coeur d’Alene, ID 83814**

**Pocatello Regional Office  
2055 Garrett Way, Bldg. 1, Suite 4  
Pocatello, ID 83201**

Additional negotiated rulemaking meetings may be established, if necessary. Adequate notice of the dates, locations, and manner of participation of any such additional meeting will be posted on the Division of Building Safety website at <http://dbs.idaho.gov/>.

The meeting sites will be accessible to persons with disabilities, if needed. Requests for accommodation must be made not later than five (5) days prior to the meeting to the agency address below.

**METHOD OF PARTICIPATION:** Persons wishing to participate in the negotiated rulemaking must do the following:

Interested members of the public who wish to participate must submit any written comments, questions, recommendations, or ideas to the Division of Building Safety on designated forms available at the Division’s website at <http://dbs.idaho.gov/> and at the Division’s offices in Meridian, Coeur d’Alene and Pocatello. Individuals may also attend the public meeting to be conducted on the date listed above. The Board will allow oral comments or presentations to be made at the meeting. More information on the meeting is available by contacting Deputy Administrator Ron Whitney at (208) 332-7150 or at [ron.whitney@dbs.idaho.gov](mailto:ron.whitney@dbs.idaho.gov).

Upon conclusion of the negotiated rulemaking, any unresolved issues, all key issues considered, and conclusion reached during the negotiated rulemaking will be addressed in a written summary. The summary will be made available to interested persons who contact the agency or, if the agency chooses, the summary may be posted on the agency website.

**DESCRIPTIVE SUMMARY AND STATEMENT OF PURPOSE:** The following is a statement in nontechnical language of the substance and purpose of the intended negotiated rulemaking and the principal issues involved:

Pursuant to Sections 67-2311 through 67-2318, Idaho Code, the Administrator of the Division of Building Safety has authority to perform inspections of state buildings to determine the existence of any unsafe or hazardous

conditions. Additionally, pursuant to Section 67-2601A, Idaho Code, the Administrator has authority to conduct safety inspections of buildings owned or maintained by political subdivisions of the state upon request and promulgate rules adopting minimum safety standards and procedures for conducting inspections and safety training. The Division desires to amend provisions of the existing safety and health rules applicable to places of public employment through the negotiated rulemaking process. Specifically, the Division seeks to amend outdated provisions and update the adopted safety standards applicable to the safety inspections it conducts on state-owned buildings or for a political subdivision. The Division seeks the participation of the affected industry, owners and operators of public buildings, other interested parties, and the public at large in this rulemaking process to ensure that due consideration is given to the varying views about the adoption of safety rules for application in Idaho.

**ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS, OBTAINING DRAFT COPIES:** For assistance on technical questions concerning this negotiated rulemaking or to obtain a preliminary draft copy of the rule text, if available, contact Ron Whitney, Deputy Administrator, at (208) 332-7150 or at [ron.whitney@dbs.idaho.gov](mailto:ron.whitney@dbs.idaho.gov). Materials pertaining to the negotiated rulemaking, including any available preliminary rule drafts, can be found on the Division's web site at <http://dbs.idaho.gov>.

Anyone may submit written comments regarding this negotiated rulemaking. All written comments must be directed to the undersigned and must be delivered by May 17, 2018.

Dated this 13th day of March, 2018.

Ron Whitney, Deputy Administrator  
Division of Building Safety  
1090 E. Watertower St., Ste. 150  
P. O. Box 83720  
Meridian, ID 83642  
Phone: (208) 332-7150  
Fax: (877) 810-2840

## IDAPA 07 – DIVISION OF BUILDING SAFETY

### 07.10.01 – RULES GOVERNING THE DAMAGE PREVENTION BOARD, DIVISION OF BUILDING SAFETY

DOCKET NO. 07-1001-1801

#### NOTICE OF INTENT TO PROMULGATE RULES – NEGOTIATED RULEMAKING

**AUTHORITY:** In compliance with Sections 67-5220(1) and 67-5220(2), Idaho Code, notice is hereby given that this agency intends to promulgate rules and desires public comment prior to initiating formal rulemaking procedures. This negotiated rulemaking action is authorized pursuant to Sections 55-2203, 55-2205 and 55-2211, Idaho Code.

**MEETING SCHEDULE:** Public meetings on the negotiated rulemaking will be held as follows:

<b>Thursday, May 24, 2018</b> <b>9:30 a.m. (MDT)</b>	<b>Thursday, July 26, 2018</b> <b>9:30 a.m. (MDT)</b>
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**Idaho Division of Building Safety**  
**1090 E. Watertower St., Suite 150**  
**Meridian, ID 83642**

**via VIDEO-TELECONFERENCE**  
**(same dates and times as above)**  
**at the following Division of Building Safety locations:**

**Coeur d’Alene Regional Office**  
**1250 Ironwood Drive, Suite 220**  
**Coeur d’Alene, ID 83814**

**Pocatello Regional Office**  
**2055 Garrett Way, Bldg. 1, Suite 4**  
**Pocatello, ID 83201**

Additional negotiated rulemaking meetings may be established, if necessary. Adequate notice of the dates, locations, and manner of participation of any such additional meetings will be posted on the Division of Building Safety website at <http://dbs.idaho.gov/>.

The meeting sites will be accessible to persons with disabilities, if needed. Requests for accommodation must be made not later than five (5) days prior to the meeting to the agency address below.

**METHOD OF PARTICIPATION:** Persons wishing to participate in the negotiated rulemaking must do the following:

Interested members of the public who wish to participate must submit any written comments, questions, recommendations, or ideas to the Idaho Damage Prevention Board on designated forms available at the Division’s website at <http://dbs.idaho.gov/> and at the Division’s offices in Meridian, Coeur d’Alene and Pocatello. Individuals may also attend the public meetings to be conducted on the dates listed above. The Board will allow oral comments or presentations to be made at the meetings. More information on the meetings is available by contacting Deputy Administrator Ron Whitney at (208) 332-7150 or at [ron.whitney@dbs.idaho.gov](mailto:ron.whitney@dbs.idaho.gov).

Upon conclusion of the negotiated rulemaking, any unresolved issues, all key issues considered, and conclusion reached during the negotiated rulemaking will be addressed in a written summary. The summary will be made available to interested persons who contact the agency or, if the agency chooses, the summary may be posted on the agency website.

**DESCRIPTIVE SUMMARY AND STATEMENT OF PURPOSE:** The following is a statement in nontechnical language of the substance and purpose of the intended negotiated rulemaking and the principal issues involved:

Pursuant to Sections 55-2203, 55-2205 and 55-2211, Idaho Code, the Board has the authority, through the promulgation of rules, to provide for the location and marking of underground facilities in Idaho; fund the activities

of the board through certain fees; and provide for the filing of complaints and issuance of penalties regarding violations of Title 55, Chapter 22, Idaho Code. The Board desires to amend provisions of the existing rules governing damage prevention practices in Idaho through the negotiated rulemaking process. Specifically, the Board seeks to provide for the location and marking of certain underground facilities in Idaho; review certain fees that fund the activities of the board; and review procedures for the filing of complaints and issuance of penalties regarding violations of Title 55, Chapter 22, Idaho Code. The Board seeks the participation of the affected industry, stakeholders, other interested parties and the public at large in this rulemaking process to ensure that due consideration is given to the varying views about the adoption of rules governing damage prevention practice for application in Idaho.

**ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS, OBTAINING DRAFT COPIES:** For assistance on technical questions concerning this negotiated rulemaking or to obtain a preliminary draft copy of the rule text, if available, contact Ron Whitney, Deputy Administrator, Division of Building Safety at (208) 332-7150 or at [ron.whitney@dbs.idaho.gov](mailto:ron.whitney@dbs.idaho.gov). Materials pertaining to the negotiated rulemaking, including any available preliminary rule drafts, can be found on the Division's website at <http://dbs.idaho.gov/>.

Anyone may submit written comments regarding this negotiated rulemaking. All written comments must be directed to the undersigned and must be delivered by May 18, 2018, for the May meeting and July 20, 2018, for the July meeting.

Dated this 27th day of March, 2018.

Ron Whitney, Deputy Administrator  
Division of Building Safety  
1090 E. Watertower St., Ste. 150  
P. O. Box 83720  
Meridian, ID 83642  
Phone: (208) 332-7150  
Fax: (877) 810-2840

**IDAPA 11 – IDAHO STATE POLICE  
PEACE OFFICER STANDARDS AND TRAINING (POST) COUNCIL**

**11.11.01 – RULES OF THE IDAHO PEACE OFFICER STANDARDS AND TRAINING COUNCIL**

**DOCKET NO. 11-1101-1701**

**NOTICE OF FINAL RULE – AGENCY FILING**

**AUTHORITY:** In compliance with Sections 67-5224 and 67-5291, Idaho Code, notice is hereby given that the legislature has taken action by concurrent resolutions on the pending rule promulgated under Docket No. 11-1101-1701. Only those sections of the rule effected by Senate Concurrent Resolutions (SCR) 137 and 139 are being reprinted here as a final rule.

**DESCRIPTIVE SUMMARY:** The following is a concise explanatory statement regarding the partial rejection:

Pursuant to [SCR 137](#) and [SCR 139](#), IDAPA 11.11.01, “Rules of the Idaho Peace Officer Standards and Training Council,” the amendments to Section 201, Subsection 01.d., and Section 064, Subsection 05, only, adopted as a pending rule under Docket Number [11-0101-1701](#), are not consistent with legislative intent and are rejected and declared null, void and of no force and effect. Only Sections 201 and 064 are reprinted here as affected by SCR 137 and SCR 139 following this notice.

**ASSISTANCE ON TECHNICAL QUESTIONS:** For assistance on technical questions concerning this notice, contact Dennis Stevenson, Administrative Rules Coordinator, at (208) 332-1820.

DATED this 20th day of April, 2018.

Dennis Stevenson  
Administrative Rules Coordinator  
Office of the Administrative Rules Coordinator  
Department of Administration  
P. O. Box 83720, Boise, ID 83720-0306  
E-mail: [rulescoordinator@adm.idaho.gov](mailto:rulescoordinator@adm.idaho.gov)

**The pending rule adopted under this docket was partially rejected by SCRs 137 and 139.  
The following rule text is the codified final rule and includes the rejected  
pending rule text shown here as underscored and stricken.**

**064. CODE OF ETHICS/STANDARDS OF CONDUCT.**

Each applicant shall attest that he has read, understands, and will abide by the POST Council’s Code of Ethics as standards of professional conduct and that he has read and understands the conduct that may constitute cause for decertification as found in the POST Council’s Code of Ethics and Subsections 091.03 and 091.04. (3-27-13)

**01. Fundamental Duty.** As a law enforcement or emergency communications officer, my fundamental duty is to serve the community; to safeguard lives and property; to protect the innocent against deception, the weak against oppression or intimidation, and the peaceful against violence or disorder; and to respect the Constitutional rights of all to liberty, equality and justice. (3-15-18)

**02. Personal and Official Life.** I will keep my private life unsullied as an example to all and will behave in a manner that does not bring discredit to me or my agency. I will maintain courageous calm in the face of danger, scorn, or ridicule; develop self-restraint; and be constantly mindful of the welfare of others. Honest in thought and deed in both my personal and official life, I will be exemplary in obeying the law and the regulations of my

department. Whatever I see or hear of a confidential nature or that is confided to me in my official capacity will be kept ever secret, unless revelation is necessary in the performance of my duty. (3-21-12)

**03. Appropriately Enforce the Law.** I will never act officiously or permit personal feelings, prejudices, political beliefs, aspirations, animosities or friendships to influence my decisions. With no compromise for crime and the relentless prosecution of criminals, I will enforce the law courteously and appropriately without fear or favor, malice or ill will, never employing unnecessary force or violence and never accepting gratuities. (3-21-12)

**04. Public Trust.** I recognize the badge or position of my office as a symbol of public faith, and I accept it as a public trust to be held so long as I am true to the ethics of law enforcement/public service. I will never engage in acts of corruption or bribery, nor will I condone such acts by other law enforcement or emergency communications officers. I will cooperate with all legally authorized agencies and their representatives in the pursuit of justice. (3-15-18)

**05. Professional Performance.** I know that I alone am responsible for my own standard of professional performance and will take every reasonable opportunity to enhance and improve my level of knowledge and competence. I will constantly strive to achieve these objectives and ideals, dedicating myself before God ~~with~~ sincere and unfaltering commitment to my chosen profession...law enforcement ~~public safety~~. (3-21-12)

**(BREAK IN CONTINUITY OF SECTIONS)**

**201. INTERMEDIATE CERTIFICATE.**

**01. Requirements.** In addition to the requirements set forth in Section 197 of these rules, the requirements in Section 201 are necessary for award of the Intermediate certificate. (3-15-18)

- a. The applicant shall be a full-time emergency communication officer. (3-15-18)
- b. The applicant shall possess, or be eligible to possess, a Basic certificate. (3-15-18)
- c. The applicant shall have satisfactorily completed a minimum of one hundred twenty (120) hours of POST-certified training, which must include the POST-approved basic training. (3-15-18)
- d. The applicant shall have at least three (3) ~~ten (10)~~ years of communications specialist experience. (4-2-03)

## IDAPA 13 – IDAHO FISH AND GAME COMMISSION

### 13.01.08 – RULES GOVERNING THE TAKING OF BIG GAME ANIMALS IN THE STATE OF IDAHO

DOCKET NO. 13-0108-1701P

#### NOTICE OF AMENDED PROCLAMATION

**AUTHORITY:** In compliance with Section 36-105(3), Idaho Code, notice is hereby given that this agency has adopted by amended proclamation the 2017-2018 Big Game Seasons establishing seasons and limits for deer, elk, pronghorn, bear, mountain lion, and wolves, in Idaho, as follows:

2018 White-tailed Deer Tag General Any Weapon Seasons:

Unit 10A season has been amended to October 10 – November 26. Additionally, no second tag may be used in Unit 10A.

2018 Controlled Deer Hunts for Antlered Deer:

Hunt 1016 for area 26 has been amended to limit the number of nonresident tags to 13.

Hunt 1017 for area 27 has been amended to limit the number of nonresident tags to 51.

2018 Outfitter Allocation Deer – Antlered Deer Only:

Amendment creates Hunt 1183 for area 26, allocating 59 outfitter tags.

Amendment creates Hunt 1184 for area 26, allocating 99 outfitter tags.

2018 Elk Hunting:

Weiser River Zone (Units 22, 32, 32A) season has been amended to eliminate the quota on the “A” Tag.

Landowner Appreciation Program Tags:

Amendment allows for 2018-2019 Landowner Appreciation Program tags to be issued for all controlled hunts for mule deer, white-tailed deer, elk, pronghorn and black bears, except those hunts with less than ten (10) tags, youth only hunts, hunts that rotate among different Game Management Units each season-setting cycle, and hunts with no private land within the hunt area.

**PUBLIC HEARING SCHEDULE:** A number of public hearings and open houses have already occurred. The next public hearing before the Fish and Game Commission will be

**Wednesday, May 9, 2018  
Approximately 7:00 p.m. (MDT)**

**Idaho Fish and Game Regional Office  
555 Deinhard Lane  
McCall, ID 83638**

**ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS:** For assistance on technical questions concerning the amended proclamation, contact James Stoll at (208) 334-3715.

Individuals with disabilities may request meeting accommodations by contacting the Director’s office at the Idaho Department of Fish and Game directly at (208) 334-5159 or through the Idaho Relay Service at 1(800) 377-2529 (TDD).

## IDAPA 13 – DEPARTMENT OF FISH AND GAME

### 13.01.08 – RULES GOVERNING THE TAKING OF BIG GAME ANIMALS IN THE STATE OF IDAHO

DOCKET NO. 13-0108-1706

#### NOTICE OF FINAL RULE – AGENCY FILING

**AUTHORITY:** In compliance with Sections 67-5224 and 67-5291, Idaho Code, notice is hereby given that the legislature has taken action by concurrent resolution on the pending rule promulgated under Docket No. 13-0108-1706. Only that section of the rule effected by House Concurrent Resolution (HCR) 33 is being reprinted here as a final rule.

**DESCRIPTIVE SUMMARY:** The following is a concise explanatory statement regarding the partial rejection:

Pursuant to **HCR 33**, IDAPA 13.01.08, “Rules Governing the Taking of Big Game Animals in the State of Idaho,” the amendment to Section 421, Subsection 02., only, adopted as a pending rule under Docket Number **13-0108-1706**, is not consistent with legislative intent and is rejected and declared null, void and of no force and effect. Only Section 421 is reprinted here as affected by HCR 33 following this notice.

**ASSISTANCE ON TECHNICAL QUESTIONS:** For assistance on technical questions concerning this notice, contact Dennis Stevenson, Administrative Rules Coordinator, at (208) 332-1820.

DATED this 20th day of April, 2018.

Dennis Stevenson  
Administrative Rules Coordinator  
Office of the Administrative Rules Coordinator  
Department of Administration  
P. O. Box 83720, Boise, ID 83720-0306  
E-mail: [rulescoordinator@adm.idaho.gov](mailto:rulescoordinator@adm.idaho.gov)

**The pending rule adopted under this docket was partially rejected by HCR 33.  
The following rule text is the codified final rule and includes the rejected  
pending rule text shown here as underseored and stricken.**

#### 421. MANDATORY PRONGHORN, DEER, AND ELK REPORT REQUIREMENTS.

**01. Mandatory Report.** Any hunter that obtains a pronghorn, deer and/or elk tag and kills a pronghorn, deer and/or elk, must submit an accurately completed Mandatory Report as provided by the Director to the Department or authorized agent, WITHIN TEN (10) DAYS OF KILL. Any hunter that obtains a pronghorn, deer and/or elk tag and does not successfully kill a pronghorn, deer and/or elk must submit a completed Mandatory Report to the Department or authorized agent WITHIN TEN (10) DAYS OF THE CLOSING DATE OF THE APPROPRIATE SEASON. (2-21-18)

**02. Failure to Report.** Failure Any hunter who fails to submit the required pronghorn, deer and/or elk Mandatory Report by January 31 of the following year as required in Subsection 421.01 will render the hunter ineligible to obtain any subsequent year’s license until or by January 31 of the following year can be required to file a late Mandatory Report permit is filed with the Department or authorized agent prior to obtaining any subsequent year’s license. (4-7-11)



**IDAPA 13 – IDAHO FISH AND GAME COMMISSION**

**13.01.08 – RULES GOVERNING THE TAKING OF BIG GAME ANIMALS IN THE STATE OF IDAHO**

**DOCKET NO. 13-0108-1801P**

**NOTICE OF PROCLAMATION**

**AUTHORITY:** In compliance with Section 36-105(3), Idaho Code, notice is hereby given that this agency has adopted by proclamation the 2018 Big Game Seasons establishing seasons and limits for hunting moose, bighorn sheep, and mountain goat, in Idaho.

**PUBLIC HEARING SCHEDULE:** A number of public hearings and open houses have already occurred. The next public hearing before the Fish and Game Commission will be:

**Wednesday, May 9, 2018  
Approximately 7:00 p.m. (MDT)**

**Idaho Fish and Game Regional Office  
555 Deinhard Lane  
McCall, ID 83638**

**ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS:** For assistance on technical questions concerning the proposed proclamation, contact James Stoll at (208) 334-3715.

Individuals with disabilities may request meeting accommodations by contacting the Director's office at the Idaho Department of Fish and Game directly at (208) 334-5159 or through the Idaho Relay Service at 1(800) 377-2529 (TDD).

## **IDAPA 13 – IDAHO FISH AND GAME COMMISSION**

### **13.01.09 – RULES GOVERNING THE TAKING OF GAME BIRDS IN THE STATE OF IDAHO**

**DOCKET NO. 13-0109-1802P**

#### **NOTICE OF PROCLAMATION**

**AUTHORITY:** In compliance with Section 36-105(3), Idaho Code, notice is hereby given that this agency is proposing to adopt by proclamation the 2018 – 2019 Migratory Game Bird Seasons establishing seasons and limits for hunting Ducks, Wilson’s Snipe, Coots, Canada Geese, Snow Geese, Ross’ Geese, White-fronted Geese, Sandhill Cranes, Doves, and American Crow in Idaho.

**PUBLIC HEARING SCHEDULE:** The next public hearing before the Fish and Game Commission will be on May 9th in McCall, Idaho. Please contact the Department of Fish and Game for exact time and location.

**ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS:** For assistance on technical questions concerning the proposed proclamation, contact James Stoll at (208) 334-3715.

Individuals with disabilities may request meeting accommodations by contacting the Director’s office at the Idaho Department of Fish and Game directly at (208) 334-5159 or through the Idaho Relay Service at 1(800) 377-2529 (TDD).

**IDAPA 13 – IDAHO FISH AND GAME COMMISSION**

**13.01.11 – RULES GOVERNING FISH**

**DOCKET NO. 13-0111-1802P**

**NOTICE OF PROCLAMATION**

**AUTHORITY:** In compliance with Section 36-105(3), Idaho Code, notice is hereby given that this agency is proposing to adopt by proclamation the 2018 Chinook Spring Fishing Season, establishing seasons and limits for fishing in Idaho.

**PUBLIC HEARING SCHEDULE:** The next public hearing before the Fish and Game Commission will be:

**Wednesday, May 9, 2018  
Approximately 7:00 p.m. (MDT)**

**Idaho Fish and Game Regional Office  
555 Deinhard Lane  
McCall, ID 83638**

**ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS:** For assistance on technical questions concerning the proposed proclamation, contact James Stoll at (208) 334-3715.

Individuals with disabilities may request meeting accommodations by contacting the Director's office at the Idaho Department of Fish and Game directly at (208) 334-5159 or through the Idaho Relay Service at 1(800) 377-2529 (TDD).

# **IDAPA 16 – DEPARTMENT OF HEALTH AND WELFARE**

## **16.02.08 – VITAL STATISTICS RULES**

**DOCKET NO. 16-0208-1801**

### **NOTICE OF RULEMAKING – TEMPORARY AND PROPOSED RULE**

**EFFECTIVE DATE:** The effective date of the temporary rule is April 6, 2018.

**AUTHORITY:** In compliance with Sections 67-5221(1) and 67-5226, Idaho Code, notice is hereby given that this agency has adopted a temporary rule, and proposed regular rulemaking procedures have been initiated. The action is authorized pursuant to Section 39-242, Idaho Code.

**PUBLIC HEARING SCHEDULE:** Public hearing(s) concerning this rulemaking will be scheduled if requested in writing by twenty-five (25) persons, a political subdivision, or an agency, not later than May 16, 2018.

The hearing site(s) will be accessible to persons with disabilities. Requests for accommodation must be made not later than five (5) days prior to the hearing, to the agency address below.

**DESCRIPTIVE SUMMARY:** The following is the required finding and concise statement of its supporting reasons for adopting a temporary rule and a nontechnical explanation of the substance and purpose of the proposed rulemaking:

On March 5, 2018, the United States District Court for the District of Idaho issued a decision holding that Vital Records' practice of categorically denying applications for the amendment of gender markers on a birth certificates violated the constitutional rights of two transgender plaintiffs. *F.V. v. Barron, et al.*, Case No. 1:17-CV-170-CWD. The court ordered that Vital Records must begin accepting applications from transgender persons no later than April 6, 2018, and that it must process those applications in a constitutionally sound manner. This rule change establishes the standards and processes for such applications.

This rule change proposes to establish a process for the amendment of a gender marker on a birth certificate. Specifically, this rule change requires a notarized affidavit from the applicant; prohibits the marking of the replacement birth certificate as amended; and designates that a previous or concurrent name change must not show revision history, or be marked as amended.

**TEMPORARY RULE JUSTIFICATION:** Pursuant to Section(s) 67-5226(1)(b), Idaho Code, the Governor has found that temporary adoption of the rule is appropriate to comply with deadlines in amendments to governing law or federal programs, specifically, this rulemaking is being done to comply with a federal court order.

**FEE SUMMARY:** The following is a specific description of the fee or charge imposed or increased: N/A

**FISCAL IMPACT:** The following is a specific description, if applicable, of any negative fiscal impact on the state general fund greater than ten thousand dollars (\$10,000) during the fiscal year:

There is no anticipated fiscal impact to state general funds or any other funds except the costs of the rule promulgation, which includes printing and publication.

**NEGOTIATED RULEMAKING:** Pursuant to Section 67-5220(2), Idaho Code, negotiated rulemaking was not conducted. Negotiated rulemaking has been deemed not feasible since the Department must have the temporary rule in effect by April 6, 2018, as required by a federal court order.

**INCORPORATION BY REFERENCE:** No materials are being incorporated by reference in this rulemaking.

**ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS:** For assistance on technical questions concerning the temporary and proposed rule, contact James Aydelotte at (208) 334-4969.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before May 23, 2018.

Dated this 23rd day of March, 2018.

Tamara Prisock  
DHW – Administrative Rules Unit  
450 W. State Street – 10th Floor  
P.O. Box 83720  
Boise, ID 83720-0036  
Phone: (208) 334-5500 / Fax: (208) 334-6558  
E-mail: [dhwrules@dhw.idaho.gov](mailto:dhwrules@dhw.idaho.gov)

**THE FOLLOWING IS THE TEMPORARY RULE AND THE PROPOSED TEXT  
OF DOCKET NO. 16-0208-1801  
(Only Those Sections With Amendments Are Shown.)**

**201. COMPLETION AND CORRECTION OF CERTIFICATES.**

**01. Correction of Minor Errors on Certificates During the First Year.** Except as otherwise provided in these rules, correction of obvious errors or transposition of letters in words of common knowledge, may be made by the State Registrar or an authorized agent within the first year after the date of the event either upon individual observation or query or upon request of any person with a direct and tangible interest as defined in IDAPA 16.05.01, "Use and Disclosure of Department Records," Subsections 011.01 and 011.03, or any person listed in Subsection 201.06.d. of these rules. The method of correction will be determined by the State Registrar, and is not subject to the requirements of Subsection 201.08 of these rules. When such minor corrections are made by the State Registrar, a notation as to the source of the information, together with the date the change was made and the initials of the authorized agent making the change must be made on the certificate in such a way as not to become a part of any certification issued. The certificate must not be marked as amended. (3-30-07)

**02. Amendment of Registrant's Given Names or Surname on Birth Certificates Within the First Year.** (12-26-83)

**a.** Until the registrant's first birthday, given names or surname may be amended upon written notarized request of: (11-20-87)

i. Both parents; (12-26-83)

ii. The mother in the case of a child born out of wedlock and the father's name is not shown on the certificate; (4-5-00)

iii. The father in the case of the death or incapacity of the mother; (12-26-83)

iv. The mother in the case of the death or incapacity of the father; or (12-26-83)

v. The legal guardian or agency having legal custody of the registrant. (12-26-83)

**b.** The certificate must be marked as amended. (3-30-07)

**03. Amendment of Registrant's Given Name on Birth Certificate After the First Year.** (12-26-83)

**a.** After one (1) year from the date of birth, the provisions of Subsection 201.06 of these rules must be followed to amend the given name if the name was entered in error at the time of the preparation of the birth

- certificate. (3-30-07)
- b.** In all other cases, a legal change of name order from a court of competent jurisdiction must be submitted to change a given name after one (1) year. (12-26-83)
- 04. Addition of Given Names on Birth Certificates.** (12-26-83)
- a.** Until the registrant's seventh birthday, given names, for a child whose birth was recorded without given names, may be added to the certificate upon written notarized request of: (12-26-83)
- i.** Both parents; (12-26-83)
- ii.** The mother in the case of a child born out of wedlock and the father's name is not shown on the certificate; (4-5-00)
- iii.** The father in the case of the death or incapacity of the mother; (12-26-83)
- iv.** The mother in the case of the death or incapacity of the father; or (12-26-83)
- v.** The legal guardian or agency having legal custody of the registrant. (12-26-83)
- b.** The certificate shall be marked as amended. (12-26-83)
- c.** After the registrant's seventh birthday, the provisions of Subsection 201.06 of these rules must be followed to add a given name. (3-30-07)
- 05. Acknowledgment of Paternity.** (12-26-83)
- a.** Subject to the provisions of Subsection 201.05.b. of these rules, a new certificate of birth will be prepared by the State Registrar for a child born out of wedlock in this state upon receipt of an affidavit of paternity signed by both parents and a written request by both parents. The child's surname will be changed on the certificate to that of the father if both parents so request. (3-30-07)
- b.** If another man is shown as the father of the child on the original certificate, a new certificate may be prepared only when a determination of paternity is made by a court of competent jurisdiction, or following adoption. (12-26-83)
- c.** The certificate must not be marked as amended. (3-30-07)
- 06. Amendment of Indicator of Gender.** (4-6-18)T
- a.** The State Registrar must issue an amended Idaho certificate of live birth for the change of the indicator of sex upon receipt of the following: (4-6-18)T
- i.** For a registrant eighteen (18) years of age and older, a completed and notarized application on a form approved by the State Registrar that includes the following information: (4-6-18)T
- (1)** The identity of the applicant; (4-6-18)T
- (2)** The Idaho certificate of live birth to be amended; (4-6-18)T
- (3)** A declaration that the registrant's indicator of sex on the Idaho certificate of live birth does not match the registrant's gender identity; and (4-6-18)T
- (4)** The gender indicator as it should appear on the amended certificate of live birth. (4-6-18)T
- ii.** For a registrant under the age of eighteen (18), a completed and notarized application on a form

approved by the State Registrar that includes the following information: (4-6-18)T

- (1) The identity of the applicant; (4-6-18)T
- (2) The Idaho certificate of live birth to be amended; (4-6-18)T
- (3) A declaration that the registrant's indicator of sex on the Idaho certificate of live birth does not match the registrant's gender identity; (4-6-18)T
- (4) The gender indicator as it should appear on the amended certificate of live birth; and (4-6-18)T
- (5) The consent of all parents listed on the certificate of live birth or the consent of the registrant's legal guardian. If a parent is deceased, a copy of the death certificate must be submitted with the application. If a parent cannot be located, the applicant must also submit a certified copy of an order from an Idaho court of competent jurisdiction ordering that the consent of only one (1) parent is required. (4-6-18)T

b. The amended certificate of live birth issued under this rule must not be marked amended, must not refer to the original certificate of live birth sex, and must show the amended gender as requested. The certificate of live birth being amended, application, and court order if required, must be placed in a sealed file which may only be opened by an order from an Idaho court of competent jurisdiction. (4-6-18)T

c. A one-time name change made under an amendment of sex on the certificate of live birth, whether made prior to, at the time of, or subsequent to a change of indicator of gender on a certificate of live birth must not be marked amended and must not refer to the original birth certificate name or indicator of sex. Any additional name changes are governed by Subsections 201.08 and 201.09 of this rule. (4-6-18)T

**067. All Other Amendments.** Unless otherwise provided in these rules or in Section 39-250, Idaho Code, all other amendments to vital records must be supported by: (3-30-07)

- a. An affidavit setting forth: (12-26-83)
  - i. Information to identify the certificate; (12-26-83)
  - ii. The incorrect data as it is listed on the certificate; and (3-30-07)
  - iii. The correct data as it should appear. (12-26-83)
- b. If one (1) year has elapsed since the date the event occurred, one (1) or more items of documentary evidence which support the alleged facts and which were established at least five (5) years prior to the date of application for amendment or within seven (7) years of the date of the event. (12-26-83)
- c. Any item of a medical nature can be amended only upon receipt of an affidavit from the person certifying such item, except that queries originating in the vital statistics office and subsequently completed and signed by the certifier may be used to complete or modify the reported cause of death. The State Registrar may require documentary evidence to substantiate the requested amendment. (3-30-07)
- d. Applications to amend a specific vital record will be accepted as follows: (12-26-83)
  - i. An application to amend a birth certificate may only be made by one (1) or both of the parents, the legal guardian, the registrant if eighteen (18) years of age or older, or the individual responsible for filing the certificate. (12-26-83)
  - ii. An application to amend a death certificate may only be made by the informant, the next of kin, the funeral director or person acting as such who signed the death certificate, or the certifying physician or coroner. (12-26-83)
  - iii. An application to amend a stillbirth certificate may only be made by a person listed in Subsections

201.06.d.i. or 201.06.d.ii. of these rules. (3-30-07)

iv. An application to amend a marriage or divorce certificate may only be made by the custodian of the official record from which the certificate was prepared, either of the parties to the marriage or divorce, or the individual responsible for filing the certificate. (12-26-83)

e. The State Registrar will evaluate the evidence submitted in support of any amendment, or require additional documentation. The State Registrar's decision and determination will be based upon serving the objectives of the vital statistics statutes and the best interests of the public. In the event the application is rejected or additional information is required, the State Registrar must advise the applicant of the reason for the action and the right to appeal pursuant to Section 39-250(5), Idaho Code. (3-30-07)

~~078.~~ **Amendment of the Same Item More Than Once.** Once an item is amended on a vital record, that item can not be amended again except upon receipt of a court order from an Idaho court of competent jurisdiction. (3-30-07)

~~089.~~ **Methods of Amending Certificates.** (12-26-83)

a. Certificates of birth, death, stillbirth, marriage, and divorce may only be amended by the State Registrar as follows: (12-26-83)

i. Preparing a new certificate showing the correct information when the State Registrar deems that the nature of the amendment so requires. The new certificate may be prepared on the form used for registering current events at the time of amendment. Except as provided elsewhere in these rules, the item number of the entry that was amended must be identified on the new certificate. In every case, except as provided elsewhere in these rules or the Idaho Code, the new certificate must show the date the amendment was made and be given the same state file number as the existing certificate. Signatures appearing on the existing certificate must be typed on the new certificate. (3-30-07)

ii. Completing the item in any case where the item was left blank on the existing certificate. (12-26-83)

iii. Drawing a single line through the item to be amended and inserting the correct data immediately above or to the side. The line drawn through the original entry must not obliterate such entry. (3-30-07)

iv. A certificate of birth amended in accordance with the provisions of Section 39-250(4), Idaho Code, must be amended as prescribed in Subsection 201.08.a.iii. of these rules. The fact that the name was changed in accordance with a court order must be stated on the certificate. (3-30-07)

b. Unless prohibited by statute or rule, there must be inserted on the face of the certificate the date the amendment was made and the initials of the person making the change; the certificate must be marked as amended. (3-30-07)



**IDAPA 16 – DEPARTMENT OF HEALTH AND WELFARE**

**16.03.10 – MEDICAID ENHANCED PLAN BENEFITS**

**DOCKET NO. 16-0310-1704**

**(THIRD) NOTICE OF INTENT TO PROMULGATE RULES – NEGOTIATED RULEMAKING**

**AUTHORITY:** In compliance with Sections 67-5220(1) and 67-5220(2), Idaho Code, notice is hereby given that this agency intends to promulgate rules and desires public comment prior to initiating formal rulemaking procedures. This negotiated rulemaking action is authorized pursuant to Sections 56-202, 56-203, 56-250 through 56-257, 56-260 through 56-266, and 56-1610 Idaho Code.

**MEETING SCHEDULE:** A public meeting on the negotiated rulemaking will be held as follows:

<b>PUBLIC (LIVE) MEETING</b>	
<b>Friday, May 25, 2018 - 10:00 a.m. (MDT)</b>	
<b>Medicaid Central Office 3232 Elder Street Conference Rooms D West/East Boise, ID 83705</b>	
<b>Via VIDEO CONFERENCE</b>	
<b>9:00 a.m. (PDT)</b>	<b>10:00 a.m. (MDT)</b>
<b>Northern Idaho DHW Office 1120 Ironwood Drive Lower Level - Suite 102 Large Conference Room Coeur d’Alene, ID 83814</b>	<b>Eastern Idaho DHW Office 1070 Hiline Road (Brown Brick Bldg.) Second Floor - Suite 230 VC Conf. Room Pocatello, ID 83201</b>
<b>TELECONFERENCE CALL-IN 9:00 a.m. (PDT) / 10:00 a.m. (MDT)</b>	
<b>Toll Free: 1-877-820-7831 Participant Code: 777497</b>	

**MEDICAID REIMBURSEMENT RATE REVIEWS, COST SURVEYS, AND RATE SETTING  
METHODOLOGIES**

**METHOD OF PARTICIPATION:** Persons wishing to participate in the negotiated rulemaking must do the following:

1. Attend the negotiated rulemaking meetings as scheduled above;
2. Provide oral or written recommendations, or both, at the negotiated rulemaking meetings;
3. Submit written recommendations and comments to this address on or before Monday, June 25, 2018:

Send to:  
Idaho Dept. of Health and Welfare  
Division of Medicaid  
Attn: Karen Westbrook,  
Medicaid Program Policy Analyst  
P.O. Box 83720  
Boise, ID 83720-0009

Hand Deliver to:  
Idaho Dept. of Health and Welfare  
Division of Medicaid  
Attn: Karen Westbrook,  
Medicaid Program Policy Analyst  
3232 Elder Street  
Boise, ID 83705

**DESCRIPTIVE SUMMARY:** The following is a statement in nontechnical language of the substance and purpose of the intended negotiated rulemaking and the principle issues involved:

The Department invites interested stakeholders to participate in negotiated rulemaking in this chapter, IDAPA 16.03.10, "Medicaid Enhanced Plan Benefits." The purpose of this negotiated rulemaking meeting is to revise these rules regarding provider reimbursement rate reviews, cost survey requirements, and rate setting methodologies for home and community-based service (HCBS) providers and HCBS coordinators.

**CONTACT INFORMATION, WEB ADDRESS, ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS:**

For assistance on technical questions concerning this negotiated rulemaking, contact Karen Westbrook at (208) 364-1960.

Materials pertaining to the negotiated rulemaking for this docket, including any available preliminary rule drafts, can be found on the Department's main Medicaid webpage at <http://healthandwelfare.idaho.gov/Medical/Medicaid/tabid/123/Default.aspx>, in the "Rulemaking" section of the right-hand column under the "2018" dropdown.

All written comments on the negotiated rules must be directed to the contact person specified above under "Method of Participation" and must be delivered on or before Monday, June 25, 2018.

Dated this 5th day of April, 2018.

Tamara Prisock  
DHW - Administrative Rules Unit  
450 W. State Street - 10th Floor  
P.O. Box 83720  
Boise, ID 83720-0036  
Phone: (208) 334-5500 / Fax: (208) 334-6558  
E-mail: [dhwrules@dhw.idaho.gov](mailto:dhwrules@dhw.idaho.gov)

**IDAPA 16 – DEPARTMENT OF HEALTH AND WELFARE**

**16.03.10 – MEDICAID ENHANCED PLAN BENEFITS**

**DOCKET NO. 16-0310-1801**

**NOTICE OF INTENT TO PROMULGATE RULES – NEGOTIATED RULEMAKING**

**AUTHORITY:** In compliance with Sections 67-5220(1) and 67-5220(2), Idaho Code, notice is hereby given that this agency intends to promulgate rules and desires public comment prior to initiating formal rulemaking procedures. This negotiated rulemaking action is authorized pursuant to Sections 56-202, 56-203, 56-250 through 56-257, 56-260 through 56-266, 56-1610, Idaho Code, and Title XIX and Title XXI of the Social Security Act.

**MEETING SCHEDULE:** A public meeting on the negotiated rulemaking will be held as follows:

<b>PUBLIC (LIVE) MEETING</b>
<b>Wednesday, May 16, 2018 - 2:00 p.m. (PDT) / 3:00 p.m. (MDT)</b>
<b>Region 5 Health and Welfare Office 601 Pole Line Road Conference Rooms A &amp; C Twin Falls, ID 83301</b>
<b>TELECONFERENCE CALL-IN 1:00 p.m. (PDT) / 2:00 p.m. (MDT)</b>
<b>Toll Free: 1-877-820-7831 Participant Code: 614545</b>
<b>WebEx Link*:</b>
<a href="https://idahohomechoicemfpevents.webex.com/idahohomechoicemfpevents/onstage/g.php?MTID=e0b3b0e5b486660e0a31b1457200188d1">https://idahohomechoicemfpevents.webex.com/idahohomechoicemfpevents/onstage/g.php?MTID=e0b3b0e5b486660e0a31b1457200188d1</a>
<i>*The WebEx is limited to the first 100 participants that join, but the audio line does not have a limit. Please feel free to join by phone if you are unable to join the online portion.</i>

**MEDICAID MANAGED CARE -- MEDICARE-MEDICAID COORDINATED PLAN (MMCP)**

**METHOD OF PARTICIPATION:** Persons wishing to participate in the negotiated rulemaking must do the following:

1. Attend the negotiated rulemaking meetings as scheduled above;
2. Provide oral or written recommendations, or both, at the negotiated rulemaking meetings;
3. Submit written recommendations and comments to this address on or before Friday, May 25, 2018:

Send to:  
Idaho Dept. of Health and Welfare  
Division of Medicaid  
Attn: Ali Fernández, Bureau Chief  
P.O. Box 83720  
Boise, ID 83720-0036  
or e-mail: [IdahoMMCP@dhw.idaho.gov](mailto:IdahoMMCP@dhw.idaho.gov)

Hand Deliver to:  
Idaho Dept. of Health and Welfare  
Division of Medicaid  
Attn: Ali Fernández, Bureau Chief  
3232 Elder Street  
Boise, ID 83705

**DESCRIPTIVE SUMMARY:** The following is a statement in nontechnical language of the substance and purpose of the intended negotiated rulemaking and the principle issues involved:

The Department invites interested stakeholders to participate in negotiated rulemaking in this chapter, IDAPA 16.03.10, "Medicaid Enhanced Plan Benefits." The purpose of the proposed changes to IDAPA 16.03.10 is to allow Idaho Medicaid to implement a phased-in mandatory Medicaid managed care program for individuals who are dually eligible for Medicare Parts A and B and Enhanced Medicaid. Dual eligible individuals are a high-cost, high-needs population that historically have had poorly coordinated care between their Medicaid and Medicare benefits. This program would provide for improved coordination of Medicaid benefits that would be administered by a participating health plan. The purpose of this negotiated rulemaking is to share information about the planned implementation and gather stakeholder feedback about the proposed changes.

**CONTACT INFORMATION, WEB ADDRESS, ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS:**

For assistance on technical questions concerning this negotiated rulemaking, contact Ali Fernández at (208) 287-1179 or e-mail: [IdahoMMCP@dhw.idaho.gov](mailto:IdahoMMCP@dhw.idaho.gov).

Materials pertaining to the negotiated rulemaking for this docket, including any available preliminary rule drafts, can be found on the Department's main Medicaid webpage at <http://healthandwelfare.idaho.gov/Medical/Medicaid/tabid/123/Default.aspx>, in the "Rulemaking" section of the right-hand column under the "2018" dropdown.

All written comments on the negotiated rules must be directed to the contact person specified above under "Method of Participation" and must be delivered on or before Friday, May 25, 2018.

Dated this 5th day of April, 2018.

Tamara Prisock  
DHW - Administrative Rules Unit  
450 W. State Street - 10th Floor  
P.O. Box 83720  
Boise, ID 83720-0036  
Phone: (208) 334-5500 / Fax: (208) 334-6558  
E-mail: [dhwrules@dhw.idaho.gov](mailto:dhwrules@dhw.idaho.gov)

**IDAPA 16 – DEPARTMENT OF HEALTH AND WELFARE**

**16.03.14 – RULES AND MINIMUM STANDARDS FOR HOSPITALS IN IDAHO**

**DOCKET NO. 16-0314-1801**

**NOTICE OF INTENT TO PROMULGATE RULES – NEGOTIATED RULEMAKING**

**AUTHORITY:** In compliance with Sections 67-5220(1) and 67-5220(2), Idaho Code, notice is hereby given that this agency intends to promulgate rules and desires public comment prior to initiating formal rulemaking procedures. This negotiated rulemaking action is authorized pursuant to Section 39-1307, Idaho Code.

**METING SCHEDULE:** A public meeting on the negotiated rulemaking will be held as follows:

**PUBLIC MEETING**  
**Tuesday, June 12, 2018 – 1:30 p.m. (MDT)**

**Licensing and Certification Central Office**  
**3232 Elder Street**  
**Conference Rooms D West/East**  
**Boise, ID 83705**

**UPDATES TO LICENSING STANDARDS FOR HOSPITALS IN IDAHO**

**METHOD OF PARTICIPATION:** Persons wishing to participate in the negotiated rulemaking must do the following:

1. Attend the negotiated rulemaking meetings as scheduled above;
2. Provide oral or written recommendations, or both, at the negotiated rulemaking meetings; or
3. Submit written recommendations and comments to this address on or before June 30, 2018:

Send to:

Idaho Dept. of Health and Welfare  
Division of Licensing and Certification  
Attn: Tamara Prisock, Division Administrator  
P.O. Box 83720  
Boise, ID 83720-0009

Hand Deliver to:

Idaho Dept. of Health and Welfare  
Division of Licensing and Certification  
Attn: Tamara Prisock, Division Administrator  
3232 Elder Street  
Boise, ID 83705

**DESCRIPTIVE SUMMARY:** The following is a statement in nontechnical language of the substance and purpose of the intended negotiated rulemaking and the principle issues involved:

The Department is proposing changes to the licensing standards related to the use of restraints and seclusion and protection of patient rights in Idaho hospitals and is holding negotiated rulemaking on proposed changes to this chapter to solicit input from all stakeholders and the general public regarding the proposed changes.

**CONTACT INFORMATION, WEB ADDRESS, ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS:** For assistance on technical questions concerning this negotiated rulemaking, contact Tamara Prisock at (208) 364-1971.

Materials pertaining to the negotiated rulemaking under Docket No. 16-0314-1801, including any available preliminary rule drafts, can be found on the Department’s web site at the following web address:  
<http://healthandwelfare.idaho.gov/AboutUs/Newsroom/tabid/130/Default.aspx>.

All written comments on the negotiated rules must be directed to the contact person specified above under “Method of Participation” and must be delivered on or before June 30, 2018.

Dated this 5th day of April, 2018.

Tamara Prisock  
DHW - Administrative Rules Unit  
450 W. State Street - 10th Floor  
P.O. Box 83720  
Boise, ID 83720-0036  
Phone: (208) 334-5500 / Fax: (208) 334-6558  
E-mail: [dhwrules@dhw.idaho.gov](mailto:dhwrules@dhw.idaho.gov)

## IDAPA 16 – DEPARTMENT OF HEALTH AND WELFARE

### 16.03.15 – SECURE TREATMENT FACILITY FOR PEOPLE WITH INTELLECTUAL DISABILITIES

DOCKET NO. 16-0315-1801 (NEW CHAPTER)

#### NOTICE OF RULEMAKING – PROPOSED RULE

**AUTHORITY:** In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section(s) 56-1003, 56-1004, 56-1004A, 56-1005, 56-1009, 66-1402, and 66-1407, Idaho Code; and H0222 (2017).

**PUBLIC HEARING SCHEDULE:** A public hearing concerning this rulemaking is scheduled for the following:

<b>PUBLIC HEARING</b>
<b>Wednesday, May 2, 2018 - 1:30 to 3:30 pm (MDT)</b>
<b>Medicaid Central Office 3232 Elder Street Conference Room D East Boise, ID 83705</b>

The hearing site(s) will be accessible to persons with disabilities. Requests for accommodation must be made not later than five (5) days prior to the hearing, to the agency address below.

**DESCRIPTIVE SUMMARY:** The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking:

This rule sets standards and provides the licensing requirements and the criteria for use of restrictive or secure features at this type of facility, including staffing, treatment requirements, and enforcement remedies. This rule will also provide and address client rights. Required Sections will be added to meet the Administrative Procedure Act (APA) and rules of the Office of the Administrative Rules Coordinator.

**FEE SUMMARY:** The following is a specific description of the fee or charge imposed or increased: N/A

**FISCAL IMPACT:** The following is a specific description, if applicable, of any negative fiscal impact on the state general fund greater than ten thousand dollars (\$10,000) during the fiscal year as a result of this rulemaking:

The cost for licensing and surveying this facility for SFY 2018 is approximately \$2,000 in state general funds, which can be covered with the existing budget in the Division of Licensing and Certification. All funds for this facility are state general funds.

**NEGOTIATED RULEMAKING:** Pursuant to Section 67-5220(1), Idaho Code, negotiated rulemaking was conducted. The Notice of Intent to Promulgate Rules – Negotiated Rulemaking was published in the January 3, 2018, Idaho Administrative Bulletin, [Vol. 18-1, pages 81 and 82](#).

**INCORPORATION BY REFERENCE:** Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference in this chapter of rules to give them the force and effect of law. The documents are not being reprinted due to the length, format, and/or the cost for republication.

National Fire Protection Association (NFPA) Standard 101, The Life Safety Code, 2012 edition. The following document is incorporated by reference in these rules: National Fire Protection Association (NFPA) Standard 101, The Life Safety Code, NFPA 101 for “New Healthcare Occupancies” published by the National Fire Protection Association, 1 Batterymarch Park, Quincy, MA 02169-7471. A copy is available for review at the Department’s Division of Licensing and Certification located at 3232 Elder Street, Boise, Idaho 83705. The NFPA 101: Life Safety Code may be accessed online at: <https://www.nfpa.org>.

Idaho Diet Manual, 11th edition. This manual is available from the Idaho Dietetic Association, online at <http://eatrightidaho.org>.

**ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS:** For assistance on technical questions concerning the proposed rule, contact Tamara Prisock at (208) 364-1959.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before June 30, 2018.

Dated this 5th day of April, 2018.

Tamara Prisock  
DHW – Administrative Rules Unit  
450 W. State Street – 10th Floor  
P.O. Box 83720  
Boise, ID 83720-0036  
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**THE FOLLOWING IS THE PROPOSED TEXT FOR DOCKET NO. 16-0315-1801**  
**(New Chapter)**

**IDAPA 16**  
**TITLE 03**  
**CHAPTER 15**

**16.03.15 – SECURE TREATMENT FACILITY FOR PEOPLE WITH INTELLECTUAL DISABILITIES**

**000. LEGAL AUTHORITY.**

The Board of Health and Welfare is authorized according to Section 66-1407, Idaho Code, to develop appropriate standards and rules for treatment of persons in the facility for people with intellectual disabilities. According to Sections 56-1003, 56-1004, 56-1004A, 56-1005, 56-1009, and 66-1402, Idaho Code, the Department and the Board of Health and Welfare have prescribed powers and duties to provide for the administration and enforcement of Department programs and rules. ( )

**001. TITLE AND SCOPE.**

**01. Title.** The title of this chapter of rules is IDAPA 16.03.15, “Secure Treatment Facility for People With Intellectual Disabilities.” ( )

**02. Scope.** These rules include the licensing standards and requirements for the administration of the facility for treatment of persons with intellectual or developmental disability under Title 66 Chapter 14, Idaho Code. The secure treatment facility must be operated by the Department and be identifiably separate from other facilities operated by the Department for persons with intellectual or developmental disabilities or for persons with severe and



persistent mental illness. ( )

**002. WRITTEN INTERPRETATIONS.**

According to with Section 67-5201(19)(b)(iv), Idaho Code, the Department’s Division of Licensing and Certification may have written statements that pertain to the interpretation of this chapter, or to the documentation of compliance with these rules. ( )

**003. ADMINISTRATIVE APPEALS.**

Administrative appeals and contested cases are governed by the provisions of IDAPA 16.05.03, “Rules Governing Contested Case Proceedings and Declaratory Rulings.” ( )

**004. INCORPORATION BY REFERENCE.**

The following are incorporated by reference in this chapter of rules: ( )

**01. National Fire Protection Association (NFPA) Standard 101, The Life Safety Code, 2012 edition.** The following document is incorporated by reference in these rules: National Fire Protection Association (NFPA) Standard 101, The Life Safety Code, NFPA 101 for “New Healthcare Occupancies” published by the National Fire Protection Association, 1 Batterymarch Park, Quincy, MA 02169-7471. A copy is available for review at the Department’s Division of Licensing and Certification located at 3232 Elder Street, Boise, Idaho 83705. The NFPA 101: Life Safety Code may be accessed online at: <https://www.nfpa.org>. ( )

**02. Idaho Diet Manual, 11th Edition.** This manual is available from the Idaho Dietetic Association, online at <http://eatrightidaho.org>. ( )

**005. OFFICE – OFFICE HOURS – MAILING ADDRESS – STREET ADDRESS – TELEPHONE NUMBER – INTERNET WEBSITE.**

**01. Office Hours.** Office hours are 8 a.m. to 5 p.m., Mountain Time, Monday through Friday, except holidays designated by the State of Idaho. ( )

**02. Mailing Address.** ( )

**a.** The mailing address of the Idaho Department of Health and Welfare, P.O. Box 83720, Boise, Idaho 83720-0036. ( )

**b.** The mailing address of the Department’s Division of Licensing and Certification, P.O. Box 83720, Boise, Idaho 83720-0009. ( )

**03. Street Address.** ( )

**a.** The street address of the Idaho Department of Health and Welfare is located at 450 West State Street, Boise, Idaho 83702. ( )

**b.** The street address of the Department’s Division of Licensing and Certification is located at 3232 Elder Street, Boise, Idaho 83705. ( )

**04. Telephone.** ( )

**a.** The telephone number of the Idaho Department of Health and Welfare is (208) 334-5500. ( )

**b.** The telephone number of the Department’s Division of Licensing and Certification is (208) 334-1959. ( )

**05. Internet Websites.** ( )

**a.** The Department internet website is found at <http://www.healthandwelfare.idaho.gov>. ( )

b. The Department's Division of Licensing and Certification internet website is found at <http://lc.dhw.idaho.gov>. ( )

**006. CONFIDENTIALITY OF RECORDS AND PUBLIC RECORDS ACT COMPLIANCE AND REQUESTS.**

**01. Confidentiality of Records.** Any disclosure of confidential information used or disclosed in the course of the Department's business is subject to the restrictions in state or federal law, and must comply with IDAPA 16.05.01, "Use and Disclosure of Department Records." ( )

**02. Public Records Act.** The Department will comply with Title 74, Chapter 1, Idaho Code, when requests for the examination and copying of public records are made. Unless otherwise exempted, all public records in the custody of the Department are subject to disclosure. ( )

**03. Disclosure of a Person's Identity.** According to Section 39-1310, Idaho Code, information received by the Department's Division of Licensing and Certification through filed reports, inspections, or as required by law, will not be disclosed publicly in such a manner as to identify persons except as necessary in a proceeding involving a question of licensure. ( )

**04. Public Availability of Survey Reports.** The Department's Division of Licensing and Certification will post on its website, survey reports and findings of complaint investigations relating to the facility at <http://lc.dhw.idaho.gov>. ( )

**007. – 008. (RESERVED)**

**009. CRIMINAL HISTORY AND BACKGROUND CHECK REQUIREMENTS.**

Administrators, employees, consultants, and contractors for the facility must have a criminal history and background check clearance as provided in IDAPA 16.05.06, "Criminal History and Background Checks." ( )

**010. DEFINITIONS AND ABBREVIATIONS – A THROUGH K.**

For the purposes of this chapter of rules, the following terms apply. ( )

**01. Abuse.** The infliction of injury, unreasonable confinement, intimidation, or punishment with the resulting physical harm, pain, or personal anguish. Specifics are as follows: ( )

**a.** Physical abuse is any action that causes physical harm or pain, trauma, or bodily harm such as hitting, slapping, punching, kicking, and pinching. It includes the use of excessive force or improper technique when placing a person in restraints, the use of restraints that are not specified in the facility's policies and procedures or ordered by the physician and consented to by the legal guardian in the person's Individual Treatment Plan (ITP) and restraint of any form imposed as a means of coercion, punishment, convenience, or retaliation by staff. All injuries sustained by the person during restraint or injuries suspected to be sustained during restraint must be investigated for potential abuse. ( )

**b.** Psychological abuse is any action, situation, or circumstance that is detrimental to the person's psychological well-being including humiliation, harassment, and threats of punishment or deprivation, sexual coercion, and intimidation. People residing in the facility may be unable to communicate feelings of fear, humiliation, etc. associated with abusive episodes, the assumption is made that any actions that would usually be viewed as psychologically abusive by the general public, would also be viewed as abusive by the person residing in the facility, regardless of that person's perceived ability to comprehend the nature of the incident. ( )

**c.** Sexual abuse is rape, sexual assault, or any incident where a person is coerced, manipulated, or otherwise enticed by another individual to engage in any form of sexual activity. ( )

**d.** Verbal abuse is any use of insulting, demeaning, disrespectful, oral, written, or gestured language directed towards and in the presence of a person. People residing in the facility may be unable to communicate feelings of fear, humiliation, etc. associated with abusive episodes, the assumption is made that any actions that

would usually be viewed as verbally abusive by the general public, would also be viewed as abusive by the person residing in the facility, regardless of that person's perceived ability to comprehend the nature of the incident. ( )

**e.** Punishment is modifying a person's diet, or withholding food, or hydration, medical care or treatment, or the use of restrictive interventions, including physical restraint and chemical restraints as a means to discipline or penalize a person. ( )

**02. Administrator.** The individual delegated the responsibility for management of the facility. ( )

**03. Advocate.** A individual who assists the person in exercising his rights within the facility and as a citizen of the United States. An advocate cannot make legal or other decisions on behalf of the person. The role of the advocate is limited to assisting the person only. ( )

**04. Behavioral Management Needs.** Behaviors that interfere with progress, prevent assimilation into the community, decrease freedom, or increase the need for restriction of activities. ( )

**05. Board.** The Idaho State Board of Health and Welfare. ( )

**06. Chemical Restraint.** A drug or medication when it is used as a restriction to manage the person's behavior or restrict the person's freedom of movement and is not a standard treatment or dosage for the person's condition. ( )

**07. Clinical Case Manager.** The professional staff person responsible for the assessment, implementation, coordination, integration, and monitoring of each person's treatment program. The clinical case manager must hold a master's degree in a human service related field and have a minimum of one (1) year of experience working with people who have an intellectual disability, a serious chronic mental illness, or both. ( )

**08. Deficient Practice.** The facility's failure to meet an individual requirement stated in these rules. ( )

**09. Department.** The Idaho Department of Health and Welfare. ( )

**10. Developmental Disability.** A developmental disability as defined in Section 66-402, Idaho Code, or an intellectual disability as defined in Section 73-114, Idaho Code. ( )

**11. Director.** The Director of the Idaho Department of Health and Welfare, or his designee. ( )

**12. Discharge.** The permanent movement of a person to another facility or setting that is physically separate and distinct from the secure treatment facility. ( )

**13. Facility.** See "Secure Treatment Facility" in these rule definitions. ( )

**14. Facility Administration.** The individual or individuals identified by the Director to manage the secure treatment facility. ( )

**15. Forced Compliance.** The act of physically forcing a person to complete a task or activity. ( )

**16. Grievance.** A formal or informal written or verbal complaint that is made to the facility by a person, or the person's representative, regarding the person's care. This does not include complaints that are resolved at the time of the complaint by staff present, allegations of abuse, neglect or mistreatment, or appeals. ( )

**17. Immediate Jeopardy.** A situation in which the facility's noncompliance with one (1) or more of the requirements of licensure has caused, or is likely to cause serious injury, harm, impairment, or death to a person. ( )

**18. Independent Living Skills.** Skills essential to independent living that include bathing, dressing, food shopping, meal preparation, housekeeping and kitchen chores, laundry, bed making, and budgeting. ( )

**19. Individual Treatment Plan (ITP).** A written plan developed by the interdisciplinary team for each person in the facility that is consistent with trauma-informed care and person-centered care principles. The ITP is based on a complete, thorough assessment of the person. The ITP must include program strategies that are effective in ameliorating the behaviors that resulted in the person's admission to the secure treatment facility, the teaching of self-management strategies to promote discharge to a less restrictive living environment, and prevent or decelerate the regression or loss of optimal functional status. Each person's ITP addresses what a person needs in order to function with as much independence as possible by stating the following: ( )

- a. The desired outcomes the person is trying to achieve; ( )
- b. The specific steps and actions that will be taken to reach the desired outcomes; and ( )
- c. Any additional adaptive equipment, assistive technology, services, and supports required to meet the person's needs. ( )

**20. Interdisciplinary Team (IDT).** Professionals, paraprofessionals, and nonprofessionals who possess the knowledge, skills, and expertise necessary to accurately assess and identify the function of the behavior(s) that resulted in a person's admission to the facility and design a program that includes strategies that are effective in ameliorating those behaviors and teaching self-management strategies to promote discharge to a less restrictive living environment. The IDT must include the person, unless inability or unwillingness is documented, the person's legal guardian, and any other individual the person wishes to be present, including advocates and family members unless documented to be inappropriate or unobtainable, a physician, a social worker, and other appropriate professional and nonprofessional staff, at least one (1) of whom is a clinical case manager. ( )

**21. Isolation.** See "Seclusion" in these rule definitions. ( )

**011. DEFINITIONS AND ABBREVIATIONS – L THROUGH Z.**  
For the purposes of this chapter of rules, the following terms apply. ( )

**01. Legal Guardian.** An individual appointed by the court in accordance with Section 15-5-301, Idaho Code, or Section 66-404, Idaho Code. The guardian's role is to act in the person's best interest, encourage self-reliance and independence, as well as make decisions on behalf of the person. ( )

**02. Licensing and Certification.** The Department's Division that is responsible for the licensing and surveying activities of the facility. ( )

**03. Mistreatment.** Behavior or facility practices that result in any type of person's exploitation such as financial, physical, sexual, or criminal exploitation. Mistreatment also refers to the use of behavioral management techniques outside of their use as specified in the facility policies and procedures or ordered by the physician and consented to by the legal guardian in the person's Individual Treatment Plan (ITP). ( )

**04. National Association for Persons with Developmental Disabilities and Mental Health Needs (NADD).** NADD is a not-for-profit membership association established for professionals, care providers, and families to promote understanding of and services for individuals who have developmental disabilities and mental health needs. NADD offers information and multiple resources regarding trauma-informed care principles, reduction and elimination of restraint and seclusion, person-centered care, and other related topics that are available online at <http://thenadd.org>. ( )

**05. Neglect.** The failure to provide goods or services necessary to avoid physical harm, mental anguish or mental illness. Staff failure to intervene appropriately to prevent self-injurious behavior will constitute neglect. Staff failure to implement safeguards, once person-to-person aggression is identified, will also constitute neglect. ( )

**06. Noxious Stimuli.** A startling, unpleasant, or painful action used in response to a person's behavior that has a potentially aversive or harmful effect. ( )

**07. Person.** An individual subject to judicial proceedings, authorized by the provisions of Title 66, Chapter 14, Idaho Code, who is being considered for disposition or is admitted and dispositioned into the secure treatment facility. ( )

**08. Person-Centered Care.** To focus on the person as the locus of control and to support the person in making his own choices and having control over his daily life. ( )

**09. Physical Restraint.** Any manual hold or mechanical device, material or equipment that the person cannot remove easily, and that restricts the free movement of, normal functioning of, or normal access to a portion or portions of a person's body. ( )

**10. Physician.** An individual licensed to practice medicine and surgery by the Idaho State Board of Medicine or the Idaho State Board of Podiatry according to Section 39-1301(h), Idaho Code. ( )

**11. PRN.** "Pro Re Nata" meaning "as needed." ( )

**12. Provisional License.** A license issued to a facility that conforms substantially to these rules, during which time the facility implements administrative or major structural changes. ( )

**13. Reportable Incident.** A situation when a facility is required to report information to the Department's Division of Licensing and Certification that includes the following: ( )

**a.** An injury must be reported as an "injury of unknown source" when the following occurs: ( )

**i.** The source of the injury was not witnessed by anyone and the source of the injury could not be explained by the person; and ( )

**ii.** The injury raises suspicions of possible abuse or neglect because of the extent of the injury or the location of the injury (e.g., the injury is located in an area not generally vulnerable to trauma) or the number of injuries observed at one (1) particular point in time or the number of injuries observed over time. ( )

**b.** Elopement is when a person physically leaves the facility premises without the facility's knowledge. ( )

**c.** Person-to-person physical altercations with or without injury. ( )

**d.** An incident that results in the person's need for hospitalization, treatment in a hospital emergency room, fractured bones, IV treatment, dialysis, or death. Reporting of these incidents must include documentation of when the person was last subjected to physical and chemical restraint. ( )

**e.** All allegations of staff abuse, neglect, and mistreatment. ( )

**14. Restrictive Intervention.** An intervention that is used to restrict the rights or freedom of movement of a person. ( )

**15. Seclusion.** The involuntary isolation and confinement of a person in a locked room or area. ( )

**16. Secure Treatment Facility.** The facility to be operated by the Department to fulfill the purposes of this chapter. A secure treatment facility will be referred to as "facility" in these rules. The facility will include: ( )

**a.** Locked, fenced, and enclosed grounds accessible only to persons, staff, and authorized individuals; ( )

**b.** Locked residential units; ( )

**c.** Bedroom and building exit alarms; ( )

- d. Monitoring cameras in all common areas; ( )
  - e. Modified interiors to reduce risk of suicide; and ( )
  - f. Restricted access to items that could be used as weapons. ( )
- 17. Serious Injury.** Any significant impairment of the physical condition of the person as determined by qualified medical personnel. This includes burns, lacerations, bone fractures, substantial hematoma, and injuries to internal organs, whether self-inflicted or inflicted by someone else. ( )
- 18. Serious Mental Illness.** Any of the following psychiatric illnesses as defined by the American Psychiatric Association in the Diagnostic and Statistical Manual of Mental Disorders: ( )
- a. Schizophrenia spectrum and other related disorders; ( )
  - b. Paranoia and other psychotic disorders; ( )
  - c. Bipolar and other related disorders; ( )
  - d. Depressive disorders; ( )
  - e. Trauma and stressor-related disorders; ( )
  - f. Anxiety disorders; ( )
  - g. Obsessive-compulsive and other related disorders; ( )
  - h. Dissociative disorders; and ( )
  - i. Personality disorders. ( )
- 19. Substance Abuse and Mental Health Administration (SAMHSA).** SAMHSA is the agency within the U.S. Department of Health and Human Services that leads public health efforts to advance the behavioral health of the nation. SAMHSA offers information and multiple resources regarding trauma-informed care principles, the reduction and elimination of restraint and seclusion, person-centered care, and other related topics that are available online at <https://www.samhsa.gov>. ( )
- 20. Substantial Compliance.** The facility is in substantial compliance with these rules when all Standards of Licensure are met. ( )
- 21. Substantial Threat to the Safety of Others.** The presentation, by a person, of a substantial risk to physically harm other persons, as manifested by evidence of violent behavior. ( )
- 22. Sufficient Staff.** Enough on-duty, trained personnel to effectively implement the treatment programs as defined in the Individual Treatment Plan (ITP), to meet each person's needs, and to respond to emergencies, illness, or injuries on a twenty-four (24) hour basis. ( )
- 23. Time-Out.** Reducing or limiting the amount of reinforcement that is available to a person for a period of time, either by removing a person from his environment (exclusionary) or changing the existing environment (inclusionary). ( )
- 24. Time-Out Room.** A specific room used in exclusionary time-out procedures from which egress is prevented. ( )
- 25. Transfer.** A transfer means the following: ( )

**a.** The temporary movement of a person from the facility to a psychiatric or medical hospital for medical reasons; ( )

**b.** The permanent movement of an entire facility to a new location, including people served, staff, and records. ( )

**26. Trauma-Informed Care.** Under the Substance Abuse and Mental Health Administration (SAMHSA), trauma-informed care is a system of care that incorporates key trauma principles into the facility's culture and each person's treatment interventions and supports. Key trauma principles include: ( )

**a.** Safety. The facility staff and persons feel physically and psychologically safe based on the physical environment and interpersonal interactions that promote a sense of safety. ( )

**b.** Trustworthiness and Transparency. The facility's operations and decisions are conducted with transparency with the goal of building and maintaining trust among persons, guardians, advocates, staff, and all other individuals involved with the facility. ( )

**c.** Peer Support. Peer support and mutual self-help are utilized to build safety, hope, and trust and to enhance collaboration. Shared stories and life experiences are utilized to promote recovery and healing. ( )

**d.** Collaboration and Mutuality. All facility staff actively work to reduce the power differences between staff and persons to the maximum extent possible through the meaningful sharing of power and decision-making. ( )

**e.** Empowerment, Voice, and Choice. The facility's operations and staff training programs are organized to ensure the safety and empowerment of both persons and staff. Individual strengths and experiences are recognized and built upon, and shared decision-making, choices, and goal-setting is supported. Each staff's role as a facilitator rather than a controller is recognized and promoted. ( )

**f.** Cultural, Historical, and Gender Issues. The facility's operations are responsive to gender and the racial, ethnic, and cultural needs of each person, and recognize and address each person's historical trauma. ( )

**27. Treatment.** The implementation of a professionally developed and supervised Individual Treatment Plan (ITP) designed to achieve the person's discharge from the facility at the earliest possible time. Treatment requires the person to be actively involved in the development and implementation of his own treatment plan with the support of his legal guardian, advocate, family members, friends, and professional, paraprofessional, and non-professional facility staff. ( )

**28. Unremoved Immediate Jeopardy.** An immediate jeopardy situation that the facility could not resolve by the time of the survey exit conference. ( )

**012. – 019. (RESERVED)**

**020. LICENSURE – GENERAL REQUIREMENTS.**

**01. License Requirement.** The facility for persons with intellectual disabilities cannot be established, maintained, or operated within Idaho without obtaining a license from the Department's Division of Licensing and Certification as required in Section 66-1402, Idaho Code. Only one (1) facility in Idaho can be licensed as a secure treatment facility for people with intellectual disabilities. The facility must be in compliance with applicable federal, state, and local laws, regulations, codes, and this chapter of rules in order to hold a license. ( )

**02. Facility Name.** The facility must use a distinctive name. The facility cannot change its name without written notification to the Department's Division of Licensing and Certification at least thirty (30) calendar days prior to the date the proposed name change is to be effective. ( )

**03. Physical Location.** The facility must meet the requirements according to Sections 67-6530 through 67-6532, Idaho Code, for local planning and zoning laws or ordinances. ( )

**04. Size Limitation.** The maximum size of this facility must be no more than four (4) beds. ( )

**05. Compliance with Water and Sanitation Rules.** This facility must have a statement from the Public Health District indicating that the municipal water supply and sewage disposal systems meet the current requirements. ( )

**06. Approval of Facility Construction Plans.** This facility must obtain written approval from the Department's Division of Licensing and Certification prior to any proposed construction of a facility or alterations to the facility. Construction or alteration plans must be provided prior to licensing of the facility and must meet the requirements in Sections 830 through 844 of these rules. ( )

**021. – 024. (RESERVED)**

**025. INITIAL APPLICATION FOR LICENSURE.**

The facility must apply to the Department's Division of Licensing and Certification for an initial license to operate the facility. ( )

**01. Form of Application.** The applicant must complete an initial application form provided by the Department's Division of Licensing and Certification. The application and documents required in Subsection 025.02 of this rule must be submitted to the Division of Licensing and Certification at least ninety (90) calendar days prior to the planned opening date. ( )

**02. Documents Required.** In addition to the application form, the following documents must be submitted with the application prior to approval of a license: ( )

- a. A certificate of occupancy from the local building and fire authority; ( )
- b. Fire alarm record of completion; ( )
- c. Sprinkler contractors material and test certificate for aboveground piping; ( )
- d. Installers letter of code compliance for fuel-fired appliances; ( )
- e. Acceptable policies and procedures governing the facility; and ( )
- f. A sample of a person's record. ( )

**026. – 029. (RESERVED)**

**030. ISSUANCE OF LICENSE.**

The facility license is issued when the Department's Division of Licensing and Certification finds that the applicant has demonstrated compliance with the requirements in Idaho statutes and these rules. ( )

**01. Initial License.** When the Department's Division of Licensing and Certification determines that all required application information has been received and demonstrates compliance, a license is issued. The initial license expires at the end of the calendar year in which the license was issued. ( )

**02. License Issued Only to Named Applicant and Location.** The license is issued only for the facility named and location stated in the application. ( )

**03. License Specifies Maximum Allowable Beds.** The license specifies the maximum allowable number of beds in the facility. ( )

**04. Provisional License.** A provisional license is valid for a period not to exceed six (6) months from the date of issuance by the Department's Division of Licensing and Certification. A provisional license may be issued to the facility for the following reasons: ( )



- a. Implement administrative changes; or ( )
- b. Implement structural changes to a facility's premises. ( )

**031. EXPIRATION AND RENEWAL OF LICENSE.**

The facility license issued by the Department's Division of Licensing and Certification is valid until the end of the calendar year in which it is issued. The license is renewed annually unless the license is revoked or suspended. ( )

**032. LICENSE AVAILABLE.**

The facility must have its license on the premises and available upon request. ( )

**033. – 039. (RESERVED)**

**040. INSPECTION OF FACILITY.**

**01. Representatives of the Department's Division Licensing and Certification.** The Department's Division of Licensing and Certification is authorized to enter the facility, or its buildings associated with its operation, at all times for the purpose of inspection surveys. The Department's Division of Licensing and Certification may, at its discretion, utilize the services of any legally qualified person or organization, either public or private, to examine and inspect the facility for licensure requirements. ( )

**02. Accessible With or Without Prior Notification.** Inspection surveys are made unannounced and without prior notice at the discretion of the Department's Division of Licensing and Certification. ( )

**03. Inspection of Records.** For the purposes of these rules, the Department's Division of Licensing and Certification is authorized to inspect all paper, electronic, video, and audio records pertinent to a person's care as required to be maintained by the facility. ( )

**04. Interview Authority.** A surveyor has the authority to interview any individual associated with the facility or the provision of care including the license holder, administrator, staff, people residing at the facility, their family members and advocates, service providers, physicians, or other legally responsible individuals. Interviews are confidential and conducted privately unless otherwise specified by the interviewee. ( )

**05. Inspection of Outside Services.** The Department's Division of Licensing and Certification is authorized to inspect any outside services that a licensed facility uses for the people residing at the facility. ( )

**041. LICENSURE SURVEYS.**

**01. Surveys of Facilities.** The Department's Division of Licensing and Certification will ensure that surveys are conducted at specified intervals in order to determine compliance with this chapter and applicable rules and statutes. The intervals of surveys will be as follows: ( )

a. An initial survey is conducted within sixty (60) calendar days from initial licensure. The initial survey may be delayed until a person has been admitted and is present at the facility. ( )

b. A relicensure survey is conducted on average once per year, or more frequently at the discretion of the Department's Division of Licensing and Certification. A relicensure survey may be delayed until a person has been admitted and is present at the facility. ( )

c. A complaint investigation survey is conducted based on the severity of an alleged violation of these rules or statutes, or any reportable incident that indicates there was a violation of the rules or statute. ( )

i. A complaint alleging immediate jeopardy to a person is conducted within one (1) business day. ( )

ii. A complaint not alleging immediate jeopardy to a person is conducted within five (5) calendar days. ( )

**02. Follow-up Surveys.** Follow-up surveys may be conducted at the discretion of the Department's Division of Licensing and Certification to ascertain corrections to noncompliance with these rules. Follow-up surveys are conducted per time frames established in the facility's acceptable plan of correction, but must not exceed the following: ( )

a. Offsite follow-up surveys may be conducted at the discretion of the Department's Division of Licensing and Certification to ascertain corrections to deficiencies within ninety (90) calendar days of the facility's alleged compliance date. ( )

b. Onsite follow-up surveys may be conducted by the Department's Division of Licensing and Certification to ascertain corrections to deficiencies that do not include an unremoved immediate jeopardy to health and safety within a period of ninety (90) calendar days from the originating survey exit date. If an onsite follow-up is conducted, and it is not verified by the Department's Division of Licensing and Certification that the facility is in substantial compliance by the end of the 90-day period, then the facility's license will be revoked. ( )

i. The Department's Division of Licensing and Certification will conduct onsite follow-up surveys to ascertain corrections to deficiencies that include an unremoved immediate jeopardy to health and safety within thirty (30) calendar days after the receipt of the Statement of Deficiencies and Plan of Correction form if cited deficiencies include an immediate jeopardy to health and safety that was not removed prior to the survey exit date. ( )

ii. Expedited revocation will occur in no less than five (5) calendar days and no more than thirty (30) calendar days after the receipt of the Statement of Deficiencies and Plan of Correction form. Specific time frames will be determined by the Department's Division of Licensing and Certification on a case-by-case basis and provided to the facility in writing. ( )

iii. The facility may request that an onsite follow-up be conducted immediately upon receipt of the written notice by submitting an acceptable plan of correction alleging that the immediate jeopardy has been removed. If an onsite follow-up is conducted, and it is verified that the immediate jeopardy has been removed, then expedited revocation action will convert to a 90-day revocation action. ( )

**042. – 049. (RESERVED)**

**050. COMPLAINTS.**

**01. Filing a Complaint.** Any individual who believes that the facility has failed to meet any provision of the rules or statute may file a complaint with the Department's Division of Licensing and Certification. All complaints must have a basis in rule or statutory requirements. If it does not, the complainant will be referred to the appropriate entity or agency. ( )

**02. Disclosure of Complaint Information.** The Department's Division of Licensing and Certification will not disclose the name or identifying characteristics of a complainant unless one (1) of the following events occurs: ( )

a. The complainant consents in writing to the disclosure; ( )

b. The investigation results in a judicial proceeding, and disclosure is ordered by the court; or ( )

c. The disclosure is essential to prosecution of a violation. The complainant is given the opportunity to withdraw the complaint before disclosure. ( )

**03. Notification to Complainant.** The Department's Division of Licensing and Certification will inform the complainant of the results of the investigation survey when the complainant has provided a name and address. ( )

**051. – 059. (RESERVED)**

**060. WRITTEN REPORT OF DEFICIENCIES.**

The Department's Division of Licensing and Certification will provide a written Statement of Deficiencies and Plan of Correction form to the facility to support any deficiencies found. ( )

**01. Written Reports with Removed Immediate Jeopardy.** Written reports of deficiencies, including immediate jeopardy to health and safety that was removed prior to the survey exit date, will be provided within ten (10) business days from the survey exit date. ( )

**02. Written Reports with Unremoved Immediate Jeopardy.** Written Reports of deficiencies that include immediate jeopardy to health and safety that was not removed prior to the survey exit date will be provided within two (2) business days from the survey exit date. ( )

**061. – 069. (RESERVED)**

**070. ENFORCEMENT PROCESS.**

The Department's Division of Licensing and Certification may impose a remedy or remedies when it determines the facility is not in compliance with these rules. ( )

**01. Determination of Remedy.** In determining which remedy or remedies to impose, the Department's Division of Licensing and Certification will consider the facility's compliance history, the number of deficiencies, the scope and severity of the deficiencies, and the potential risk to persons. Subject to these considerations, any of the remedies in Sections 071 through 073 of these rules may be imposed, independently or in conjunction with others, subject to the provisions of these rules for notice and appeal. Written notification of all remedies imposed will be provided to the facility with the Statement of Deficiencies and Plan of Correction form. ( )

**02. Enforcement Remedies.** When the Department's Division of Licensing and Certification determines that the facility is out of compliance with these rules, it may impose any of the following remedies: ( )

**a.** Require the facility to submit an acceptable plan of correction that must be approved by the Department's Division of Licensing and Certification; ( )

**b.** Revoke the facility's license; ( )

**c.** Issue a summary suspension of the facility's license. ( )

**071. PLAN OF CORRECTION.**

An acceptable plan of correction must be developed and returned to the Department's Division of Licensing and Certification for all deficiencies within ten (10) calendar days of receipt of the Statement of Deficiencies and Plan of Correction form. An acceptable plan of correction must include the following: ( )

**01. Correcting Deficient Practice.** How the corrective action will be accomplished for each person found to have been affected by the deficient practice; ( )

**02. Identify Potentially Affected Persons.** How the facility will identify other people who have the potential to be affected by the same deficient practice, and how the facility will act to protect those people in similar situations; ( )

**03. Changes to Prevent Recurrence.** What measures will be put into place or systemic changes made to ensure that the deficient practice will not recur; ( )

**04. Monitoring Corrective Actions and Performance.** How the facility will monitor its corrective actions and performance to ensure that the deficient practice is being corrected and will not recur, including what program will be put into place to monitor the continued effectiveness of the systemic change to ensure that solutions are permanent; ( )

**05. Target Date of Corrective Action Completion.** The date when corrective action must be accomplished. Except in unusual circumstances, and only with the approval of the Department's Division of Licensing and Certification, no correction date will be more than ninety (90) calendar days from the inspection exit date as printed on the Statement of Deficiencies and Plan of Correction form; and ( )

**06. Administrator's Signature and Date Submission.** The administrator's signature and the date submitted. ( )

**072. DENIAL OR REVOCATION OF LICENSE.**

The Department's Division of Licensing and Certification may deny an application for a license or revoke an existing license when the facility's noncompliance with the requirements in this chapter of rules lead to a substantial risk to the health and safety of a person. ( )

**01. Notice to Deny or Revoke.** The Department's Division of Licensing and Certification will send a written notice to the facility by certified mail, registered mail, or personal delivery service, to deny an application for a license or revoke an existing license. The notice will inform the facility of the opportunity to request a hearing as provided in IDAPA 16.05.03, "Rules Governing Contested Case Proceedings and Declaratory Rulings." ( )

**02. Repeated Noncompliance.** The Department's Division of Licensing and Certification may revoke an existing license for the repeated violations of any requirements in Idaho Code or these rules. ( )

**03. Accumulation of Citations for Noncompliance.** The Department's Division of Licensing and Certification may revoke an existing license for the accumulation of citations for noncompliance at the facility that, taken as whole, would endanger the health, safety, or welfare of a person. ( )

**04. Personnel Inadequacies.** The Department's Division of Licensing and Certification may deny an application for a license or revoke an existing license when the facility lacks sufficient staff in number or qualification to properly care for the proposed or actual number of people residing at the facility. ( )

**05. Inadequate or False Disclosure.** The Department's Division of Licensing and Certification may deny an application for a license or revoke an existing license when the administrator has misrepresented, or failed to fully disclose, any facts or information or any items in any application or any other document requested by the Department's Division of Licensing and Certification, when such facts and information were required to have been disclosed. ( )

**073. SUMMARY SUSPENSION OF A LICENSE.**

The Director may summarily suspend the facility license in the event of any emergency endangering the health, safety, or welfare of a person in the facility. At the time of suspension, the Director will redispense each person residing at the facility. The Director will provide an opportunity for a contested case hearing according to IDAPA 16.05.03, "Rules Governing Contested Case Proceedings and Declaratory Rulings." ( )

**074. – 079. (RESERVED)**

**080. RETURN OF SUSPENDED, REVOKED, OR RELINQUISHED LICENSE.**

The facility license is the property of the State of Idaho and must be returned to the Department's Division of Licensing and Certification immediately upon its suspension, revocation, or the voluntary closure of the facility. ( )

**081. – 089. (RESERVED)**

**090. WAIVER.**

According to Section 39-1306, Idaho Code, a temporary waiver to these rules and minimum standards, either in whole or in part, may be granted by the Department's Division of Licensing and Certification to the facility for a period not to exceed one (1) year. Waivers are granted on a case-by-case basis according to the following conditions: ( )

**01. Waiver for Good Cause.** The Department's Division of Licensing and Certification finds good cause to grant a waiver and no person's health, safety, or welfare is endangered by the waiver being granted. ( )

**02. No Precedent.** Precedent will not be set by granting the requested waiver, and such waiver will have no force or effect in any other proceeding. ( )

**091. – 099. (RESERVED)**

**100. STANDARD OF LICENSURE: FACILITY ADMINISTRATION.**

The Director must identify an individual or individuals to manage the facility. To the degree possible, considering the limitations in the facility, the facility's administration is responsible to ensure the facility's culture is consistent with trauma-informed care principles and person-centered care principles through policy development, implementation, quality assurance monitoring, and physical environment organization. The facility's training and development must be ongoing and must include person-centered, evidence-based trauma-specific screening, assessment, and interventions necessary to develop and sustain a culture that promotes the engagement, involvement, and collaboration of the person, the person's legal guardian, the person's family members, the person's advocate, all professional, paraprofessional, and direct care staff, and all other interested parties, including the facility's Human Rights Committee. ( )

**01. Necessary Staffing, Training Resources, Equipment, and Environment.** The individuals charged with managing the facility must develop, monitor, and revise, as necessary, policies and operating directions that ensure the necessary staffing, training resources, equipment, and environment to provide each person with comprehensive treatment, and to provide for his health and safety consistent with trauma-informed care principles and person-centered care principles; ( )

**02. Health, Safety, Sanitation, Maintenance, and Repair.** Facility administration must exercise general policy, budget, and operating direction over the facility, and include areas such as health, safety, sanitation, maintenance and repair, utilization and management of staff, and maintenance and oversight of the facility's quality assessment performance improvement program; and ( )

**03. Federal, State and Local Laws, Regulations, and Codes.** Facility administration must maintain compliance with all applicable federal, state, and local laws, and regulations and codes pertaining to health, safety, and sanitation. ( )

**101. SERVICES PROVIDED UNDER AGREEMENTS WITH OUTSIDE SOURCES.**

If the facility does not directly provide a service, facility administration must have a written agreement with an outside program, resource, or service provider to furnish the necessary service. The agreement must contain the responsibilities, functions, objectives, and other terms agreed to by both parties and meet the needs of each person. ( )

**102. GRIEVANCE PROCESS.**

Facility administration must develop, implement, and monitor policies and procedures for the prompt resolution of each person's grievances according to Subsection 304.08 of these rules. The facility must inform each person, each person's legal guardian, and the person's advocate whom to contact to file a grievance under Subsection 302.01 of these rules. ( )

**103. ABUSE, NEGLECT, AND MISTREATMENT PREVENTION, DETECTION, INVESTIGATION, AND RESOLUTION PROCESS.**

Facility administration must develop, implement, and monitor policies and procedures for the prevention, detection, investigation, and resolution of abuse, neglect, mistreatment, and suspicious injuries of unknown source according to Subsection 304.02 of these rules. The facility must inform each person, the person's legal guardian, the person's advocate, and whom to contact to file an allegation of abuse, neglect, mistreatment, and report a suspicious injury of unknown source according to Subsection 302.01 of these rules. ( )

**104. – 109. (RESERVED)**

**110. ADMINISTRATOR.**

The administration of the facility must appoint an administrator that meets the requirements and is responsible for the duties in this Section of rule. ( )

**01. Administrator Requirements.** The facility must have an administrator who meets the following requirements: ( )

**a.** Is at least twenty-one (21) years of age; ( )

**b.** Has a minimum three (3) years direct experience working with people with intellectual or developmental disabilities, or mental illness, or both; and ( )

**c.** Meets all other qualifications required by the facility administration. ( )

**02. Administrator Duties.** The administrator's responsibilities and duties are to perform the following: ( )

**a.** Implement and monitor written policies and procedures for the facility, and the operation of its physical plant. The administrator is the responsible and accountable for implementation of the policies established by facility administration. The administrator must see that these policies and procedures are adhered to, and must make them available to authorized representatives of the Department's Division of Licensing and Certification. ( )

**b.** Notify the Department's Division of Licensing and Certification of an anticipated or actual termination of any service vital to the continued safe operation of the facility or the health, safety, and welfare of its persons and personnel within one (1) business day. ( )

**c.** Notify the Department's Division of Licensing and Certification, in writing, of all reportable incidents within one (1) business day of the incident's occurrence. ( )

**d.** Notify the Department's Division of Licensing and Certification when the facility census changes from zero (0) to one (1) or from one (1) to zero (0). ( )

**e.** When not on duty, delegate the necessary authority to an administrator designee who is competent to handle the administrator's duties. Delegation of authority must occur according to the facility policies and procedures set by the facility administration. In the event of an emergency, the administrator designee must know how to contact the administrator. ( )

**111. – 119. (RESERVED)**

**120. FACILITY RECORDS.**

**01. Records Available Upon Request.** The facility must be able to print and provide paper copies of electronic records upon the request of the person who is the subject of the requested records, the person's legal guardian, payer, or the Department's Division of Licensing and Certification. ( )

**02. Census Register.** The facility must maintain a census register that lists the following: ( )

**a.** Full name, age, sex, and diagnoses of each person admitted to the facility; ( )

**b.** The person's date of admission and discharge; and ( )

**c.** A daily census of each person who is in the facility on any given day. ( )

**121. RECORDS REQUIREMENTS.**

**01. Separate Record.** The facility must develop and maintain a record keeping system that includes a separate record for each person and that accurately documents comprehensive information related to the person's health care, treatment, social information, and protection of the person's rights. ( )

**02. Confidentiality.** The facility must keep confidential all information contained in each person's records, regardless of the form or storage method of the records. ( )

**03. Release of Information.** The facility must develop and implement policies and procedures governing the release of any person's information. The policy must include obtaining written informed consent from the person or the person's legal guardian prior to information being released. ( )

**04. Record Entries.** Any individual who makes an entry in a person's record must make it legibly, date it, sign it, and include his position. ( )

**05. Legend.** The facility must provide a legend, developed and maintained by facility administration, to explain any symbol or abbreviation used in a person's record. ( )

**06. Access by Staff.** The facility must provide facility staff with appropriate aspects of each person's record. ( )

**122. – 129. (RESERVED)**

**130. FINANCES.**

**01. Established Financial System.** The facility must establish and maintain a system to manage all personal funds entrusted to the facility on behalf of each person. The system must do the following: ( )

- a.** Ensure a full and complete accounting of funds; ( )
- b.** Preclude any commingling of a person's funds with facility funds or with the funds of any other individual; and ( )
- c.** Ensure each person is not placed at risk of benefit loss. ( )

**02. Available upon request.** The person's financial record must be available on request of the person, and the person's legal guardian or advocate. ( )

**131. – 199. (RESERVED)**

**200. STANDARD OF LICENSURE: FACILITY STAFFING.**

The facility must provide sufficient numbers of qualified, trained, competent professional, paraprofessional, non-professional, technical, and consultative personnel to meet each person's needs. ( )

**201. SUFFICIENT PERSONNEL.**

The facility must employ personnel sufficient in number and qualifications to meet the needs of each person residing at the facility. While minimum direct care staff ratios are defined in Subsection 201.01 of this rule, a person's treatment and services may require more staff than the minimum. The facility must provide sufficient numbers of staff to manage and supervise persons in accordance with their Individual Treatment Plans (ITP). ( )

**01. Minimum Direct Care Staff.** The use of volunteers and students in the facility is not allowed. Minimum ratios of staff to persons must be maintained as follows: ( )

- a.** When the total count of persons in the facility is one (1), a minimum of two (2) staff must be awake, on-duty, and available twenty-four (24) hours a day. ( )
- b.** When the total count of persons in the facility is two (2), a minimum of three (3) staff must be awake, on-duty, and available during all persons' waking hours. A minimum of two (2) staff must be awake, on-duty, and available during all persons' sleeping hours. ( )
- c.** When the total count of the persons in the facility is three (3), a minimum of four (4) staff must be

awake, on-duty, and available during all persons' waking hours. A minimum of two (2) staff must be awake, on-duty, and available during all persons' sleeping hours. ( )

**d.** When the total count of the persons in the facility is four (4), a minimum of five (5) staff must be awake, on-duty, and available during all persons' waking hours. A minimum of three (3) staff must be awake, on-duty, and available during all persons' sleeping hours. ( )

**02. Professional, Paraprofessional, Nonprofessional, Technical, and Consultative Personnel.** The facility must employ adequate numbers of qualified professional, technical, and consultative personnel to be able to perform the following: ( )

- a.** Evaluate each person; ( )
- b.** Formulate written, individualized, comprehensive treatment plans; ( )
- c.** Provide treatment measures; and ( )
- d.** Engage in discharge planning. ( )

**202. FACILITY PERSONNEL DOCUMENTATION.**

The facility must ensure that explicit and uniform policies and procedures are established for each employment position concerning hours of work, overtime, and related personnel matters. A statement of these policies must be provided to each employee. ( )

**01. Organizational Chart.** A current organizational chart that clearly indicates lines of authority within the facility's organizational structure must be available at the facility to be viewed by all employees. ( )

**02. Job Descriptions.** Current job descriptions outlining the authority, responsibilities, and duties of all personnel in the facility, including the administrator, must be established and maintained as required by facility administration. A copy of an employee's particular job description must be provided to each employee. ( )

**03. Daily Work Schedules.** Daily work schedules must be maintained that show the personnel on duty at any given time for the previous three (3) month period. These schedules must be kept up to date and identify the employee as follows: ( )

- a.** First and last names; ( )
- b.** Professional designations such as licensed registered nurse (RN), licensed practical nurse (LPN), clinical case manager; and ( )
- c.** Employment position in the facility. ( )

**203. PERSONNEL RECORDS.**

A separate personnel record must be maintained for each employee of the facility that contains the following information: ( )

- 01. The Employee's Name, Current Address, and Telephone Number.** ( )
- 02. The Employee's Social Security Number.** ( )
- 03. The Employee's Educational Background.** ( )
- 04. The Employee's Work Experience.** ( )

**05. Other Employee Qualifications.** The employee's other qualifications to provide care. If licensure is required to provide a service the employee was hired to provide, the facility must document verification of the license number and date the current license expires; ( )



- 06. Criminal History Check.** The employee's criminal history and background check (CHC) clearance must be printed and on file, when a CHC is required; ( )
- 07. The Employee's Date of Employment.** ( )
- 08. Employee Date of Termination.** The employee's date of termination including the reason for termination; ( )
- 09. The Employee's Position in the Facility and a Description of that Position.** ( )
- 10. Employee Work Schedule.** The employee's hours and work schedule, paydays, overtime, and related personnel matters; and ( )
- 11. Training Plan.** Training and competency plan based on evaluation of the employee's performance. ( )
- 12. Documentation of All Allegations of Abuse, Neglect, and Mistreatment.** Staff personnel files must include documentation of all allegations of abuse, neglect, and mistreatment that have been made against the staff member, whether the allegation was substantiated or unsubstantiated, any corrective actions taken in response and the reasons why such actions were taken in accordance with IDAPA 15.04.01, "Rules of the Division of Human Resources and Idaho Personnel Commission," Section 190. ( )

**204. REQUIREMENTS OF PERSONNEL.**

- 01. Health and Age Requirements.** All personnel employed by the facility must meet and observe the following requirements: ( )
- a.** Each employee must be free of communicable disease and open skin lesions while on duty; ( )
  - b.** At the time of employment, each employee must have a tuberculin skin test consistent with current tuberculosis control procedures; and ( )
  - c.** Each employee providing direct care to a person must be eighteen (18) years of age, or older. ( )
- 02. Training Requirements.** The facility must have and follow a structured, written training program designed to train each employee involved in each person's care in the responsibilities specified in the written job description, and to provide for quality of care, consistent with trauma-informed care, person-centered care principles, and compliance with these rules. Signed evidence of personnel training, indicating dates, hours, and topic, must be retained at the facility. The written training program must include information about how facility administration will ensure facility staff are able to demonstrate competence in applying the training to their job responsibilities. This training must include the following: ( )
- a.** The facility must provide each employee with initial, continuing in-service training, and refresher training consistent with facility policy. Initial training must be provided prior to staff working directly with a person. At a minimum, refresher training must be provided annually. Training must enable the employee to perform his duties effectively, efficiently, and competently. Individuals providing staff training must be qualified as evidenced by documented education, training, and experience in the specific areas in which they are providing training. ( )
  - b.** Professional program staff must participate in ongoing staff development and training in both formal and informal settings with other professional, paraprofessional, and nonprofessional staff members. Documentation must include training related to trauma-specific screening and person-centered care principles, assessment, and interventions. ( )
  - c.** The facility must ensure all staff involved in a person's care must have ongoing education, training,

and demonstrated knowledge to ensure each person's acute and chronic needs are met. Training must address the following: ( )

i. Rights, including specific training on the facility's policies and procedures for the prevention and detection of abuse, neglect, and mistreatment; ( )

ii. Treatment of health care needs, including basic first aid, CPR certification, and training on the use of the facility's emergency medical equipment; ( )

iii. Treatment of developmental needs; ( )

iv. Treatment of mental health needs; ( )

v. Intervention strategies to address behavioral needs; ( )

vi. Techniques to identify the behaviors, events, and environmental factors of each person and staff that may trigger emergency safety situations; ( )

vii. The use of nonphysical intervention skills, such as de-escalation, mediation, conflict resolution, active listening, and verbal and observational methods, to prevent emergency safety situations; ( )

viii. Specific training on the use of and risks associated with physical restraint use, including psychological effects, bruising, lacerations, fractures, serious impairment, and death caused by restraint compression asphyxia, strangulation, aspiration, blunt trauma to the chest, catecholamine rush, rhabdomyolysis, and thrombosis; ( )

ix. Specific training prohibiting the use of seclusion, prone restraints, supine restraints, or other restraints that force a person against a hard surface, such as a wall, chair, or the floor due to increased psychological and physical risks to the person; ( )

x. Specific training regarding the assistance with medications and the detection of adverse reactions to medications; ( )

xi. Specific training regarding increased risk to each person's health and safety when chemical restraint is used concurrently with physical restraint; ( )

xii. Specific training on how to identify and respond to persons engaging in suicidal ideation or attempts; and ( )

xiii. Specific training on trauma-informed care principles, person-centered care, and methods to reduce and eliminate restraints that are consistent with Substance Abuse and Mental Health Services Administration (SAMHSA) guidance, National Association for Persons with Developmental Disabilities and Mental Health Needs (NADD) guidance, or other nationally recognized organizations. ( )

**205. – 299. (RESERVED)**

**300. STANDARD OF LICENSURE – PROTECTION OF PERSONS RESIDING AT THE FACILITY.**

The facility must develop, implement, and monitor policies and procedures to ensure each person is allowed and encouraged to exercise his rights as citizens of the United States, and all persons must be accorded those civil rights provided in Title 66, Chapter 4, Idaho Code, except as otherwise provided in Section 66-1406, Idaho Code. These procedures must include a written document that outlines the person's rights, restrictions, and rules of the facility. ( )

**301. ADVOCACY AND ADVOCATE SELECTION.**

With input from the person and the person's interdisciplinary team, the administrator of the facility must appoint an advocate for the person when the following exists: ( )

**01. Legal Guardian Unable to Participate.** The person's legal guardian is unable or unwilling to participate, or is unavailable after reasonable efforts to contact them for participation have been made. ( )

**02. Person Unable to Make Informed Decisions.** A person “lacks capacity to make informed decisions” as defined in Section 66-402(9), Idaho Code. The IDT must determine and document in the person's record the specific impairment that has rendered the person incapable of understanding his own rights. ( )

**03. Requested by Person or Guardian.** An advocate is requested by the person or his guardian. ( )

**04. Advocate Selection.** The administrator must assure that all persons are represented only by individuals who are not employed by the facility and that a person's preference is honored whenever possible and appropriate. The priority for selection of advocates will be in the following order: ( )

**a.** Parent(s); ( )

**b.** An interested family member; or ( )

**c.** Other interested parties. ( )

**05. Advocate Limitations.** A person's advocate cannot make legal or other decisions on behalf of the person. The role of the advocate is limited to assisting the person in exercising his rights within the facility and as a United States citizen. ( )

**302. RIGHTS, RESTRICTIONS, AND RULES OF THE FACILITY – DOCUMENTATION.**

The facility must ensure each person, each person's legal guardian, and each person's advocate is provided with comprehensive facility information including each person's rights, restrictions, rules, services available, and potential charges for care. If legal guardians wish for other members of the person's family to be informed, they must put this permission in writing. The fact that a person has been determined to be incompetent or incapable does not absolve the facility from providing the person with such information to the extent that the person is able to understand them. ( )

**01. Provided with Rights, Restrictions, and Rules.** Upon admission, a notice communicating rights information must be provided verbally and in writing in the manner and language understood by the person, the person's legal guardian, and the person's advocate, who will also acknowledge receipt of this notice in writing. If the person refuses to acknowledge receipt of the notice, the staff member delivering the notice will note the refusal on the receipt. The signed receipt or copy of refusal will be maintained in the person's record. At a minimum, the information on record at admission must include the following: ( )

**a.** Documentation demonstrating the receipt and explanation of each person's rights, including the person's right to participate in accordance with person-centered care principles and his right to be free from abuse, neglect, mistreatment, and suspicious injuries of unknown source; ( )

**b.** Documentation demonstrating the receipt and explanation of written policies, procedures, or rules of the facility pertaining to the following: ( )

**i.** Implementation and monitoring of trauma-informed care principles; ( )

**ii.** For the management of conduct between staff and persons; ( )

**iii.** For the management of maladaptive behavior; ( )

**iv.** For the use of restraint during emergency situations and the facility's methods for the reduction and elimination of restraint use; ( )

**v.** For suicide precautions; ( )

- vi. For filing a grievance; and ( )
- vii. For appealing treatment and re-admission decisions. ( )
- c. Contact information must be provided, including the phone number and mailing address for the following: ( )
  - i. Facility personnel responsible for receiving allegations of abuse, neglect, and mistreatment and reporting suspicious injuries of an unknown source; ( )
  - ii. Facility personnel responsible for receiving grievances and treatment appeals; and ( )
  - iii. Adult Protection Services, the state protection and advocacy system, and the Department's Division of Licensing and Certification. ( )

**02. Written Interpretation of Evaluations.** Upon request, a copy of the evaluation or a written interpretation of the evaluation that is conducted for the person must be provided to the person, the person's legal guardian, and the person's advocate within thirty (30) days of admission to the facility. Upon request, the administrator of the facility must provide a written interpretation of any and all subsequent evaluations. ( )

**03. Be Informed of Risks and Benefits.** The facility must explain the relative risks and benefits of specific modes of treatment contained in each person's Individual Treatment Plan (ITP) to the person, the person's guardian, and the person's advocate. The attendant risks of treatment must describe the risk vs. risk and the risk vs. benefit associated with the treatment. These risks include possible side effects, other complications from treatments including medical and drug therapy, unintended consequences of treatment, or other behavioral or psychological ramifications arising from treatment. ( )

**04. Be Informed of Activities.** Each person's legal guardian or the person's advocate must be informed of activities related to the person that may be of interest to them. ( )

**05. Notification of Significant Events.** Each person's legal guardian or advocate must be notified in the event of any unusual occurrence or significant changes in the person's condition including serious injury, illness, accident, impending death, or death. Notifications must be made as soon as possible, but must not exceed twenty-four (24) hours. ( )

**06. Communications.** Each person's legal guardian or advocate must receive replies to any communication sent to the facility regarding the person within forty-eight (48) hours. ( )

**303. FACILITY ENVIRONMENTAL RESTRICTIONS.**

**01. Locked, Fenced, and Enclosed Grounds Accessible to Persons, Staff, and Authorized Individuals.** The facility must develop, implement, and monitor policies and procedures governing the use of locked, fenced, and enclosed grounds. Policies must identify the circumstances under which fencing is to be unlocked and the procedures specifying how each person, staff, and authorized individuals will gain access. ( )

**02. Locked Residential Units.** The facility must develop, implement, and monitor policies and procedures governing the use of locked residential units. Policies must identify the circumstances under which the units are to be unlocked and the procedures specifying how each person, staff, and authorized individuals will gain access to locked units. Locked units must not be used as a substitute for adequate staff, staff convenience, or a treatment plan. ( )

**03. Bedroom and Building Exit Alarms.** The facility must develop, implement, and monitor policies and procedures governing the use of bedroom and building exit alarms. Policies must identify the circumstances under which the alarms are to be used. Alarms must not be used in lieu of sufficient staff, for staff convenience, or as a substitute for a treatment plan. ( )

**04. Video and Audio Monitoring.** The facility must develop, implement, and monitor policies and

procedures governing the use of video and audio monitoring. The facility may install video and audio equipment for the purposes of monitoring persons in common areas only. Video and audio monitoring in bathrooms, bedrooms, or in areas where the person is visiting with his attorney, an employee at the attorney's firm, or a representative of the state protection and advocacy system is prohibited. Video and audio monitoring must not be used in lieu of sufficient staff, for staff convenience, or as a substitute for a treatment plan. ( )

**05. Restricted Access to Items That Could Be Used as Weapons.** The facility must develop, implement, and monitor policies and procedures that restrict access to facility items and equipment that could be used as weapons. Facility policies must specify which items will be permanently restricted and which items may be temporarily restricted. For temporary restrictions, procedures must be established for the return of access based on individualized assessment. Restricted access to items must not be used in lieu of sufficient staff, for staff convenience, or as a substitute for a treatment plan. ( )

**304. RIGHTS THAT MAY NOT BE RESTRICTED.**

**01. Right to Care in a Safe Setting.** Each person is entitled to humane care and treatment in the environment or setting that is least restrictive of personal liberties in which appropriate treatment can be provided. Each person is entitled to be diagnosed, cared for, and treated in a manner consistent with his legal rights and in a manner no more restrictive than necessary for his protection and the protection of others for a period no longer than reasonably necessary for diagnosis, care, treatment, and protection. ( )

**02. Right to Be Free from Abuse, Neglect, and Mistreatment.** The facility must implement, through policies, oversight, and training, safeguards to ensure that each person is not subjected to abuse, neglect, or mistreatment by anyone including facility staff, consultants, contractors, staff of other agencies serving the person, family members, legal guardians, advocates, friends, other persons, themselves, or members of the public. The facility must adhere to the following: ( )

**a.** The facility must prohibit the employment of individuals with a conviction or prior employment history of abuse, neglect, or mistreatment of a child or of a person residing in a care facility. ( )

**b.** Through established procedures, the facility must ensure that all allegations of abuse, neglect, mistreatment, and suspicious injuries of unknown origin are reported immediately to the administrator and to other officials according to state law, including law enforcement agencies and adult protective services under Section 39-5303, Idaho Code. ( )

**c.** The facility must have evidence that all alleged violations are thoroughly investigated. ( )

**d.** The facility must prevent further potential abuse while the investigation is in progress. ( )

**e.** The results of all investigations must be reported to the administrator within five (5) business days of the investigation's start date. ( )

**f.** If the alleged violation is verified, the person's trauma history must be immediately updated, the impacts of the trauma must be assessed, and the person's comprehensive functional assessment, Individual Treatment Plan (ITP), and programs must be reviewed and updated under Section 440 of these rules. All other appropriate corrective action must be taken as soon as is reasonable. ( )

**03. Right to Be Free from Unnecessary Drugs.** All persons have the right to be free from unnecessary drugs. Drugs must not be used without indication, in excessive doses, or for excessive durations that interfere with the person's daily living activities. Chemical restraint imposed as a means of coercion, punishment, convenience, or retaliation by staff constitutes abuse. ( )

**04. Right to Be Free from Unnecessary Physical Restraint and Seclusion.** All persons have the right to be free from seclusion and unnecessary physical restraint. Seclusion and prone restraint, supine restraint, and any other restraint that forces a person against a hard surface such as a wall, chair, or the floor is not allowed. Other physical restraints may only be used to ensure the immediate physical safety of the person, a staff member, or others, and must be discontinued at the earliest possible time based on an individualized person assessment and re-

evaluation. Restraint of any form imposed as a means of coercion, punishment, convenience, or retaliation by staff constitutes abuse. ( )

**05. Right to Free Access to Attorney and Advocacy.** Every person in the facility must, at all times, have the right to visit and be visited by or to communicate by sealed mail, telephone, or otherwise with the person's attorney, an employee at the attorney's firm, or a representative of the state protection and advocacy system. Each person must have reasonable access to letter-writing material and postage for this purpose. ( )

**06. Right to Practice Religion.** The facility must honor each person's religious preferences and practices, including providing religiously necessary food accommodations. If the person's right to participate in community activities has been restricted, according to Subsection 310.01 of these rules, the facility must make other arrangements such as telecommunication or in-person visits with religious personnel, necessary to ensure the person's rights to practice religion is upheld. ( )

**07. Right to Be Paid for Work Performed.** A person must not be compelled to perform services for the facility. Persons who do work for the facility must be compensated for their efforts at prevailing wages. ( )

**08. Right to Voice Grievances.** Each person and his representatives must be provided free access to established procedures to voice grievances and to recommend changes in policies and services being offered at the facility. The facility must have an established grievance process for prompt resolution of grievances and must inform each person whom to contact to file a grievance. At a minimum, the facility policy must include the following: ( )

a. A clearly explained procedure for the submission of a person's written or verbal grievance to the facility; ( )

b. Specific time frames for review of the grievance and the provision of a response; and ( )

c. In its resolution of the grievance, the facility must provide the person or his representative with written notice of its decision that contains the name of the facility staff contact, the steps taken on behalf of the person to investigate the grievance, the results of the grievance process, and the date of completion. ( )

**09. Right to Appeal Treatment Decisions.** The person, the person's attorney, and the person's legal guardian or advocate may appeal any treatment decisions that limit the person's rights to the facility's Human Rights Committee (HRC) within thirty (30) calendar days of receipt of the written statement and a notice of appeal rights, under Subsection 310.06 of these rules. ( )

**10. Right to Participate.** Each person has the right to participate in the development of his Individual Treatment Plan (ITP). The ITP must be a person-centered plan of care that ensures each person's rights to participate are upheld, including the following: ( )

a. The right to participate in the planning process, including the right to identify individuals or roles to be included in the planning process, the right to request meetings, and the right to request revisions to the ITP. ( )

b. The right to participate in establishing the expected goals and outcomes of care, the type, amount frequency, and duration of care, and any other factors related to the effectiveness of the ITP. ( )

c. The right to be informed, in advance, of changes to the ITP. ( )

d. The right to receive the training and services included in the ITP. ( )

**305. – 309. (RESERVED)**

**310. RIGHTS THAT MAY BE RESTRICTED.**

The decision to limit a person's rights must accord with Title 66, Chapter 14, Idaho Code. Limitations or any restrictive treatment that may infringe on person's rights, must be a clinical decision made as part of the person's

Individual Treatment Plan (ITP). The facility must seek the written informed consent of the person and the person's legal guardian. ( )

**01. Limitations on Communication, Visitation, and Participation in Social and Community Events.** Except as provided in Subsections 304.05 and 304.06 of these rules, the facility may limit a person's rights to communicate with individuals inside or outside the facility or to receive visitors or associate freely with other individuals. ( )

**02. Limitations on Personal Possessions.** The facility may permanently and temporarily restrict a person's right to keep and use the person's own personal possessions. ( )

**a.** Permanent restrictions while the person resides at the facility may include the restriction of items that may be used as weapons such as knives, baseball bats, hammers, screwdrivers, rocks, weights, lighters, knitting needles, hand-held mirrors, CDs, DVDs, glass or porcelain nick-knacks, neckties, necklaces, nylons, and other items that are not considered supportive or adaptive equipment, communication devices, or basic clothing. ( )

**b.** Temporary restrictions may include the restrictions of supportive or adaptive equipment, or basic clothing that may be used as weapons such as eye glasses, canes, walkers, belts, socks, and shoelaces. Removal of such items must only occur if the removal is necessary to ensure the immediate physical safety of the person, a staff member, or others. Any removal of supportive or adaptive equipment that compromises a person's mobility must be returned to the person immediately if the person indicates a desire to move through verbal, physical, or other means. All items must be returned as soon as the physical safety situation has been resolved. Removal of communication devices is not allowed. ( )

**03. Limitations on Financial Management.** The facility may limit a person's rights to manage his financial affairs when a person chooses to purchase items, such as weapons, that are contraindicated in the person's Individual Treatment Plan (ITP). ( )

**04. Limitations on Personal Privacy.** The facility may limit a person's personal privacy in situations where a person must be continuously observed to ensure his safety, such as when a person is under suicide precautions. ( )

**05. Limitations on Access to Records.** The facility may limit a person's access to his records when such access results in violent or self-destructive behavior or a deterioration in the person's mental health status. The reason for restricted access to records, including the person-centered Individual Treatment Plan (ITP) and all revisions must be clearly documented. The person's record must also clearly document any alternative measures the facility has taken to ensure the person's right to participate is upheld under Subsection 304.10 of these rules. Direct care staff may not limit access unless the restriction has been incorporated into the person's ITP as stated in Section 310 of these rules. ( )

**06. Right to Refuse or Revoke.** The facility must inform each person, the person's legal guardian, and the person's advocate of the right to refuse treatment or revoke consent for treatment without fear of reprisal. ( )

**a.** A person, or a person's legal guardian who refuses or revokes consent for a particular treatment, such as a behavior control measure, seizure control medication, a particular intervention strategy, or a specific mode of treatment or habilitation, either verbally or in writing, must be offered information about acceptable alternatives to the treatment, if acceptable alternatives are available. ( )

**b.** The person's preference about alternatives are to be elicited and considered in deciding on the course of treatment. If the person or the person's legal guardian also refuses the alternative treatment, or if no alternative exists to the treatment, the facility must consider the effect this refusal may have on the health and safety of other persons and the person himself. ( )

**c.** If treatment refusals or the revocation of consent presents a significant health and safety risk to other persons or the person himself, treatment may be given over the objections of the person and the person's legal guardian when allowable according to applicable law. The decision to limit a person's rights is a clinical decision

made by the Interdisciplinary Team (IDT) as part of the person's Individual Treatment Plan (ITP) and according to physicians' orders. ( )

**d.** If treatment is given over an objection, a statement explaining the reasons for such limitations must be entered in to the person's record immediately. Copies of the statement and a notice of treatment decision appeal rights must be sent to the court that committed the person, the person's attorney, the person's legal guardian, the person's advocate, and the Human Rights Committee within one (1) business day of the Interdisciplinary Team's decision. The notice of treatment decision appeal rights must include the following: ( )

- i.** A description of how to request an appeal; ( )
- ii.** The deadline to request the appeal and what to do if the deadline is missed; and ( )
- iii.** The contact information of the person designated to coordinate the appeal process. ( )

**311. – 319. (RESERVED)**

**320. WRITTEN INFORMED CONSENT REQUIRED.**

The facility must provide each person and the person's legal guardian with the information required to make an informed decision about the person's care related to the person's medical condition, developmental status, mental health status, and behavioral status. When a person does not have a legal guardian, the person's advocate must be provided sufficient information necessary to assist the person in decision-making only. The person's advocate cannot make decisions or provide consent on the person's behalf. ( )

**01. Written Informed Consent Required for Proposed Restrictive Treatment.** The facility must seek the written informed consent from the person and the person's legal guardian for any restrictive treatment and other practices that may infringe on person's rights. Consents must be obtained prior to the implementation of the proposed restriction. Experimental research is not allowed. Written informed consent must be time-limited and include the following: ( )

- a.** The specific treatment; ( )
- b.** The reason for treatment; ( )
- c.** The attendant risks vs. benefits of the treatment; ( )
- d.** Alternatives to the proposed treatment; ( )
- e.** Right to refuse the proposed treatment without fear of reprisal; ( )
- f.** The consequences associated with consent or refusal of the proposed treatment; and ( )
- g.** The right to revoke consent without fear of reprisal. ( )

**321. FUNCTION OF THE HUMAN RIGHTS COMMITTEE.**

**01. Primary Function.** The primary function of the Human Rights Committee is to protect a person's rights by monitoring facility practices and programs necessary to ensure that each person's rights are protected. There must be evidence that the committee members have been provided with initial, ongoing, and refresher training on trauma-informed care principles, person-centered care principles, methods to reduce and eliminate restraint use, rights of the people residing at the facility, what constitutes a restriction of a right, and the difference between punishment and training. Initial training must be provided prior to the HRC's review of facility policies and procedures, and interventions, appeals, and grievances for persons. Refresher training must be provided annually. ( )

**02. Policies and Role of the Committee.** The facility will develop policies for the committee that includes the composition of the committee members, including qualifications and what number constitutes a quorum.



The role of the committee will be outlined to include the following: ( )

**a.** Review and approval, prior to implementation, of any procedure or treatment that the person or the person's legal guardian has refused or revoked, for which there is no known acceptable alternative treatment, and for which the treatment team has presented a clinical decision to limit the rights; ( )

**b.** Review facility policies and practices to ensure that they are consistent with trauma-informed care principles, person-centered care principles, applicable law, and these rules and present feedback to the facility on any concerns noted; ( )

**c.** Review revisions of procedures and treatments that increases the level of intrusiveness of restrictive interventions the HRC previously approved; ( )

**d.** Review appeals of treatment decisions; and ( )

**e.** Participate in reviewing grievances under the grievance policy. ( )

**322. DOCUMENTATION OF HUMAN RIGHTS COMMITTEE REVIEW, APPROVAL, AND MONITORING.**

**01. Documentation of Human Rights Committee Review and Approval.** Documentation to verify that the committee completed a thorough, substantive review of all restrictive practices and interventions, except environmental restrictions outlined in Section 303 of these rules. Periodic monitoring by the committee must ensure trauma-informed principles and person-centered care principles are adhered to and include the following: ( )

**a.** An assessment supporting the need for the restrictive intervention; ( )

**b.** Evidence the intervention has been approved for use at the facility, under policy; ( )

**c.** Evidence the severity of the behavior outweighs the risks of the proposed intervention; ( )

**d.** Evidence that less restrictive interventions were considered; ( )

**e.** Evidence that an individualized behavior plan to reduce the need for the restrictive intervention has been developed and implemented; ( )

**f.** Evidence that replacement behavior training is present and functionally related to each maladaptive behavior; ( )

**g.** Evidence that the committee ensured that the person, the person's legal guardian, and the person's advocate were actively involved in the development of the assessment, proposed intervention, alternatives, plan and written informed consent from the person's legal guardian was obtained; ( )

**h.** Documentation of any changes required by the committee prior to approval; ( )

**i.** The frequency of the committee's review of the person's progress and approval of the restrictive intervention; and ( )

**j.** The time limit of the committee's approval. ( )

**02. Documentation of Objection of Restrictive Measures Overridden.** According to Subsection 310.06 of these rules, the Interdisciplinary Team (ITD) may implement restrictive measures over the objection of the person and the person's legal guardian. In those situations, the Human Rights Committee (HRC) must review the interventions and the objection (if available) prior to giving approval. The Interdisciplinary Team will not implement restrictive measures over the objection of the HRC. ( )

**323. – 399. (RESERVED)**

**400. STANDARD OF LICENSURE: TREATMENT AND SERVICES.**

The facility must implement a person-centered Individual Treatment Plan (ITP) that is developed and designed to achieve the person's discharge from the facility at the earliest possible time. ( )

**401. ADMISSION RECORDS.**

Each person's record must clearly document admission to the facility was in conformance with all admission criteria found in Title 66, Chapter 14, Idaho Code. Each person's record must include the following: ( )

**01. Documentation of Basic Information.** The person's name, age, level of intellectual or developmental disability, serious mental illness diagnosis, other relevant diagnoses, who to contact in case of an emergency, and other significant events must be documented. ( )

**02. Documentation of Court Findings.** Documentation from the court regarding criminal adjudication and evaluation for competency or treatment to restore competency, civil commitment to the custody of the Department, or determination of the presence of a substantial threat to the safety others if not evaluated or treated in the facility. ( )

**402. ADMISSION PROCESS.**

Upon admission, each person must be immediately evaluated to ensure safe and appropriate treatment is provided upon admission. The preliminary evaluation must contain background information obtained from the person, the person's guardian, and the person's advocate that includes a comprehensive trauma history and de-escalation strategy information, as well as currently valid assessments of basic functioning. ( )

**01. Medical and Physical History Assessment.** Upon admission, each person must have a comprehensive medical history and physical assessment completed by the physician. At a minimum, the assessment must include the following: ( )

- a. A complete head-to-toe examination of all a person's body systems; ( )
  - b. Documentation of immunization status; ( )
  - c. An assessment for the risk to a person if they require restraint, including limitations on any restraint based on the person's needs and medical condition; ( )
  - d. Orders signed by the physician for all drugs and biologicals required by the person; ( )
  - e. Documentation of any medication allergies or adverse drug reactions the person has experienced; ( )
- and
- f. Documentation of any food allergies and a diet order signed by the physician. ( )

**02. Comprehensive Trauma History and De-escalation Strategy Information.** Upon admission, the clinical case manager must complete a comprehensive trauma history and gather information regarding strategies that may be implemented to de-escalate the person during periods of agitation and distress. Information must be obtained from the person and the person's guardian and the person's advocate. ( )

- a. At a minimum, the trauma history must include: ( )
  - i. Physical abuse; ( )
  - ii. Sexual abuse and rape; ( )
  - iii. Victimization due to other crimes; ( )
  - iv. Neglect; ( )

- v. Acute trauma, such as a severe accident or natural disaster; ( )
  - vi. Witnessing a death or violence toward someone else; ( )
  - vii. Being subjected to seclusion, including the form, frequency, and duration of the seclusion, physical restraints, including the form, frequency, and duration of restraints used, and punishment, including the form, frequency, and duration of the punishment used; and ( )
  - viii. As applicable, what trauma-related effects the person is experiencing, such as flashbacks, nightmares, insomnia, fearfulness, self-injury or aggression, and triggering events such as yelling, hearing loud noises, a certain time of day or year, a particular task or activity, or frequent prompts to engage in activities that results in increased difficulty for the person. ( )
- b.** At a minimum, de-escalation information must include: ( )
- i. Identification of strategies that have worked for the person in the past, such as taking a walk with staff, listening to music, talking with someone, or deep breathing; ( )
  - ii. Identification of other individuals who have been helpful to the person during previous upsetting situations; and ( )
  - iii. Identification of actions or events that may cause additional distress when the person is already upset, such as being touched, being isolated, being prompted to engage in tasks or activities, or being told to calm down. ( )

**03. Assessment of Abilities and Needs.** At the time of admission and upon completion of the person's trauma history and de-escalation strategy information, the clinical case manager must assess each person's basic functioning abilities and needs. All assessments must include information obtained from the person, the person's guardian, and the person's advocate and identify those areas that are deemed to be important to the person. The assessment must also incorporate all relevant information obtained from the trauma history and de-escalation strategy information, including the identification of any task, activity, or event that the person may find re-traumatizing, and the psychological impacts a re-traumatizing situation may have on the person. At a minimum, assessments must include the following areas: ( )

- a.** Basic activity of daily living skills including toileting, personal hygiene, dental hygiene, dining, bathing, dressing, grooming, and self-administration of medication; ( )
- b.** Receptive and expressive communication of basic needs, including the person's verbal and non-verbal expression of illness, pain, and discomfort; ( )
- c.** Supportive or adaptive equipment needs; ( )
- d.** Mental health and behavioral status, including the person's ability to recognize, report, and cope with any symptoms they may be experiencing, which intervention strategies are recommended, and which intervention strategies to avoid. If restrictive interventions are to be implemented upon admission, the assessment must clearly document the need for the interventions; ( )
- e.** If physical restraint is to be used, the assessment must include a trauma history, documenting any past trauma, or physical, sexual, or psychological abuse, and the psychological effect that restraint may have by re-traumatizing the person. The assessment must include any restraints that will not be used based on past trauma. Aftercare instructions to staff must be provided; and ( )
- f.** Any other pertinent information that contributes to an overall understanding of the person's level and quality of functioning. ( )

**403. FORMATION OF THE PRELIMINARY PLAN.**

**01. Preliminary Plan Required.** Immediately following the basic admission assessments, the clinical case manager must formulate a preliminary plan for staff to follow in meeting each person's immediate needs. The preliminary plan must include input from the person and the person's guardian and the person's advocate. ( )

**02. What the Preliminary Plan Must Include.** From the time of admission until the time the Individual Treatment Plan (ITP) is implemented, the facility must provide those services and activities determined to be essential to the person's daily functioning as specified on the person's preliminary plan. Staff must receive specific training on the preliminary plan prior to working with the person directly. The preliminary plan must incorporate all assessment recommendations, with particular emphasis given to those recommendations which the person and the person's guardian and the person's advocate deemed to be important and those that were based on the person's trauma history and de-escalation strategy information. At a minimum, the preliminary plan must include the following: ( )

**a.** Basic information including the person's name, age, level of intellectual or developmental disability, other relevant diagnoses, and information-related areas that were identified as important to the person; ( )

**b.** Basic physical health information, including any physical health-related concerns identified by the physician in the admission history and physical, medication allergies, adverse drug reactions, medications prescribed, and times of medication administration. If PRN medications are prescribed, information must include a specific set of symptoms that indicate the need for PRN medication; ( )

**c.** Staffing and specific supervision needs, including any enhanced supervision, such as line-of-sight during all hours, line-of-sight during all waking hours except when the person is engaged in independent personal care activities, or arm's length supervision; ( )

**d.** The level of assistance staff must provide the person to perform each basic activity of daily living, and to engage in interests, activities and hobbies; ( )

**e.** Information related to food allergies and any dietary restrictions or modifications; ( )

**f.** How to communicate with the person, including the person's verbal and nonverbal expression of illness, pain, discomfort, and distress; ( )

**g.** Signs and symptoms of mental illness the person displays, what may trigger an escalation of mental health symptoms, how to intervene, and what interventions to avoid; ( )

**h.** Maladaptive behaviors the person engages in what conditions, activities, tasks, and events may result in the person engaging in maladaptive behavior, how to intervene, and what interventions to avoid. If the physician or the clinical case manager has determined there is a health or psychological risk to utilizing restraint, the Interdisciplinary Team (IDT) must insure that the preliminary plan clearly states the prohibition of restraints and must identify alternative measures to use in an emergency situation; ( )

**i.** If physical restraint is to be used, the preliminary plan must include aftercare instructions to staff; and ( )

**j.** Any other pertinent information that contributes to an overall understanding of the person's level and quality of functioning. ( )

**404. – 409. (RESERVED)**

**410. COMPREHENSIVE FUNCTIONAL ASSESSMENT.**

Within fourteen (14) calendar days after admission, the Interdisciplinary Team (IDT) must have completed assessments or reassessments as needed, to supplement the preliminary assessment completed upon admission. All assessments must include information obtained from the person, the person's guardian, the person's advocate, and identify those areas that are deemed to be important to the person. All assessments must incorporate all relevant information obtained from the trauma history and de-escalation strategy. ( )

**01. Accurate Assessment.** Assessments must be accurate and administered with appropriate adaptations such as specialized equipment, use of an interpreter, use of manual communication, and tests designed to measure performance in the presence of visual disability. ( )

**a.** Assessment data must be current, relevant, and valid. Assessment data from assessments completed in a previous placement, or as part of the court's determination to place the person in the facility, can be used to meet this requirement if those assessments were completed within the past six (6) months, and the assessments are reviewed and updated for relevance and validity. ( )

**b.** Stated in specific functional terms, including specific information about the person's ability to function in different environments, specific skills or lack of skills, and how function can be improved, either through training, environmental adaptations, or provision of adaptive, assistive, supportive, orthotic, or prosthetic equipment; ( )

**c.** Identify skills, abilities, and training needs that correspond to the person's actual, observed status; and ( )

**d.** Include conclusions and recommendations on which to base Individual Treatment Plan (ITP) priority decisions. ( )

**02. Assessments Completed by Appropriate Personnel.** The separate components of the comprehensive assessment must be completed by appropriate personnel. Professional expertise may fall within the purview of multiple professional disciplines, based on overlapping training and experience. The facility's policies must specify which discipline or disciplines are responsible for completing each assessment area. All personnel must receive training on trauma-informed care principles and person-centered care under Subsection 204.02 of these rules, and review the person's trauma history and de-escalation strategy information prior to conducting his portion of the comprehensive functional assessment. ( )

**411. COMPONENTS OF THE COMPREHENSIVE FUNCTIONAL ASSESSMENT.**

Assessments must include identification of those functional life skills in which the person needs to be more independent and those services needed for the person to more successfully manage maladaptive behaviors and mental health symptoms. All assessments must be consistent with trauma-informed care principles and person-centered care principles, and include recommendations that actively avoid re-traumatizing the person when applicable. Components of the comprehensive functional assessments must include the following: ( )

**01. Assessment of Placement.** The assessment must include an evaluation of the circumstance under which the person was admitted to the facility and the specific barrier(s) that the person must overcome in order to be discharged to a less restrictive setting. ( )

**02. Assessment of Adaptive Behavior and Independent Living Skills.** To the degree possible considering the limitations in the facility, the assessment must include the effectiveness or degree with which the person meets the standards of personal independence, social responsibility, and community orientation and integration expected of his age and cultural group. ( )

**03. Assessment of Presenting Problems and Disabilities and Their Causes.** The assessment must include all of the person's diagnoses and intellectual or developmental deficits and the supporting information for each. ( )

**04. Assessment of Physical Development, Health Status, Strengths, and Needs.** The assessment must include the person's developmental history, results of the history, and physical examination conducted by a licensed physician, health assessment data, including a medication and immunization history, and when available, a review and summary of all laboratory reports and reports of all specialist consultations. The assessment must include the person's skill level in the monitoring and supervision of one's own health status, and the ability to administer one's own medications and treatments. ( )

**05. Assessment of Sensorimotor Development.** The assessment must include motor development that

addresses those behaviors that primarily involve muscular, neuromuscular, or physical skills and varying degrees of physical dexterity, and an assessment of perceptual skills, including auditory functioning and vision, that are involved in making sense of environmental stimuli. Identified sensory deficits will be evaluated in conjunction with the impact they will have on the person's life. ( )

**06. Assessment of Adaptive Equipment.** For those motor areas that are identified by the assessment as limited, the assessment will specify the extent to which corrective, orthotic, prosthetic, or support devices would impact the person's functional status and the extent of time the device is to be used throughout the day. The assessment must include the specific accommodations that address the person's needs to ensure better opportunity for the person's success. The identified accommodations may be assistive technology that can help a person to learn, play, complete tasks, get around, communicate, hear or see better, control his own environment, and take care of his personal needs (e.g. door levers instead of knobs, plate switches, audio books, etc.). ( )

**07. Assessment of Cognitive Function and Developmental Status, Strengths, and Needs.** The assessment must include the person's development of those processes by which information received by the senses is stored, recovered, and used. It includes the development of the processes and abilities involved in memory, reasoning and problem solving. It is also the identification of different learning styles the person has and those best used by the trainers. It is critical that the assessment address the individual learning style of the person in order to best direct the way the trainers will teach formal and informal programs. ( )

**08. Assessment of Nutritional Status, Strengths, and Needs.** The assessment must include the person's height, weight, ideal body weight, the person's eating habits, religious preferences, and accommodations, favorite foods, determination of appropriateness of diet, including the person's desire to lose or the need to gain weight, adequacy of total food intake, bowel habits, means through which the person receives nutrition, and the skills associated with eating including chewing, sucking, and swallowing disorders. ( )

**09. Assessment of Speech and Language (Communication) Development.** The assessment must address both verbal and nonverbal, and receptive and expressive communication skills. Assessment data must identify the appropriate intervention strategy to be applied, and which augmentative or assistive devices, if any, will improve communication and functional status. Recommendations for intervention strategies must provide the person with a viable means of communication that is appropriate to his sensory, cognitive, and physical abilities. The assessment must identify if or how frustration caused by a lack of effective means to communicate contributes to the person's maladaptive behaviors. ( )

**10. Assessment of Mental Health.** Each person must receive a psychiatric evaluation that includes the person's diagnosis and treatment, to include a history of when the person's symptoms presented, were diagnosed and if possible, by whom. Information related to the effectiveness of prior treatments and information necessary to support the person's current diagnosis and treatment must be present. In those cases where the mental status portion of the psychiatric evaluation is performed by a nonphysician, there is the expectation of evidence that the nonphysician is licensed and credentialed by the facility, legally authorized by the state to perform that function, and a physician review and countersignature is present where required by facility policy or state law. ( )

**11. Assessment of Behavioral Status, Strengths, and Needs.** The assessment must address and identify the skill deficits that may be amenable to training, those that must be treated by therapy and/or provision of assistive technology, and those that require adapting the environment and/or providing personal support. Assessment of needed supports are to be done within the context of the person's age, gender, and culture. ( )

**a.** The assessment must include the development of behaviors that relate to the person's interests, attitudes, values, morals, emotional feelings, and emotional expressions. ( )

**b.** The functional behavioral assessment must look beyond the behavior itself. The functional behavioral assessment must identify significant person-specific physical, social, affective, cognitive, and environmental factors associated with the occurrence (and nonoccurrence) of specific behaviors. The functional behavioral assessment must identify the purpose of the specific behavior(s) and recommend interventions to directly address the function of the behavior(s). ( )

**12. Assessment to Support the Need of Restrictions.** If restrictive interventions are to be used, the

assessment must clearly document the behaviors the person engages in to support the need for the restriction. If the physician or the clinical case manager has determined there is a health or psychological risk to utilizing restraint, the Interdisciplinary Team (IDT) must ensure that the assessment clearly states the prohibition of restraints and must identify alternative measures to use in an emergency situation. ( )

**412. PROFESSIONAL SERVICES AVAILABLE.**

The comprehensive functional assessment must identify the course of specific interventions recommended to meet the person's needs, both through direct professional services and nonprofessional services. The person's needs identified in the comprehensive functional assessment must guide the Interdisciplinary Team (IDT) in deciding if a particular professional's involvement is necessary and, if so, to what extent professional involvement must continue on a direct or indirect basis. ( )

**413. – 419. (RESERVED)**

**420. INDIVIDUAL TREATMENT PLAN (ITP).**

The Interdisciplinary Team, including the person, the person's legal guardian, the person's advocate, and any other individual identified as important to the person, including those identified when gathering de-escalation information, must collaboratively develop the person's Individual Treatment Plan (ITP) treatment plan within five (5) calendar days of the completion of the Comprehensive Functional Assessment. When professional assessments have been completed, recommendations to address the person's needs must be presented to the Interdisciplinary Team (IDT) at the person's ITP meeting. ( )

**01. Mandatory Participation.** Professional participation may be through written reports or verbally while attending the ITP meeting, in person, via telephone, or by other electronic means. This participation provides team members with the opportunity to review and discuss information and recommendations relevant to the person's needs, and to reach decisions as a team, rather than individually, on how best to address those needs. All recommendations must be incorporated into the person's ITP, with a current prioritized objective. ITP documentation must demonstrate the person's right to participate was upheld in accordance with Subsection 304.10 of these rules. ( )

**02. Clinical Case Manager Responsibilities.** Each person's treatment program must be integrated, coordinated, and monitored by a clinical case manager. The clinical case manager is ultimately responsible for the overall responsiveness and effectiveness of each person's treatment program. ( )

**03. Development of the Individual Treatment Plan (ITP).** Each person must receive a continuous treatment program that includes aggressive, consistent implementation of a program of specialized and generic training, treatment, health services, and related services. The Individual Treatment Plan (ITP) is the outline of what the facility has committed itself to do for the person, based on an assessment of the person's needs. The plan must be consistent with trauma-informed care principles and person-centered care principles and contain the following: ( )

- a. The person's strengths, needs, areas deemed to be important by the person, and the person's trauma history, and de-escalation strategy information; ( )
- b. Substantiated diagnoses; ( )
- c. Short-term and long-range goals of the desired outcomes the person is trying to achieve and projected completion dates based on the person's rate of learning; ( )
- d. Specific, separately stated, measurable priority and secondary objectives necessary to meet the person's training needs, as identified by the comprehensive assessment; ( )
- e. Specific, separately stated, measurable priority and secondary objectives necessary to meet the person's service and support needs, as identified by the comprehensive assessment; ( )
- f. Specific treatment modalities utilized, with the following requirements: ( )

- i. The focus of the treatment must be included. Simply naming modalities such as individual therapy, group therapy, occupational therapy, and medication education is not acceptable. ( )
- ii. Modality approaches must be specifically described in order to ensure consistency of approach. Simply stating modality approaches, such as set limits, encourage socialization, and discharge planning as needed is not acceptable. ( )
- g. Any additional adaptive equipment, assistive technology, services, and supports required to meet the person's needs; ( )
- h. The specific steps and actions that will be taken to achieve the established objectives; ( )
- i. The responsibilities of each member of the Interdisciplinary Team; and ( )
- j. Adequate documentation to support the diagnosis and treatment activities carried out. ( )

**421. DEVELOPMENT OF INDIVIDUALIZED WRITTEN TRAINING AND SERVICE PROGRAMS.**

**01. Written Training and Service Programs.** Written training and service programs must be developed for each priority objective identified in the Individual Treatment Plan (ITP). ( )

**02. Program Specifications.** Each written training and service programs must specify the following: ( )

- a. The specific methods or treatment modalities to be used and those that are specifically prohibited based on the person's trauma history and de-escalation information; ( )
- b. The schedule for use of the methods or treatment modalities; ( )
- c. The staff member responsible for the program and identification of staff who may implement the program; ( )
- d. The type of data and frequency of data collection necessary to be able to assess progress toward the desired objectives; ( )
- e. Any triggers, mental health symptom(s), inappropriate behavior(s), including those identified in the person's trauma history and de-escalation information, that are specifically related to the program; ( )
- f. Provision for the appropriate expression of behavior and the replacement of inappropriate behavior with behavior that is adaptive or appropriate, including those identified in the person's de-escalation information; ( )
- g. A description of relevant interventions to support the person toward independence, provide opportunities for personal choice and self-management, and include the areas identified as important to the person and the person's self-identified de-escalation strategies; ( )
- h. Identify the location where program strategy information, that must be accessible to any person responsible for implementation, can be found; and ( )
- i. Specific instructions to staff regarding how to respond if the person refuses to engage in the activities specified in the written program. ( )

**422. REQUIRED EQUIPMENT AND SUPPLIES.**

**01. Equipment and Supplies.** The equipment and supplies needed to implement each written program, including adaptive equipment and mechanic supports must be identified to achieve proper body position, balance, or alignment. ( )



- 02. Plan Specifications.** The plan must specify the following: ( )
- a.** The reason for each support; ( )
  - b.** The situations in which each is to be applied; and ( )
  - c.** A schedule for the use of each support. ( )

**423. IMPLEMENTATION OF THE INDIVIDUAL TREATMENT PLAN (ITP).**

As soon as the interdisciplinary team has formulated a person's Individual Treatment Plan (ITP), each person must receive a continuous treatment program consisting of needed interventions and services in sufficient number and frequency to support the achievement of the objectives identified in the Individual Treatment Plan (ITP) in both structured and nonstructured situations. Staff must receive specific training on the implementation of the ITP at the time of implementation. ( )

**01. Individualized Treatment Schedules.** The facility must develop and implement a treatment schedule that outlines the person's treatment program, and that must be readily available for review by relevant staff. Each person must be actively involved in the development of his schedule in accordance with Subsection 304.10 of these rules. ( )

**02. Professional and Licensed Staff Services.** The facility must have available enough qualified professional staff to carry out and monitor the various professional interventions under the stated objectives of each person's Individual Treatment Plan (ITP). ( )

**a.** Each person must receive the professional program services needed to implement the treatment program defined by each person's Individual Treatment Plan (ITP). Professional program staff must work directly with each person. For those services that must be provided by a professional due to law, licensure, or registration, the person must receive the services directly from the professional. ( )

**b.** Professional program staff must work directly with paraprofessional, nonprofessional, and other professional program staff who work directly with the person. Professionals may deliver services through the supervision and direction of subordinates where provided by law. ( )

**03. Unlicensed Staff Responsibilities.** Except for those facets of the Individual Treatment Plan (ITP) that must be implemented only by licensed personnel, each person's ITP must be implemented by all staff who work with the person, including professional, paraprofessional, and nonprofessional staff. ( )

**a.** An Individual Treatment Plan (ITP) may not require that professional staff perform all of the services as outlined by the ITP; and ( )

**b.** Direct Care Staff may be trained by the professional staff to safely and effectively carry out the written program. In these situations, the appropriate professional must evaluate the staff's competencies in plan delivery at periodic intervals. ( )

**424. – 429. (RESERVED)**

**430. DATA COLLECTION.**

Documentation. Each person's record must be a comprehensive, accurate representation of the person's status, care, and treatment. ( )

**01. Documented Program Data.** Program data must be documented in measurable terms and collected in the form and at the frequency specified on each written program; ( )

**02. Documentation Requirements.** Documentation must ensure that all therapeutic efforts received by the person are included; and ( )

**03. Significant Events.** Significant events that are related to the person's Individual Treatment Plan (ITP) and assessments that contribute to an overall understanding of the person's ongoing level and quality of functioning must be documented. For all traumatic significant events, the person's trauma history must be immediately updated, the impacts of the trauma must be assessed, and the comprehensive functional assessment, ITP, and programs must be reviewed and updated under Section 440 of these rules. ( )

**431. CHRONIC, PERVASIVE REFUSALS TO PARTICIPATE.**

**01. Active Engagement.** The facility must actively attempt to engage persons to participate in activities specified in their Individual Treatment Plans (ITPs). ( )

**02. Refusal Policies and Procedures.** The facility must develop, implement, and monitor policies and procedures that address a person's chronic, pervasive pattern of refusals to participate in treatment. Policies must address the following: ( )

**a.** Refusals that do not impact the person's health and safety, such as refusing to engage in housekeeping activities; and ( )

**b.** Refusal that may impact a person's health and safety, such as refusing to eat, refusing to take medications, refusing vaccinations, and refusing to engage in personal and dental hygiene. ( )

**i.** The facility's policies must address the circumstances under which forced compliance will be implemented, such as when a person refuses to take medications, and how forced compliance will be achieved. The person's physician must document the reason why the task or activity is necessary and critical to the person's health and safety prior to the use of forced compliance. ( )

**ii.** The facility's policies must address the circumstance in which the facility must consider alternative placement options due to a person's persistent refusals to participate that jeopardizes the health and safety of the person or others or significantly impedes the facility's ability to meet the person's treatment needs. Discharge and transfer policies must adhere to Section 441 of these rules. ( )

**432. – 439. (RESERVED)**

**440. PROGRAM MONITORING AND CHANGE.**

**01. Clinical Case Manager Review and Revision.** The person's comprehensive functional assessment, and Individual Treatment Plan (ITP) must be reviewed and updated by the clinical case manager at least monthly and as necessary, including situations in which: ( )

**a.** The person has successfully completed an objective or objectives identified in the Individual Treatment Plan (ITP); ( )

**b.** The person has regressed or lost skills already gained; ( )

**c.** The person has failed to progress toward identified objectives after reasonable efforts have been made; ( )

**d.** The person is being considered to work toward new objectives; or ( )

**e.** The comprehensive assessment of the person's strengths and needs has changed based on the occurrence of a significant event. For all traumatic significant events, the person's comprehensive functional assessment, ITP, and programs must be reviewed and updated by the appropriate professional personnel to address the impacts of the new traumatic event. The person's record must include documentation that all changes have been communicated and discussed with the interdisciplinary team, including the person, prior to the change being made. ( )

**02. Interdisciplinary Team Review and Revision.** The person's comprehensive functional

assessment and Individual Treatment Plan (ITP) must be reviewed at least every ninety (90) days by Interdisciplinary Team (IDT) and revised as necessary. The IDT review must include participation of the person, the person's guardian, and the person's advocate. ( )

**03. Interdisciplinary Team 90-Day Review.** Upon completion, the IDT's 90-day review must be immediately forwarded to the Director to determine whether the person continues to meet facility criteria under Subsection 441.02 of these rules. The IDT review must include the following: ( )

**a.** Documentation of review and discussion of the person's current status and significant events, including traumatic significant events and how those events have impacted the person; ( )

**b.** Documentation of review and discussion of the person's progress toward all objectives and documentation of any recommendations and changes to be made to the person's treatment program; ( )

**c.** Documentation of a re-evaluation of all restrictive interventions and documentation of any recommendations and changes to be made to the person's restrictive interventions; and ( )

**d.** Documentation of a re-evaluation of placement at the facility. ( )

**i.** Documentation must include the specific criteria supporting the continued placement of the person at the facility; or ( )

**ii.** Documentation of any recommendations and changes to be made to the person's living situation, including transfer and discharge from the facility. ( )

**441. TRANSFER OR DISCHARGE FROM THE FACILITY.**

Except in emergencies, the Director must have documentation in the person's record that the person was transferred or discharged for good cause. ( )

**01. Transfer or Discharge Based on Emergent Needs.** If a person is deemed to need medical care or acute psychiatric care, it is the responsibility of the facility to ensure a timely transfer based on the urgent or emergency nature of symptoms or injury presentation. The person's legal guardian, advocate, and the Director must be immediately notified of the transfer or discharge based on the person's emergent needs. ( )

**a.** The facility must have a transfer agreement for the immediate transfer to a hospital for persons requiring emergency medical care beyond the capabilities of the facility. ( )

**b.** The facility must have a transfer agreement for the transfer to a hospital with psychiatric services for persons requiring psychiatric care beyond the capabilities of the facility. ( )

**02. Non-Emergency Discharge.** Upon receipt of the Interdisciplinary Team's 90-day review under Subsection 440.03 of these rules, the Director must determine and document whether the person continues to meet secure facility program criteria. If the person no longer meets the program criteria, the Director must redispotion the person, under Section 66-1405, Idaho Code. If a person is to be either transferred or discharged, the facility must ensure the following: ( )

**a.** Discharge for Good Cause. The facility must have documentation in the person's record that the person was transferred or discharged for good cause; ( )

**b.** Reasonable Preparation Time. The facility must provide a reasonable time to prepare the person, the person's legal guardian, and the person's advocate for the transfer or discharge, except in emergencies; and ( )

**c.** Information Provided. At the time of transfer or discharge, medical and other information needed for care of the person in light of such a transfer, will be exchanged between the institutions according to federal and state medical privacy law, including: ( )

- i. Any information needed to determine whether the appropriate care can be provided in a less restrictive setting; and ( )
- ii. A post-discharge plan of care that will assist the person to adjust to the new living environment. ( )

**442. – 499. (RESERVED)**

**500. STANDARD OF LICENSURE: BEHAVIOR AND FACILITY PRACTICES.**

The facility must provide each person with training, and services and supports to increase his independence in the self-management of maladaptive behavior and mental health symptoms. ( )

**501. PROHIBITIONS.**

The facility must not, under any circumstances, use interventions including: ( )

- 01. Seclusion.** ( )
- 02. Aversive Conditioning.** Adverse conditioning, including painful or noxious stimuli; ( )
- 03. Barred Enclosures.** Barred or other enclosures that do not meet the construction requirements of a time-out room under Subsection 502.02 of these rules; ( )
- 04. Forced Compliance.** Forced compliance for tasks and activities not related to health and safety; ( )
- 05. Prone and Supine Restraints.** Prone, supine, and any other restraint that forces a person against a hard surface such as a wall, chair, or the floor. ( )
- 06. Physical Interventions and Hyperextension.** Physical interventions that hyper-extend of any part of the body such as limbs, joints, fingers, and thumbs; ( )
- 07. Physical Interventions and Pressure.** Physical interventions that include pressure points, joint or skin twisting, or applying pressure or weight to the chest, lungs, sternum, diaphragm, back, abdomen, neck, throat, any major artery, or on the back of a person's neck or head, obstructing circulation or the person's airway; ( )
- 08. Techniques Involving the Head.** Any technique that involves using a person's head to control movement such as half nelsons, full nelsons, and headlocks; ( )
- 09. High Risk Techniques.** Any technique that involves substantial risk of injury such as wrestling holds and take downs; ( )
- 10. Tie-Down Devices to Stationary Objects.** Any tie-down device designed to secure a person to a stationary object, such as a bed or chair; ( )
- 11. Law Enforcement Restraint Devices.** Any use of law enforcement restraint devices, such as handcuffs, manacles, shackles, or other chain type restraint devices; ( )
- 12. Law Enforcement Weapons or Devices.** Any use of law enforcement weapons or devices used to subdue persons such as pepper spray, mace, nightsticks, tasers, cattle prods, stun guns, and riot gear; ( )
- 13. Other Techniques.** Any techniques imposed as a means of coercion, punishment, convenience or retaliation by staff, or as a substitute for a treatment plan; and ( )
- 14. Behavior Interventions.** The use of standing or as needed behavior interventions. ( )

**502. POLICIES, PROCEDURES, AND PRACTICES TO MANAGE MALADAPTIVE BEHAVIOR.**

The facility must develop, implement, and monitor all practices and individualized interventions to ensure restrictive

techniques are employed with sufficient safeguards to protect each person's health, safety, and rights. Any use of restrictive interventions that is not consistent with facility policy and these rules constitutes abuse and must be immediately reported to the facility administrator under Subsection 304.02 of these rules. The failure of staff to intervene to ensure a person's health and safety constitutes neglect and must also be immediately reported to the facility administrator under Subsection 304.02(b) of these rules. All policies, procedures, and practices used to manage a person's maladaptive behavior or mental health symptoms must be approved by facility administration and reviewed by the Human Rights Committee. Policies must be available to each person, staff, guardian, and advocate and must address the following: ( )

**01. Conduct.** The facility must develop, implement, and monitor written policies and procedures for the management of conduct between staff and persons. These policies and procedures must be consistent with trauma-informed care principles and person-centered care principles in creating a culture that actively supports people in having control over their own treatment throughout all levels of the facility. These policies and procedures must: ( )

- a. Promote the growth, development, and independence of each person; ( )
- b. Specify conduct by a person to be allowed or not allowed; and ( )
- c. Be available to each person, staff, guardian, and advocate. ( )

**02. Interventions Approved for Use.** The facility must develop, implement, and monitor written policies and procedures that identify all behavior interventions approved for use at the facility. These policies and procedures must designate these interventions on a hierarchy to be implemented, ranging from most positive or least intrusive to least positive or most intrusive, and address the following: ( )

a. Exclusionary time-out procedures may include the use of a time-out room, from which egress is prevented only if the following conditions are met: ( )

- i. The placement is part of a systematic time-out program; ( )
- ii. Emergency placement of a person into a time-out room is not allowed unless the person's behavior places the person, staff, or others at immediate risk for harm and all other less-intrusive behavior interventions have been tried. ( )

iii. The person is under the direct constant supervision of designated staff and the time-out is immediately discontinued if the person has an emergent need, such as needing to use the bathroom, or displays any physical signs or symptoms of distress such as seizure-like activity or labored breathing; ( )

iv. The door to the room is held shut by staff or by a mechanism requiring constant physical pressure from a staff member to keep the mechanism engaged; ( )

- v. Placement of a person in a time-out room does not exceed one (1) hour; ( )

vi. Each person placed in a time-out room must be protected from hazardous conditions including the presence of sharp corners and objects, uncovered light fixtures, and unprotected electrical outlets; ( )

- vii. A record of time-out activities must be kept; and ( )

- viii. Using a person's bedroom as a time-out room is not allowed. ( )

b. Physical restraint use; ( )

c. The use of drugs to manage inappropriate behavior; and ( )

d. Forced compliance for health and safety related tasks and activities. The person's physician must document the reason why the task or activity is necessary and critical to the person's health and safety prior to the use

of forced compliance. ( )

**03. Sufficient Safeguards and Supervision.** The facility must develop, implement, and monitor written policies and procedures that ensure all interventions to manage each person's inappropriate behavior or mental health symptoms are employed with sufficient safeguards and supervision to ensure that the safety, welfare, and civil and human rights of the person are adequately protected. Monitoring of all intervention strategies must be an integral part of the facility's Quality Assessment Performance Improvement Program under Section 901 of these rules. These policies and procedures must: ( )

- a. Identify the staff members who may authorize the use of specified interventions; ( )
- b. Include a mechanism for monitoring and controlling the use of interventions; and ( )
- c. Include mechanisms for increased monitoring during the use of concurrent restrictive interventions such as chemical restraints used while a person is in physical restraint. ( )

**04. Incorporated into Individual Treatment Plans (ITPs).** The facility must develop, implement, and monitor written policies and procedures that ensure the systematic use of behavior interventions to manage inappropriate behavior are sufficiently incorporated into each person's Individual Treatment Plan (ITP). These policies and procedures must: ( )

- a. Specify the use of the person's individualized trauma history, de-escalation strategy, information, and mental health and behavior assessments in the development of all behavior management programs; ( )
- b. Specify expectation for the use of less restrictive interventions; ( )
- c. Specify restrictive programming must be designed to lead to less restrictive means of managing and eliminating the behavior for which the restriction is applied; and ( )
- d. Specify the identification and use of replacement behaviors that are clearly related to the function of the inappropriate behavior. ( )

**503. EMERGENCY USE OF RESTRICTIVE INTERVENTION FOR EMERGENCY MENTAL HEALTH AND BEHAVIORAL REASONS.**

The facility must develop, implement, and monitor written policies and procedures that govern the use of restrictive interventions in cases of emergency. These policies and procedures must be consistent with physician's orders and must: ( )

**01. Specify Restrictive Interventions.** Specify which restrictive interventions may be used in the event of a behavioral or mental health emergency; ( )

**02. Ensure Appropriate Emergency Interventions.** Ensure emergency interventions are only employed when absolutely necessary to protect the person or others from injury when the person is exhibiting behaviors that he has not exhibited before and were not identified in the person's mental health or behavioral assessments; ( )

**03. Specify Reporting and Documentation Requirements.** Specify reporting and documentation requirements for each emergency intervention use; ( )

**04. Specify Required Re-evaluation.** Specify required re-evaluation of the person's trauma history, mental health and behavioral assessments, Individual Treatment Plan (ITP), and behavior programming after each emergency intervention is used; and ( )

**05. Establish Criteria.** Establish criteria to ensure interventions are incorporated into a person's Individual Treatment Plan (ITP) when it can be reasonably anticipated the intervention will be regularly used. ( )

**504. EMERGENCY USE OF RESTRICTIVE INTERVENTION FOR PHYSICAL MEDICAL EMERGENCIES AND TREATMENT.**

The facility must develop, implement, and monitor written policies and procedures that govern the use of restrictive interventions for physical medical emergencies and treatment. These policies and procedures must ensure health-related protections and monitoring are prescribed by a physician, and used only if absolutely necessary for the person's protection during the time that a medical condition exists. ( )

**505. – 509. (RESERVED)**

**510. SUICIDE PRECAUTIONS.**

The facility must develop, implement, and monitor written policies and procedures that govern the management of people who are suicidal. ( )

**01. Suicidal Ideation Indicators.** The facility policies and procedures must include information to staff regarding verbal and nonverbal indicators of a person engaging in suicidal ideation. ( )

**02. Immediate Action Taken.** The facility policies and procedures must address what immediate actions are to be taken in the event of suicidal ideation, threats, or attempt without significant injury, including: ( )

**a.** Increased level of supervision and monitoring; ( )

**b.** Room and property searches; ( )

**c.** Body searches; and ( )

**d.** Inventory and storage of any removed items. ( )

**03. Notifications.** The facility policies and procedures must include who must be notified and documentation requirements. ( )

**04. Suicide Risk Assessment.** The facility policies and procedures must include the facility's expectations for the completion of a suicide risk assessment. The policy must specify the following: ( )

**a.** The qualifications and training required to complete suicide risk assessments; ( )

**b.** When and how the initial risk assessment is to be completed; ( )

**c.** Actions to be taken in response to assessment findings; ( )

**d.** Frequency of re-evaluation; ( )

**e.** Specific criteria and documentation for decreasing supervision and monitoring; and ( )

**f.** Specific criteria and documentation for the return of any items taken. ( )

**05. Documentation.** The facility policies and procedures must specify, that the person's mental health and behavioral assessment, Individual Treatment Plan (ITP), and programs must include comprehensive information and specific individualized intervention strategies for each person known to engage in suicidal ideation, or threats or actions that are person-centered and consistent with trauma-informed care principles. ( )

**06. Action for Injury or Death.** The facility policies and procedures must address what immediate actions are to be taken in the event of a suicide attempt with significant injury or an actual suicide. ( )

**511. PHYSICAL RESTRAINT USE.**

Restraint must only be used for the management of violent or self-destructive behavior after less restrictive interventions have failed. The use of any restraint must be immediately reported to the facility's administrator or

designee. ( )

**01. Prohibitions.** All persons require a physician and a clinical case manager to assess the risk to a person if they require restraint. If the physician or the clinical case manager identifies any risk to utilizing the restraint, Interdisciplinary Team (IDT) must ensure that the Individual Treatment Plan (ITP) identifies alternative measures to use in place of physical restraint. ( )

**02. Conditions for Use.** Restraint must not be used unless the use of restraint is necessary to ensure the immediate physical safety of the person, a staff member, or others. The use of restraint must be discontinued as soon as possible based on an individualized assessment and re-evaluation of the person. ( )

**a.** Restraints must be designed and used so as not to cause physical injury to the person and to cause the least possible discomfort. ( )

**b.** The type or technique of restraint used must be the least restrictive intervention that will be effective to protect the person, a staff member, or others from harm. ( )

**c.** The use of restraint must be implemented under safe and appropriate restraint techniques by trained staff. No less than two (2) staff must be physically present for continuous visual monitoring whenever restraint is employed. The use of excessive force, unapproved restraints, or improper restraint technique constitutes abuse and must be immediately reported to the administrator under Subsection 304.02(b) of these rules. ( )

**d.** If the person being restrained has an emergent need, such as needing to use the bathroom or displays any physical signs or symptoms of distress, such as labored breathing, blue color of the lips or mouth, flushing of the face or neck, pale skin color, excessive perspiration, or muscle spasms must be taken out of restraint immediately and the facility's registered nurse must be immediately notified. ( )

**e.** A person must be released from physical restraint as quickly as possible. Restraints cannot be in effect longer than two (2) consecutive hours. ( )

**f.** Except in emergencies, restraint must be used as an integral part of an Individual Treatment Plan (ITP) that is intended to lead to less restrictive means of managing the behavior or mental health symptoms for which restraint is used. Restraint must only be implemented according to a person's behavior management program that provides a clear description of the violent or self-destructive behavior the person engages that would warrant the need for restraint. The program must specify the following; ( )

i. A description of the person's behavior that would indicate the need for restraint; ( )

ii. Person-specific behavioral changes that indicate restraint is no longer necessary; and ( )

iii. Aftercare instructions to staff regarding how to respond to and support the person after the restraint is released. ( )

**03. Monitoring and Documentation.** The use of restraints and related monitoring of the person must be documented in the person's record. ( )

**a.** The condition of the person who is restrained must be continuously visually monitored, in person, by no less than two (2) trained staff that have completed the training criteria specified in Subsection 204.02 of these rules. Video monitoring of restraint is not allowed. Monitoring documentation must include the following: ( )

i. An evaluation of the person's circulation, skin integrity, hydration needs, elimination needs, breathing, level of distress, and agitation; and ( )

ii. Entries every fifteen (15) minutes describing the continuous visual monitoring of a person in restraints. ( )

**b.** Within twenty-four (24) hours or sooner as indicated by need, the nurse must complete a head to



toe examination of any person placed in restraint. Any injuries noted must be immediately reported to the facility's administrator. ( )

**04. Utilization Review.** An interdisciplinary team review and debriefing must be completed and documented within seventy-two (72) hours of each restraint use. If the person refuses the opportunity to participate in the restraint debriefing, the refusal must be documented. All restraint use must be reviewed in conjunction with the person's trauma history, all applicable assessments, the Individual Treatment Plan (ITP), and programs. Review must include the following: ( )

**a.** An analysis of triggers, antecedent behaviors, alternative behaviors, least restrictive or alternative interventions attempted, including identification of the person's de-escalation preferences must be included. The restraint uses and any injuries noted in the nursing assessment must also be evaluated as well as the effectiveness of the aftercare the person received. A plan of correction must be developed, implemented, and monitored for any identified concerns and the person's trauma history, assessments, Individual Treatment Plan (ITP), and programs must be updated as needed; ( )

**b.** An interdisciplinary team comprehensive 90-day restraint review must be completed to identify patterns and trends in restraint use, including patterns in triggering events, in times of day, or staff involved. A plan of correction must be developed, implemented, and monitored for any identified concerns and the person's trauma history, assessments, Individual Treatment Plan (ITP), and programs must be updated as needed; ( )

**c.** The Human Rights Committee must review the interdisciplinary team's 90-day restraint review findings and any corrective actions taken as a result of the review. The Human Rights Committee must document agreement with the actions taken or make additional recommendations; and ( )

**d.** All restraint data, including the Interdisciplinary Team (IDT) and Human Rights Committee review, must be an integral part of the facility Quality Assessment and Performance Improvement Program to reduce restraint frequency and duration and improve safety. ( )

**512. – 519. (RESERVED)**

**520. DRUGS USED TO MANAGE MENTAL HEALTH SYMPTOMS OR MALADAPTIVE BEHAVIOR.**

The facility must develop, implement, and monitor policies and procedures governing the use of all drugs used for the management of mental health symptoms or maladaptive behavior, including the use of routine medications, PRN medication, and the use of emergency chemical restraints. ( )

**01. Prohibitions.** Drugs used for the management of mental health symptoms or maladaptive behaviors must not be used: ( )

**a.** Without justification; ( )

**b.** For excessive durations that interfere with the person's daily living activities; and ( )

**c.** Until it can be justified that the harmful effects of the behavior clearly outweigh the potentially harmful effects of the drugs. ( )

**02. Conditions for Use.** Medications used for the management of mental health symptoms or inappropriate behavior must be prescribed by a physician and administered as prescribed by trained staff who have been delegated the authority. ( )

**a.** The facility must ensure emergency chemical restraints are only used when absolutely necessary to protect the person or others from injury when the person is exhibiting behaviors of a severity and intensity that he has not exhibited before. ( )

**i.** The facility's registered nurse must assess the person before contacting the physician to request an emergency chemical restraint; and ( )

ii. The physician must be contacted each time an emergency chemical restraint is requested. Standing or repeat chemical restraint orders are not allowed. ( )

b. Except in emergencies, medications used for the management of mental health symptoms or inappropriate behavior must be approved by the Interdisciplinary Team (IDT) and be used only as an integral part of the person's behavior management program. The program: ( )

i. Must be an integral part of the person's Individual Treatment Plan (ITP) that is directed toward the reduction of the mental health symptoms or maladaptive behavior for which the drugs are employed; ( )

ii. Must include, for all PRN medication use, the person's ability to self-report a need for PRN medication and include PRN administration criteria based on the person's specific behavior or signs and symptoms of mental distress; and ( )

iii. Must include specific behavioral criteria for when each medication will be increased or decreased based on the person's progress or regression towards the objectives established in the person's Individual Treatment Plan (ITP). ( )

**03. Monitoring and Documentation.** All drugs used for the management of mental health symptoms or inappropriate behavior must be documented in the person's record. ( )

a. Drugs must be monitored closely for desired responses and adverse consequences by facility staff and in conjunction with the physician and the pharmacist. ( )

b. If an emergency chemical restraint or PRN medication is given while a person is in physical restraint, documentation of the emergency chemical restraint or PRN effects must be completed every five (5) minutes until the physical restraint is discontinued. ( )

c. The effectiveness of any emergency chemical restraint or PRN medication must be documented one (1) hour after the medication's administration and as needed based on peak onset of the drug. At a minimum, documentation must include pre- and post-behavior or mental health symptoms and pre- and post-assessment of the person's circulatory, respiratory, and neurological status at intervals appropriate to the drug administered. ( )

**04. Utilization Review.** All emergency chemical restraint or PRN medication use must be reviewed. ( )

a. An Interdisciplinary Team (IDT) review must be completed and documented within seventy-two (72) hours of each emergency chemical restraint or each PRN medication use to evaluate the events before, during, and after the use. If the person refuses the opportunity to participate in the review, the refusal must be documented. All chemical restraint and PRN medication use must be reviewed in conjunction with the person's trauma history, all applicable assessments, the Individual Treatment Plan (ITP), and programs. A plan of correction must be developed, implemented, and monitored for any identified concerns; ( )

b. In conjunction with the physician, an Interdisciplinary Team (IDT) comprehensive 90-day emergency chemical restraint and PRN medication review must be completed to identify patterns and trends in use, including patterns in triggering events, in times of day, staff involved, or need to re-evaluate the person's drug regimen. A plan of correction must be developed, implemented, and monitored for any identified concerns; ( )

c. The Human Rights Committee (HRC) must review the Interdisciplinary Team (IDT) 90-day emergency chemical restraint and PRN medication review with the drug regimen re-evaluation. The HRC must document agreement with the actions taken, or make additional recommendations; and ( )

d. All emergency chemical restraint and PRN medication data, including the Interdisciplinary Team (IDT) and Human Rights Committee (HRC) review must be an integral part of the facility Quality Assessment and Performance Improvement Program. ( )

521. – 599. (RESERVED)

**600. STANDARD OF LICENSURE: HEALTH CARE SERVICES.**

The facility must provide each person with health care services to ensure optimal levels of wellness. ( )

**601. PHYSICIAN SERVICES.**

The facility must ensure the availability of physician services twenty-four (24) hours a day. ( )

**01. Physician Participation in Plan.** A physician must participate in the establishment of each newly admitted person's initial Individual Treatment Plan (ITP) and, if appropriate, review and update the plan as necessary. ( )

**02. Use of Physician Assistants and Nurse Practitioners.** With the exception of newly admitted persons, under Subsection 601.01 of this rule and to the extent permitted by state law, the facility may utilize physician assistants and nurse practitioners to provide physician services as described in this Section. ( )

**03. Care Required.** The facility must provide or obtain preventative and general care, including: ( )

**a.** A complete history and physical examination upon admission, under Subsection 402.01 of these rules and no less than annually thereafter; ( )

**b.** An evaluation of vision and hearing; ( )

**c.** Immunizations as recommended by the Centers for Disease Control and Prevention; ( )

**d.** Routine screening laboratory examinations as determined necessary by the physician; ( )

**e.** Special studies when needed; and ( )

**f.** Screening for tuberculosis appropriate to the facility's population. ( )

**602. NURSING SERVICES.**

The facility must develop, implement, and monitor policies and procedures that delineate a person's care responsibilities for all nursing service personnel. Nursing services must be provided according to recognized standards of practice, state law, and according to each person's needs. ( )

**01. Participate in Treatment Planning.** Licensed nursing staff must participate as appropriate in the development, review, and update of each person's Individual Treatment Plan (ITP) as a part of the Interdisciplinary Team (IDT). ( )

**02. Quarterly Examinations.** The registered nurse must review each person's health status by a direct physical examination on a quarterly or more frequent basis depending on the person's needs. The review must: ( )

**a.** Be recorded in the person's record; and ( )

**b.** Result in any necessary action, including referral to a physician to address health problems. ( )

**03. Provide Other Nursing Care.** Nursing care will need to be completed as prescribed by the physician or identified by the person's needs and according to recognized standards of practice and state law. ( )

**04. Training.** Nursing staff are to actively participate in the instruction to each person and staff in methods of infection control, in detecting signs and symptoms of illness or dysfunction, first aid for accidents or illness, and basic skills required to meet the health needs. ( )

**05. License to Practice.** Nurses providing services in the facility must have a current license to practice in the state. ( )

**06. Sufficient for Needs.** The facility must employ or arrange for licensed nursing services sufficient to care for each person's health needs. A licensed nurse, who is trained in the use of the facility's emergency equipment, must be available for emergency treatment, whenever there is a person in the facility. ( )

**07. Licensed Registered Nurses (RNs).** The facility must utilize licensed registered nurses (RNs) as appropriate and required by state law to perform the health services specified in this Section. ( )

**08. Consultation.** If the facility utilizes licensed practical or vocational nurses to provide health services, it must have a formal arrangement with a licensed registered nurse (RN) to be available for verbal or onsite consultation to the licensed practical or vocational nurse. ( )

**09. Unlicensed Nursing Personnel.** Unlicensed personnel who provide health care services must do so under the supervision of licensed personnel. ( )

**603. – 609. (RESERVED)**

**610. DENTAL SERVICES.**

The facility must provide or arrange for diagnostic and treatment services for each person from qualified personnel, including licensed dentists and dental hygienists either through organized dental services in-house or through arrangement. The facility must ensure comprehensive dental treatment services that include: ( )

**01. Emergency Treatment.** The availability for emergency dental treatment on a 24-hour a day basis by a licensed dentist; ( )

**02. General Dental Care.** Dental care needed for relief of pain and infections, restoration of teeth, and maintenance of dental health; and ( )

**03. Diagnostic Services.** Comprehensive dental diagnostic services must include: ( )

**a.** A complete extra-oral and intra-oral examination, using all diagnostic aids necessary to properly evaluate the person's condition not later than one (1) month after admission to the facility; ( )

**b.** Periodic examination and diagnosis performed at least annually; ( )

**c.** Radiographs when indicated and detection of manifestations of systemic disease; and ( )

**d.** A review of the results of the examination and entry of the results in the person's dental record. ( )

**611. PHARMACY SERVICES.**

The facility must provide or arrange for the provision of routine and emergency drugs and biologicals for each person. Drugs and biologicals may be obtained from community or contract pharmacists. ( )

**01. Drug Regimen Review.** A pharmacist with input from the Interdisciplinary Team (IDT) must review the drug regimen of each person at least quarterly. The pharmacist must: ( )

**a.** Report any irregularities, black box warnings, and off-label uses in each person's drug regimens to the prescribing physician and Interdisciplinary Team (IDT); ( )

**b.** Prepare a record of each person's drug regimen reviews, which must be obtained by the facility; and ( )

**c.** Participate, as appropriate, in the development, implementation, and review of each person's

Individual Treatment Plan (ITP) either in person or through written report to the Interdisciplinary Team (IDT). ( )

**02. Medication Administration Record.** An individual medication administration record must be maintained for each person. ( )

**03. Organized System.** The facility must have an organized system for drug administration that identifies each drug up to the point of administration. The system must ensure the following: ( )

**a.** All drugs are administered in compliance with the physician's orders; ( )

**b.** All drugs, including those that are self-administered, are administered without error; ( )

**c.** Unlicensed personnel administer only those forms of medication that state law permits; and ( )

**d.** Drug administration errors and adverse drug reactions are recorded and reported immediately to a physician. ( )

**04. Drug Storage.** The facility must store drugs under proper conditions of sanitation, temperature, light, and humidity. ( )

**05. Drug Security.** The facility must keep all drugs and biologicals secured according to federal and state law, except when being prepared for administration. Only authorized personnel may have access to the keys to the drug storage area. ( )

**06. Controlled Drugs.** The facility must maintain records of the receipt and disposition of all controlled drugs. The facility must follow federal and state requirements for the reconciliation of controlled drugs. ( )

**07. Drug Labeling.** Labeling of drugs and biologicals must be based on currently accepted professional principles and practices and include the appropriate accessory and cautionary instructions, as well as the expiration date, if applicable. ( )

**08. Drugs Removed from Use.** The facility must ensure outdated drugs and drug containers with worn, illegible, or missing labels are removed from use. ( )

**09. Discontinued Drugs.** Drugs and biologicals packaged in containers designated for a particular person must be immediately removed from the person's current medication supply if discontinued by the physician. ( )

**10. Self-Administration of Medication.** Each person is taught to administer his own medications if the Interdisciplinary Team (IDT) determines that self-administration of medications is an appropriate objective, and if the physician does not specify otherwise. ( )

**a.** The person's physician must be informed of the Interdisciplinary Team's decision that self-administration of medications is an objective for the person; and ( )

**b.** No person self-administers medication until he demonstrates the competency to do so. ( )

**612. LABORATORY SERVICES.** The facility must arrange for the provision of laboratory services. ( )

**01. Certification Required.** Laboratory services must be provided from a laboratory certified in the appropriate specialties and subspecialties of service necessary to meet each person's needs. ( )

**02. Waived Tests.** A facility performing any laboratory service or test must have applied to and ( )

received a Certificate of Waiver, Certificate of Compliance, or Certificate of Accreditation. ( )

**613. – 699. (RESERVED)**

**700. STANDARD OF LICENSURE: DIETETIC SERVICES.**

Each person must receive a nourishing, well-balanced diet including modified and specially prescribed diets. Unless otherwise specified by medical needs, the diet must be prepared at least according to the latest edition of the recommended dietary allowances of the Idaho Diet Manual as incorporated in Section 004 of these rules, adjusted for age, sex, disability, religious belief, and activity. Food purchase, storage, preparation, and service may be provided directly by the facility or under a written agreement with an outside service provider. If provided according to written agreement, the facility must ensure the outside service provider complies with all applicable rules. ( )

**701. QUALIFIED DIETICIAN.**

A qualified dietitian must be employed full-time, part-time, or on a consultant basis at the facility's discretion. If a qualified dietitian is not employed full-time, the facility must designate a staff member to serve as the director of food services, who is a certified food protection manager. ( )

**702. MENUS.**

The dietitian must ensure menus are prepared in advance, provide a variety of foods at each meal, be different for the same days of each week and adjusted for seasonal changes, and include average portion sizes for menu items. Records of food actually served must be kept on file for thirty (30) days. ( )

**703. PURCHASING AND STORAGE OF FOOD.**

Food provided directly or under written agreement must be purchased and stored, as follows: ( )

**01. Food Source.** All food and drink must be obtained from an approved source identified in IDAPA 16.02.19, "Food Safety and Sanitation Standards for Food Establishments"; ( )

**02. Record of Food Purchases.** At a minimum, a record of food purchases that includes invoices for the preceding thirty (30) day period must be kept; and ( )

**03. Temperature Requirements.** Each refrigerator and freezer must be equipped with a reliable, easily read thermometer to ensure the following guidelines are met: ( )

**a.** Refrigerators must be maintained at forty-one (41°F) degrees Fahrenheit or below; and ( )

**b.** Freezers must be maintained at ten (10°F) degrees Fahrenheit or below. ( )

**704. DIET ORDERS.**

The person's Interdisciplinary Team (IDT), including a qualified dietitian and physician must prescribe: ( )

**01. Modified and Special Diets.** All modified and special diets, including those used as a part of a program to manage inappropriate behavior; and ( )

**02. Proposed Foods for Reinforcement of Adaptive Behavior.** Foods proposed for use as a primary reinforcement of adaptive behavior are evaluated in light of the person's nutritional status and needs. ( )

**705. FOOD PREPARATION.**

Food provided directly or according to written agreement must be prepared in a safe and sanitary manner and comply with IDAPA 16.02.19, "Food Safety and Sanitation Standards for Food Establishments." Food provided directly may be prepared in a location adjacent to the facility, away from care areas. ( )

**706. FOOD SERVICE.**

Each person must receive at least three (3) meals daily and nourishing snacks, at regular times comparable to normal mealtimes in the community. Food service may be provided directly or according to written agreement. ( )

**01. Food to Be Served.** ( )

- a. In appropriate quantity; ( )
  - b. At appropriate temperature; ( )
  - c. In a form consistent with the developmental level of the person; and ( )
  - d. In a palatable and attractive manner. ( )
- 02. Refusal of Food.** If a person refuses the food served, substitutions must be made within the same food group. ( )
- 03. Uneaten Food Served.** Food served to each person individually and uneaten must be discarded. ( )

**707. DINING AREAS, EQUIPMENT, AND SUPERVISION.**

Unless otherwise specified by the physician or IDT in the person's ITP, each person must receive meals in appropriately equipped dining areas. The facility must: ( )

- 01. Provide Table Service.** Provide table service for each person who can and will eat at a table, including people who use wheelchairs; ( )
- 02. Provide Proper Equipment and Furniture.** Equip areas with tables, chairs, eating utensils, and dishes designed to meet the developmental, behavioral, and mental health needs of each person; and ( )
- 03. Provide Sufficient Staff.** Provide sufficient staff to ensure the following: ( )
  - a. Supervise and direct self-help dining procedures; ( )
  - b. Ensure that each person receives enough food; ( )
  - c. Ensure that each person eats in a manner consistent with his developmental level; and ( )
  - d. Ensure that each person eats in an upright position. ( )

**708. – 799. (RESERVED)**

**800. STANDARD OF LICENSURE: PHYSICAL ENVIRONMENT.**

The requirements of Sections 800 through 899 of these rules are in addition to the NFPA's Life Safety Code and IDAPA 07.03.01, "Rules of Building Safety." In addition to compliance with the standards set forth herein, the facility must comply with all building codes, ordinances, and regulations that are enforced by city, county, or other local jurisdictions in which the facility is located, or will be located. ( )

**801. ENVIRONMENTAL SANITATION STANDARDS.**

The facility must ensure that its environment promotes the health, safety, and treatment of each person in the facility. ( )

**802. ENVIRONMENTAL STANDARDS – WATER, SEWER, AND GARBAGE.**

- 01. Water Supply.** The facility must have a water supply that is adequate, safe, and of a sanitary quality. The water supply must be from an approved public or municipal water supply. ( )
- 02. Adequate Water Supply.** The facility must have a sufficient amount of water under adequate pressure to meet sanitary and fire sprinkler system requirements of the facility at all times, according to the requirements in IDAPA 07.02.06, "Rules Concerning Idaho State Plumbing Code," and the NFPA Life Safety Code incorporated in Section 004 of these rules. ( )

**03. Sewage Disposal.** The facility must discharge all sewage and liquid wastes into a municipal sewage system. ( )

**04. Garbage and Refuse Disposal.** The facility must provide garbage and refuse disposal at its facility that meets the following requirements: ( )

**a.** The premises and all buildings must be kept free from accumulation of weeds, trash, and rubbish; ( )

**b.** Materials not directly related to the maintenance and operation of the facility must not be stored on the premises; ( )

**c.** All containers used for storage of garbage and refuse must be constructed of durable, nonabsorbent material, and must not leak. Containers must be provided with tight-fitting lids unless stored in a vermin-proof room or enclosure; ( )

**d.** Garbage containers must be maintained in a sanitary manner. Sufficient containers must be afforded to hold all garbage and refuse that accumulates between periods of removal from the facility; and ( )

**e.** Storage areas must be kept clean and sanitary. ( )

**803. ENVIRONMENTAL STANDARDS – CHEMICALS AND PESTICIDES.**

**01. Rodent and Pest Control.** The facility must be maintained free from insects, rodents, vermin, and other pests. ( )

**a.** Chemicals and pesticides must be selected on the basis of the pest involved and used only in the manner prescribed by the manufacturer that is registered with the Idaho Department of Agriculture; and ( )

**b.** Chemicals and pesticides used in the facility's pest control program must be used and stored to meet local, state, federal requirements, and must be stored outside of the facility. ( )

**02. Chemical Storage.** All toxic chemicals must be properly labeled and stored outside of the building in a secured shed when not in use. Toxic chemicals must not be stored in individual areas, with drugs, or in any area where food is stored, prepared, or served. ( )

**804. ENVIRONMENTAL STANDARDS – LINENS AND LAUNDRY SERVICES.**

**01. Linens Provided.** The facility must have available at all times a quantity of linens sufficient for the proper care and comfort of its persons according to their ITPs. The linens must: ( )

**a.** Be of good quality, not threadbare, torn, or badly stained; and ( )

**b.** Be handled, processed, and stored in an appropriate manner that prevents contamination. ( )

**02. Laundry Facilities.** The facility must have adequate laundry facilities for the sanitary washing and drying of the linens and other washable goods laundered in the facility. A person's personal laundry must be collected, sorted, washed, and dried in a sanitary manner, and must not be washed with the general linens. The laundry area must: ( )

**a.** Be situated in an area separate and apart from where food is stored, prepared, or served; ( )

**b.** Be well-lighted and ventilated; ( )

**c.** Be adequate in size for the needs of the facility; ( )



- d. Be maintained in a sanitary manner; and ( )
- e. Be kept in good repair. ( )

**805. ENVIRONMENTAL STANDARDS – HOUSEKEEPING SERVICES.**

The facility must have sufficient housekeeping and maintenance personnel and equipment to maintain the interior and exterior of the facility in a safe, clean, orderly, and attractive manner. ( )

**01. Facility Interior.** Floors, walls, ceilings, and other interior surfaces, equipment, and furnishings must be maintained in a clean and sanitary manner. ( )

**02. Housekeeping Procedures.** The facility must have written procedures for cleaning surfaces and equipment that is explained to each person engaged in housekeeping duties. ( )

**03. Requirements after Discharge.** After discharge of a person, the facility must ensure that the person's room is thoroughly cleaned, including the bed, bedding, linens, and furnishings. ( )

**04. Deodorizers.** Deodorizers and other products must not be used to cover odors caused by poor housekeeping or unsanitary conditions. ( )

**05. Housekeeping Equipment.** All housekeeping equipment must be in good repair and maintained in a clean and sanitary manner. ( )

**806. – 829. (RESERVED)**

**830. PHYSICAL FACILITY STANDARDS CONSTRUCTION REQUIREMENTS.**

The facility must comply with IDAPA 07.03.01, “Rules of Building Safety,” or with locally adopted code when more stringent. In addition to the construction and the physical facility standards for new construction, a facility must also comply with applicable Sections of these rules. Additions to existing facilities and portions of facilities undergoing remodeling or alterations other than repairs, must meet the NFPA Life Safety Code, as incorporated in Section 004 of these rules. ( )

**831. REQUIREMENTS FOR BUILDING CONSTRUCTION AND PHYSICAL STANDARDS.**

The goals of these rules are to provide an environment for the occupants that are reasonably safe from fire and similar emergencies. ( )

**01. Facility Life Safety Code Requirements.** ( )

**a.** The facility must meet the provisions of the NFPA Life Safety Code as incorporated in Section 004 of these rules, applicable to facility. ( )

**b.** The facility must be constructed to house persons and staff on the first floor only. ( )

**02. Plans and Specifications.** Plans and specifications for the proposed new facility construction, any addition or remodeling are governed by the following: ( )

**a.** Plans must be prepared by an architect or engineer licensed in the state of Idaho. A variance of this requirement may be granted by the Licensing and Survey Agency when the size of the project does not necessitate involvement of an architect or engineer; ( )

**b.** Plans and specifications must be submitted to the Licensing and Survey Agency to ensure compliance with applicable construction standards, codes, and regulations; ( )

**c.** Plans must be drawn to scale but not less than a scale of one-eighth (1/8) inch to one (1) foot; ( )

**d.** Plans may be submitted electronically; ( )

- e. Plans must use the physical address as approved by the city; ( )
- f. Plans must include life safety plans; ( )
- g. Plans must include fire alarm shop drawings; and ( )
- h. Plans must include fire sprinkler system drawings and calculations. ( )

**03. Approval by Department's Division of Licensing and Certification.** The Department's Division of Licensing and Certification will review and approve plans and specifications to ensure compliance with the applicable construction standards, codes, rules, and regulations prior to beginning any construction work. ( )

**04. Toilet and Bathrooms.** The facility must provide sanitary facilities that prevent self-harm to persons and include at least one (1) public toilet, tub or shower, and lavatory in each building. ( )

- a. A toilet and bathroom for a person's use must be arranged so that it is not necessary for an individual to pass through another person's room to reach the toilet or bath; ( )
- b. Solid walls must separate each toilet and bathroom from all adjoining rooms; ( )
- c. Floors must be seamless and sealed; ( )
- d. Mechanical ventilation must vent to the outside; ( )
- e. Touch-tap systems must be installed for sinks; ( )
- f. Water shutoff valve must be located outside the rooms; ( )
- g. All light switches must be automatic; ( )
- h. Toilet must have no exposed piping; ( )
- i. Toilets must be of an electronic type with flood control devices; ( )
- j. Toilets must have fixed seats; ( )
- k. Lavatories must have solid surface material with an integral sink; ( )
- l. Shower controls must be recessed stainless steel panels; ( )
- m. Accessible (ADA) showers must have a dual head; ( )
- n. Showers must be designed to prevent the need for shower curtains; and ( )
- o. Floor drains must be sealed. ( )

**05. Electrical Installations and Emergency Lighting.** Electrical installations and emergency lighting must be installed according to the manufacturer's specification and NFPA Life Safety Code and mandatory references therein, incorporated in Section 004 of these rules. ( )

- a. Maintain all electrical equipment in good repair and safe operating condition; ( )
- b. Electrical Panels installed inside the facility must be secured with a suitable keyed locking device and the keys must be accessible only to authorized personnel only; ( )
- c. The use of any type of extension cords, relocatable power taps, outlet strips, multi-plug adapters are

strictly prohibited inside or outside the facility or facility grounds; ( )

**d.** Emergency power must be arranged to provide the required power automatically in the event of any interruption of normal power; and ( )

**e.** The emergency power must be arranged to automatically operate within ten (10) seconds upon failure of normal power and to maintain the necessary power source for a minimum of ninety (90) minutes. ( )

**06. Lighting.** The facility must provide adequate lighting in all persons' sleeping rooms, dining rooms, living rooms, recreation rooms, and hallways. ( )

**07. Ventilation.** The facility must be ventilated and precautions must be taken to prevent offensive odors. ( )

**08. Plumbing.** All plumbing in the facility must comply with local and state codes. All plumbing fixtures must be easily cleanable and maintained in good repair. The temperature of hot water at plumbing fixtures used by persons must be between one hundred five degrees (105°F) Fahrenheit and one hundred twenty degrees (120°F) Fahrenheit. ( )

**09. Heating, Air Conditioning, and Ventilation.** Heating, air conditioning, piping, boilers, and ventilation equipment must be furnished, installed, and maintained to meet all requirements of current state and local mechanical, electrical, and construction codes. ( )

**832. – 839. (RESERVED)**

**840. STRUCTURE, MAINTENANCE, EQUIPMENT TO ENSURE SAFETY.**

The facility must be structurally sound, maintained, and equipped to ensure the safety of persons, personnel, and the public and must be in compliance with the NFPA Life Safety Code incorporated in Section 004 of these rules. In addition, the following special requirements for a secured facility must be provided: ( )

**01. Doors.** Doors must be made of a material that cannot be easily damaged by pulling off pieces that could be used for harmful purposes and must meet the requirements of the NFPA Life Safety Code and include the following requirements: ( )

**a.** Door must be swing outward with hinges mounted on outside; ( )

**b.** Solid core wood or steel; ( )

**c.** Door handles (if applicable) must be located on the exterior of the door; ( )

**d.** Lock with keyed (manual or electronic) entry only and that is equipped with a device that automatically disengages in case of an emergency; ( )

**e.** All doors will limit the passage of smoke; and ( )

**f.** Doors must be ligature-resistant. ( )

**02. Portable Heating Devices.** Portable heating devices of any kind are prohibited to include portable electric space heaters, movable fuel-fired heaters, electric fire places, and heating pads or blankets. ( )

**03. Wall Projections.** Placement of items on the wall must prohibit ligature. ( )

**a.** Drinking fountains are to be secured to the wall and visible to staff; and ( )

**b.** Wall mounted thermostat must not be placed in a person's room. ( )

**04. Light Fixtures.** Light fixture coverings must be secure and of break-resistant material. Tamper-

resistant screws or attachment devices must be used, and the light fixtures are not to create an anchor point. Lighting and other ceiling mounted items are to be recessed or surface mounted to the ceiling with vandal-resistant fixtures and pull chains are not permitted. ( )

a. Except for emergency egress lighting, all artificial lighting must be controllable by switches or automatic sensors; ( )

b. Lighting must be provided for all rooms and include safety features; ( )

c. Staff must have the ability to dim the light rather than turning on a full overhead light in the room to observe the person; and ( )

d. Light switches must be located on the outside of the person's sleeping room. ( )

**05. Window Frames.** Frames must be tamper-resistant and shatter-resistant and tested to make sure that they cannot be broken apart. ( )

**06. Window Coverings.** Shades or blinds must: ( )

a. Be located inside of window panes; ( )

b. Not contain attached cords or ropes, and curtains must not be used; ( )

c. Have hardware that is flush with the wall; and ( )

d. Be tamper-proof. ( )

**07. Dietary Facilities.** The food service facilities and equipment must comply with IDAPA 16.02.19, "Food Safety and Sanitation Standards for Food Establishments," and food service facilities must be designed and equipped to meet the requirements of the facility. These may consist of an onsite conventional food preparation system, a convenience food service system, or an appropriate combination thereof. ( )

**08. Functional Elements for Food Services.** The following facilities must be provided and be appropriately sized to implement the type of food service system selected: ( )

a. Control station for receiving food supplies; ( )

b. Storage space to accommodate a one (1) week supply of staple foods and a two (2) day supply of perishable foods; ( )

c. Food preparation facilities as required by the program. Conventional food preparation systems require space and equipment for preparing, cooking, and baking. Convenience food service systems such as frozen prepared meals, bulk-packaged entrées, individually packaged portions, or systems using contractual commissary services will require space and equipment for thawing, portioning, cooking or baking, or both; ( )

d. Handwashing station in the food preparation area; ( )

e. Meal service space including facilities for tray assembly and distribution; ( )

f. Warewashing in a room or an alcove separate from food preparation and serving areas. This must include commercial type dishwashing equipment. Space must also be provided for receiving, scraping, sorting, and stacking soiled tableware and for transferring clean tableware to the using area. Handwashing facilities must be conveniently available; ( )

g. Pot washing facilities; ( )

h. Waste storage facilities that are easily accessible for direct pickup or disposal; ( )

- i. Office or suitable work space for the dietitian or food service supervisor; ( )
  - j. Toilets for dietary staff with handwashing facility immediately available; and ( )
  - k. Janitor's closet located within the dietary department. The closet must contain a floor receptor or service sink and storage space for housekeeping equipment and supplies. ( )
- 09. Dining Areas.** The facility must provide one (1) or more attractively furnished, multi-purpose areas of an adequate size for person's dining, diversional, and social activities. Each area must be: ( )
- a. Well-lighted; ( )
  - b. Ventilated; and ( )
  - c. Equipped with tables and chairs that are secured or heavy enough to prevent from lifting and have easily cleanable surfaces. ( )
- 10. Bathroom Accessories.** ( )
- a. Mirrors in a person's bathrooms must be reflective polycarbonate with a stainless steel frame firmly anchored to the wall. No shelf is to be part of this frame assembly; ( )
  - b. Toilet paper holder must be ligature-resistant spindle button recessed; ( )
  - c. Grab bars, as required for accessible rooms, must be fixed to the wall with a welded horizontal plate on the bottom of the bar. No swinging grab bars are to be used; ( )
  - d. Clothing or towel hooks must be designed to collapse when any weight above four (4) pounds; ( )
  - e. Paper towel dispensers, if installed, must be recessed; and ( )
  - f. Soap dispensers must be wall-mounted with sloped tops or a suitable recessed dispenser. ( )
- 11. Storage Areas.** The facility must provide general storage areas. ( )
- a. Suitable storage must be provided for personal clothing, possessions, and individual adaptive equipment; ( )
  - b. Safe and adequate storage space must be provided for medical supplies and an area appropriate for the preparation of medications; and ( )
  - c. Medical gases must be stored and labeled in racks or fastenings to protect cylinders from accidental damage or dislocation. ( )
- 12. Accessibility for Persons with Mobility and Sensory Impairments.** For persons with mobility or sensory impairments, the facility must provide a physical environment that meets the needs of the person for independent mobility and use of appliances, bathroom facilities, and living areas. Construction must meet the requirements of the Americans with Disabilities Act Accessibility Guidelines (ADAAG). Existing facilities must comply, to the maximum extent feasible, with 28 CFR Sections 36.304 and 36.305 regarding removal of barriers according to the Americans with Disabilities Act, without creating an undue hardship or burden on the facility, and must provide as required, the necessary accommodations: ( )
- a. Ramps for persons who require assistance with ambulation must comply with the requirements of the ADAAG; and ( )

b. Bathrooms and doors large enough to allow the easy passage of a wheelchair as provided for in the ADAAG 4.13. ( )

**13. Emergency Medical Equipment.** The facility medical staff and program administration must develop, implement, and monitor policies and procedures to specify the types of emergency equipment required for use in the facility and must be immediately available for use during emergency situations and be appropriate for the facility's population. The facility at a minimum must be able to provide a suction machine, AED, and crash cart. ( )

**841. PHYSICAL FACILITY STANDARDS – PROTECTION.**

The facility must meet the provisions of NFPA Life Safety Code, as incorporated in Section 004 of these rules, applicable to facility. In addition, the following special requirements for the facility must be included: ( )

**01. Manual Fire Alarm Pull Stations.** Manual fire alarm pull stations can be permitted to be locked, provided that staff is present within the area when it is occupied and staff has keys readily available to unlock the boxes. ( )

**02. Alarm Notification.** Alarm notification (audible and visible) must be provided throughout the entire facility and must be ceiling-mounted. ( )

**03. Fire Sprinkler Systems.** For the purpose of this rule, the facility must meet the provisions of NFPA Life Safety Code, as incorporated in Section 004 of these rules, as applicable to facility. ( )

**04. Portable Fire Extinguishers.** For the purposes of this rule, the facility must meet the applicable provisions of NFPA Life Safety Code, as incorporated in Section 004 of these rules. In addition, the facility must meet the following special requirements: ( )

a. Access to portable fire extinguishers must be locked and key must be with all staff members; ( )

b. Portable fire extinguishers can be permitted to be located at staff locations and be provided locked and keyed; and ( )

c. All staff members must be instructed in the proper use of portable fire extinguishers and other manual fire suppression equipment annually and new staff promptly upon commencement of duty. ( )

**05. Generators.** The facility must ensure that the building generator is designed to meet the applicable codes in NFPA Life Safety code, NFPA 99, Health Care Facilities Code, and NFPA Standard # 110, Standard for Emergency and Standby Power Systems 2010 Edition, as incorporated in Section 004 of these rules, applicable to this facility. ( )

**842. PHYSICAL FACILITY STANDARDS – INDIVIDUAL SLEEPING ROOMS AND ACCOMMODATIONS REQUIREMENTS.**

The facility must furnish and maintain in good repair accommodations for each person as incorporated in Section 004 of these rules, applicable to this facility. In addition, the facility must meet the following special requirements: ( )

**01. Personal Rooms.** Personal sleeping rooms are not in attics, stairs, halls, or any other room commonly used for other than bedroom purposes, and must have direct access to an exit corridor; ( )

**02. Bed Requirements.** ( )

a. Beds must have a mattress and be low-profile type so that it cannot be used by the person to reach the ceiling. ( )

b. Beds must be a heavy-duty platform bed with rounded edges and bolted to the floor and must be of

proper size and height for convenience of person; ( )

c. Beds and bedding must be clean and appropriate to weather and climate; ( )

d. Beds must not contain anchor points or floor guards that can be removed by persons and used as a weapon or for self-harm; ( )

e. Pillows and mattresses must not have covers that can be easily removed by the person and used for suffocation; and ( )

f. Beds must have nonelastic fitted sheets or a standard flat bed sheet. ( )

**03. Closet Requirements.** Closets must contain racks, shelves accessible to persons, secured with tamper-resistant fasteners, and designed so they cannot be used as an anchor point. ( )

**04. Activity Areas.** The facility must provide recreational space. ( )

a. Equipment used by persons while supervised, such as computer equipment, and other facility equipment, must be located in rooms that can be locked when not in use. ( )

b. Activity areas must be free of all protrusions, sharp corners, hardware, fixtures, or other devices. ( )

**05. Outdoor Environment.** Security and safety for outdoor spaces used by persons are as follows: ( )

a. A courtyard is preferred over fenced areas for aesthetic, privacy, and security reasons. If a fence is utilized, it is to be securely anchored at the bottom; ( )

b. A minimum enclosure height of fourteen (14) feet (4.27 meters), if applicable; ( )

c. Exits, service gates, or doors are to be strong enough to withstand force and are to be locked and alarmed; ( )

d. Trees within the area must not facilitate climbing over a wall or fence; ( )

e. Shrubs are to be small and low enough that a person cannot hide behind them; ( )

f. Do not use rocks, gravel, dirt, and other planting bed or pathway materials that could be used as a weapon; ( )

g. Outdoor furniture will either be anchored to concrete pads or too heavy to be moved and must be located to prevent escape; ( )

h. All exposed fasteners in the courtyard area must receive tamper-resistant screws; and ( )

i. Exterior light poles must be prohibited near the exterior perimeter of the enclosed yard or courtyard. ( )

**843. FIRE AND LIFE SAFETY STANDARDS – EMERGENCY EGRESS AND RELOCATION.**

Emergency egress and relocation standards must be maintained according to the code and mandatory references therein, incorporated in Section 004 of these rules. In addition, the facility must meet the following special requirements: ( )

**01. Exits.** All exits must discharge into a fenced or walled courtyard, provided that not more than two (2) walls of the courtyard are the building walls from which egress is being made. ( )

**02. Enclosed Yards or Courtyards.** Courtyards used for exit discharge must be of sufficient size to accommodate all occupants at a distance of not less than fifty (50) feet. ( )

**03. Furnishings, Decorations, or Other Objects.** No items may be placed to obstruct exit access, exits, or exit discharge; ( )

**04. Access.** Doors leading to the exterior must be permitted to be locked with key locks. The keys to unlock such doors must be maintained and available at the facility at all times, and the locks must be operable from the outside. ( )

**a.** All keys necessary for unlocking doors installed in a means of egress must be individually identified by both touch and sound. ( )

**b.** Where egress doors are locked with key-operated locks, doors and door hardware used for egress must be inspected monthly. ( )

**c.** A manual release is required on both sides of the locked doors. ( )

**844. FIRE AND LIFE SAFETY STANDARDS – OPERATING FEATURES.**

Operating feature standards must be maintained according to the code and mandatory references therein, incorporated in Section 004 of these rules. In addition, the facility must meet the following special requirements: ( )

**01. Emergency Plans.** The facility must develop and implement detailed written plans and procedures to meet all potential emergencies and disasters. ( )

**a.** The written emergency plan for the facility must contain a diagram of the building showing emergency protection equipment, evacuation routes, exits, and assembly points. This diagram must be conspicuously posted in a common area within the facility. An outline of emergency instructions must be posted with the diagram. ( )

**b.** A written fire safety plan must provide for all of the following: ( )

i. Use of alarms; ( )

ii. Transmission of alarms to fire department; ( )

iii. Emergency phone call to fire department; ( )

iv. Response to alarms; ( )

v. Isolation of fire; ( )

vi. Evacuation of immediate area; ( )

vii. Evacuation of smoke compartment (if applicable); ( )

viii. Preparation of floors and building for evacuation; and ( )

ix. Extinguishment of fire. ( )

**c.** The facility must periodically review the written emergency plan and thoroughly test it to ensure rapid and efficient function of the plan. ( )

**d.** The facility must hold unannounced evacuation drills at least quarterly for each shift of personnel for a total of no less than twelve (12) per year. The evacuation drills must be irregularly scheduled throughout all shifts and under varied conditions. The facility must actually evacuate persons into the secured courtyard or secured fenced area during at least one (1) drill each shift for each month. ( )



e. The facility must document evacuation drills, cite the problems investigated, and take the appropriate corrective action for the identified problems. ( )

**02. Report of Fire.** The facility must submit to the Department's Division of Licensing and Certification a separate report of each fire incident that occurs within the facility within ten (10) days of the occurrence. The facility must use the Department's Division of Licensing and Certification's reporting form, "Facility Fire Incident Report," available online at: <http://www.facilitystandards.idaho.gov>. The facility must provide all specific data concerning the fire including the date, origin, extent of damage, method of extinguishment, and injuries, if any, for each fire incident. A reportable fire incident is when the facility has an incident that: ( )

a. Causes staff to activate the facility emergency plan, in whole, or in part; ( )

b. Causes an alarm throughout, causing staff or persons to activate the facility emergency plan, in whole, or in part; ( )

c. Causes a response by the fire department or emergency services to investigate an alarm or incident; ( )

d. Is unplanned in which persons are evacuated, prepared to evacuate, partially evacuated, or protected in place, due to smoke, fire, unknown gases/odors, or other emergency; or ( )

e. Results in an injury, burn, smoke inhalation, death, or other fire or emergency-related incident. ( )

**03. Fire Watch.** The facility must institute a fire watch during any time the fire alarm, smoke detection system is inoperable for greater than four (4) hours in a twenty-four (24) hour period, or during any time the fire sprinkler system is out of service for more than ten (10) hours in a twenty-four (24) hour period, or both. ( )

**04. Smoking Regulations.** Facility policies and procedures must include whether smoking is allowed. If the facility policy allows smoking, smoking regulations must be adopted and must include the following provisions: ( )

a. Smoking must be prohibited in any room, ward, or individual enclosed space where flammable liquids, combustible gases, or oxygen is used or stored and in any other hazardous location, and such areas must be posted with signs that read "NO SMOKING" or must be posted with the international symbol for no smoking. ( )

b. Smoking by persons classified as not responsible must be under direct supervision of a staff member. ( )

c. Ashtrays of noncombustible material and safe design must be provided in all areas where smoking is permitted. ( )

d. Metal containers with self-closing cover devices into which ashtrays can be emptied must be readily available to all areas where smoking is permitted. ( )

**845. – 859. (RESERVED)**

**860. VEHICLES.**

The facility must develop, implement, monitor, and maintain a written vehicle safety policy for each vehicle owned, leased, or used. The facility must have vehicle safety equipment, policies, and staffing requirements that meet the following requirements: ( )

**01. Preventative Maintenance Program.** The establishment of a preventative maintenance program for each vehicle; ( )

**02. Vehicle Inspections.** Vehicle inspections and other regular maintenance needed to ensure person's safety; ( )

**03. Accessory Inspections.** Inspection of wheelchair lifts, securing devices, and other devices necessary to ensure person's safety. ( )

**04. Fire Extinguishers, Maintenance, and Inspections.** Vehicle mounted fire extinguishers must be inspected when initially placed in service and in thirty (30) day intervals, and must be subject to maintenance at intervals of not more than one (1) year. ( )

**05. Staff Requirement.** There must be two (2) staff members assigned for transport of each person; and ( )

**06. Driver.** One (1) driver. ( )

**861. – 869. (RESERVED)**

**870. INFECTION CONTROL.**

The facility must provide a sanitary environment to avoid sources and transmission of infections. The facility must provide the following: ( )

**01. Active Program Requirement.** Develop, implement, and monitor an active program for the prevention, control, and investigation of infection and communicable diseases; ( )

**02. Implement Corrective Action.** Implement successful corrective action in affected problem areas; ( )

**03. Record of Incidents and Corrective Action.** Maintain a record of incidents and corrective actions related to infections; ( )

**04. Employee with Signs of Illness.** Prohibit employees with symptoms or signs of a communicable disease from direct contact with persons and their food; and ( )

**05. Reportable Diseases.** Report diseases as required according to state law. ( )

**871. – 899. (RESERVED)**

**900. STANDARD OF LICENSURE: QUALITY ASSESSMENT AND PERFORMANCE IMPROVEMENT.**

The facility must develop, implement, and maintain an ongoing and data-driven Quality Assessment and Performance Improvement (QAPI) program. ( )

**901. PROGRAM SCOPE AND DATA COLLECTION.**

The program must be ongoing and demonstrate measurable improvement in a person's outcomes and safety by using quality indicators or performance measures. ( )

**01. Data Collection.** The facility must collect quality indicator data in sufficient form and frequency to determine the quality of services and identify opportunities for improvement. Quality indicators must include: ( )

**a.** Quality of services provided directly and under agreement including an adherence to trauma informed care principals and person centered care principals; ( )

**b.** Incidents and accidents; ( )

**c.** Grievances; ( )

- d. Allegations of abuse, neglect, and mistreatment; ( )
- e. Physical restraint use, including emergency use; ( )
- f. Medication to manage mental health or inappropriate behavioral use, including emergency chemical restraints and as needed medications; and ( )
- g. Areas identified by the facility as high-risk, high-volume, or problem-prone based on the prevalence and severity of incidents and negative impacts to a person's safety and quality of care. ( )

**02. Establish Measurable Goals.** The facility must establish measurable goals for all quality indicators that are being tracked. ( )

**902. PROGRAM DATA ANALYSIS.**  
Quality indicator data must be regularly analyzed to: ( )

**01. Monitor Effectiveness and Safety.** Monitor the effectiveness and safety of the facility's services and quality of care; and ( )

**02. Identify Opportunities.** Identify opportunities that could lead to improvements and changes in a person's care that include those areas that are not meeting established goals. ( )

**903. IMPLEMENTING AND MONITORING CHANGES MADE AS A RESULT OF DATA ANALYSIS.**  
Based on the data analysis, the facility must: ( )

**01. Develop Changes.** Develop and implement changes in areas identified in need of improvement ( )

**02. Monitor to Ensure that Changes Were Effective.** Monitor to ensure the changes were effective in achieving established goals; and ( )

**03. Monitor to Ensure Changes Are Sustained.** Monitor to ensure that improvements are sustained over time. ( )

**904. PERFORMANCE IMPROVEMENT PROJECTS.**  
A distinct improvement project must be conducted annually. The facility must document: ( )

**01. The Projects.** The project(s) that are being conducted; ( )

**02. The Reasons.** The reason(s) for implementing the project; and ( )

**03. Description.** A description of the project's results. ( )

**905. – 999. (RESERVED)**

**IDAPA 19 – IDAHO STATE BOARD OF DENTISTRY**  
**19.01.01 – RULES OF THE IDAHO STATE BOARD OF DENTISTRY**  
**DOCKET NO. 19-0101-1801**  
**NOTICE OF RULEMAKING – PROPOSED RULE**

**AUTHORITY:** In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section 54-912, Idaho Code.

**PUBLIC HEARING SCHEDULE:** Public hearing(s) concerning this rulemaking will be scheduled if requested in writing by twenty-five (25) persons, a political subdivision, or an agency, not later than May 16, 2018.

The hearing site(s) will be accessible to persons with disabilities. Requests for accommodation must be made not later than five (5) days prior to the hearing, to the agency address below.

**DESCRIPTIVE SUMMARY:** The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking:

A pending rule promulgated under Docket No. 19-0101-1701 was adopted by the Board on October 6, 2017, published in the November 1, 2017 Administrative Bulletin, and submitted for legislative review and approval during the 2018 legislative session. Errors made inadvertently during the promulgation of the proposed and pending rulemaking were discovered during the review of the pending rule. Because of this, the Board of Dentistry requested that the germane committees reject the rule so that the corrected rule could be re-promulgated.

Rule 19.01.01.004 is being amended to delete the American Dental Association's sedation-related documents as incorporated by reference. The rules regarding moderate sedation (19.01.01.060) are being amended by the addition of qualifying course requirements.

A temporary rule was adopted under this docket effective March 30, 2018 and published in the March 7, 2018 Idaho Administrative Bulletin, [Vol. No. 18-3, page 15](#). This rule is now being promulgated as a proposed rulemaking.

**FEE SUMMARY:** The following is a specific description of the fee or charge imposed or increased: N/A

**FISCAL IMPACT:** The following is a specific description, if applicable, of any negative fiscal impact on the state general fund greater than ten thousand dollars (\$10,000) during the fiscal year resulting from this rulemaking: N/A

**NEGOTIATED RULEMAKING:** Pursuant to Section 67-5220(1), Idaho Code, negotiated rulemaking was conducted when the rule was promulgated under Docket No. 19-0101-1701. The Notice of Intent to Promulgate Rules – Negotiated Rulemaking was published in the July 5, 2017 Idaho Administrative Bulletin, [Volume No. 17-7, page 69](#).

**INCORPORATION BY REFERENCE:** Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A

**ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS:** For assistance on technical questions concerning the proposed rule, contact Susan Miller, (208) 334-2369. Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before May 23, 2018.

Dated this 6th day of April, 2018.

Susan Miller  
Executive Director  
Phone: (208) 334-2369  
Fax: (208) 334-3247

Idaho Board of Dentistry  
350 N. 9th St., Ste. M100  
P.O. Box 83720  
Boise, ID 83720-0021

Pursuant to Section 67-5221(1), Idaho Code, this docket is being published as a proposed rule.

This docket has been previously published as a temporary rule.  
The temporary effective date is March 30, 2018.

The original text of the temporary rule was published in the Idaho Administrative Bulletin,  
Volume 18-3, March 7, 2018, pages 15 through 21.

**THE FOLLOWING IS THE TEXT OF THE PROPOSED RULE FOR DOCKET NO. 19-0101-1801**  
**(Only Those Sections With Amendments Are Shown.)**

**004. INCORPORATION BY REFERENCE (RULE 4).**

Pursuant to Section 67-5229, Idaho Code, this chapter incorporates by reference the following documents: (7-1-93)

**01. Professional Standards. (3-29-12)**

**a.** American Association of Oral and Maxillofacial Surgeons, Office Anesthesia Evaluation Manual, 8th Edition, 2012. (3-20-14)

~~**b.** American Dental Association, Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students, October 2007. (4-7-11)~~

~~**c.** American Dental Association, Guidelines for the Use of Sedation and General Anesthesia by Dentists, October 2007. (4-7-11)~~

~~**d.** American Dental Association Policy Statement: The Use of Sedation and General Anesthesia by Dentists, October 2007. (4-7-11)~~

~~**eb.** Centers for Disease Control and Prevention, DHHS, Guidelines for Infection Control in Dental Health-Care Settings, 2003. (4-6-05)~~

~~**fc.** American Dental Association, Principles of Ethics, Code of Professional Conduct and Advisory Opinions (ADA Code), January 2009. (4-7-11)~~

~~**gd.** American Dental Hygienists' Association, Code of Ethics for Dental Hygienists (ADHA Code), June 2009. (4-7-11)~~

~~**he.** American Dental Hygienists' Association, Standards for Clinical Dental Hygiene Practice, March 10, 2008. (4-7-11)~~

**02. Availability.** These documents are available for public review at the Idaho State Board of Dentistry, 350 North 9th Street, Suite M-100, Boise, Idaho 83720. (3-29-12)

**(BREAK IN CONTINUITY OF SECTIONS)**

**060. MODERATE SEDATION (RULE 60).**

Dentists licensed in the state of Idaho cannot administer moderate sedation in the practice of dentistry unless they have obtained the proper moderate sedation permit from the Idaho State Board of Dentistry. A moderate sedation permit may be either enteral or parenteral. A moderate enteral sedation permit authorizes dentists to administer

moderate sedation by either enteral or combination inhalation-enteral routes of administration. A moderate parenteral sedation permit authorizes a dentist to administer moderate sedation by any route of administration. A dentist shall not administer moderate sedation to children under sixteen (16) years of age and one hundred (100) pounds unless they have qualified for and been issued a moderate parenteral sedation permit. (3-29-12)

**01. Training Requirements for a Moderate ~~Enteral~~ Sedation Permit.** To qualify for a moderate ~~enteral~~ sedation permit, a dentist applying for a permit shall provide proof that the dentist has completed training in the administration of moderate sedation to a level consistent with that prescribed ~~in the American Dental Association's "Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students," as incorporated in Section 004 in these rules~~ by the Board within the five (5) year period immediately prior to the date of application for a moderate sedation permit. The five (5) year requirement regarding the required training for a moderate ~~enteral~~ sedation permit shall not be applicable to applicants who hold an equivalent permit in another state which has been in effect for the twelve (12) month period immediately prior to the application date. ~~To obtain a moderate enteral sedation permit, a dentist must provide verification of~~ Qualifying training courses must be sponsored by or affiliated with a dental school accredited by the Commission on Dental Accreditation of the American Dental Association or be approved by the Board of Dentistry. The training program shall include the following: (4-11-15)(    )

~~a. Completion of an American Dental Association accredited or Board of Dentistry approved post-doctoral training program within five (5) years of the date of application for a moderate enteral sedation permit that included documented training of a minimum of twenty-four (24) hours of instruction plus management of at least ten (10) adult case experiences by the enteral and/or enteral nitrous oxide/oxygen route. These ten (10) cases must include at least three live clinical dental experiences managed by participants in groups no larger than five (5). The remaining cases may include simulations and/or video presentations, but must include one experience in returning a patient from deep to moderate sedation; and~~ Course objectives: (4-7-11)(    )

- ~~i. List and discuss the advantages and disadvantages of moderate sedation;~~ (    )
- ~~ii. Discuss prevention, recognition and management of complications associated with moderate sedation;~~ (    )
- ~~iii. Administer moderate sedation to patients in a clinical setting in a safe and effective manner;~~ (    )
- ~~iv. Discuss the abuse potential, occupational hazards and other untoward effects of the agents utilized to achieve moderate sedation;~~ (    )
- ~~v. Describe and demonstrate the technique of intravenous access, intramuscular injection and other parenteral techniques;~~ (    )
- ~~vi. Discuss the pharmacology of the drug(s) selected for administration;~~ (    )
- ~~vii. Discuss the precautions, indications, contraindications and adverse reactions associated with the drug(s) selected;~~ (    )
- ~~viii. Administer the selected drug(s) to dental patients in a clinical setting in a safe and effective manner;~~ (    )
- ~~ix. List the complications associated with techniques of moderate sedation;~~ (    )
- ~~x. Describe a protocol for management of emergencies in the dental office and list and discuss the emergency drugs and equipment required for the prevention and management of emergency situations;~~ (    )
- ~~xi. Discuss principles of advanced cardiac life support or an appropriate dental sedation/anesthesia emergency course equivalent;~~ (    )
- ~~xii. Demonstrate the ability to manage emergency situations; and~~ (    )

- xiii. Demonstrate the ability to diagnose and treat emergencies related to the next deeper level of anesthesia than intended. ( )
- b.** ~~Current certification in Advanced Cardiac Life Support.~~ Course Content: (4-11-15) ( )
  - i. Historical, philosophical and psychological aspects of anxiety and pain control; ( )
  - ii. Patient evaluation and selection through review of medical history taking, physical diagnosis and psychological considerations; ( )
  - iii. Use of patient history and examination for ASA classification, risk assessment and pre-procedure fasting instructions; ( )
  - iv. Definitions and descriptions of physiological and psychological aspects of anxiety and pain; ( )
  - v. Description of the sedation anesthesia continuum, with special emphasis on the distinction between the conscious and the unconscious state; ( )
  - vi. Review of pediatric and adult respiratory and circulatory physiology and related anatomy; ( )
  - vii. Pharmacology of local anesthetics and agents used in moderate sedation, including drug interactions and contraindications; ( )
  - viii. Indications and contraindications for use of moderate sedation; ( )
  - ix. Review of dental procedures possible under moderate sedation; ( )
  - x. Patient monitoring using observation and monitoring equipment, with particular attention to vital signs and reflexes related to consciousness; ( )
  - xi. Maintaining proper records with accurate chart entries recording medical history, physical examination, informed consent, time-oriented anesthesia record, including the names of all drugs administered including local anesthetics, doses, and monitored physiological parameters; ( )
  - xii. Prevention, recognition and management of complications and emergencies; ( )
  - xiii. Description and use of moderate sedation monitors and equipment; ( )
  - xiv. Discussion of abuse potential; ( )
  - xv. Intravenous access: anatomy, equipment and technique; ( )
  - xvi. Prevention, recognition and management of complications of venipuncture and other parenteral techniques; ( )
  - xvii. Description and rationale for the technique to be employed; and ( )
  - xviii. Prevention, recognition and management of systemic complications of moderate sedation, with particular attention to airway maintenance and support of the respiratory and cardiovascular systems. ( )
- c.** Hours of instruction: ( )
  - i. For a moderate enteral sedation permit, the applicant must provide proof of training with a minimum of twenty-four (24) hours of instruction plus management of at least ten (10) adult case experiences by the enteral and/or enteral-nitrous oxide/oxygen route. These ten (10) cases must include at least three live clinical dental experiences managed by participants in groups no larger than five (5). The remaining cases may include simulations

and/or video presentations, but must include one experience in returning a patient from deep to moderate sedation. ( )

ii. For a moderate parenteral sedation permit, the applicant must provide proof of training with a minimum of sixty (60) hours of instruction, plus management of at least twenty (20) patients by the intravenous route. ( )

**02. ~~Requirements for a Moderate Parenteral Sedation Permit.~~** ~~To qualify for a moderate parenteral sedation permit, a dentist applying for a permit shall provide proof that the dentist has completed training in the administration of moderate parenteral sedation as prescribed in the American Dental Association's "Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students," as incorporated in Section 004 of these rules within the five (5) year period immediately prior to the date of application for a moderate parenteral sedation permit. The five (5) year requirement shall not be applicable to applicants who hold an equivalent permit in another state which has been in effect for the twelve (12) month period immediately prior to the date of application. The training program shall:~~ **Advanced Cardiac Life Support. Applicants for a moderate sedation permit must provide verification of current certification in Advanced Cardiac Life Support or Pediatric Advanced life Support, whichever is appropriate for the patient being sedated.** (4-7-11)( )

~~a. Be sponsored by or affiliated with a dental school accredited by the Commission on Dental Accreditation of the American Dental Association or a teaching hospital or facility approved by the Board of Dentistry; and~~ (4-5-00)

~~b. Consist of a minimum of sixty (60) hours of instruction, plus management of at least twenty (20) patients by the intravenous route; and~~ (4-7-11)

~~c. Include the issuance of a certificate of successful completion that indicates the type, number of hours, and length of training received.~~ (3-18-99)

~~d. In addition, the dentist must maintain current certification in Advanced Cardiac Life Support or Pediatric Advanced Life Support, whichever is appropriate for the patient being sedated.~~ (3-29-17)

**03. General Requirements for Moderate Enteral and Moderate Parenteral Sedation Permits.** The qualified dentist is responsible for the sedative management, adequacy of the facility and staff, diagnosis and treatment of emergencies related to the administration of moderate sedation and providing the equipment, drugs and protocol for patient rescue. Evaluators appointed by the Idaho State Board of Dentistry will periodically assess the adequacy of the facility and competence of the anesthesia team. ~~The Board adopts the standards incorporated by reference in Section 004.01.c. and Section 004.01.d. of these rules as set forth by the American Dental Association.~~ (4-11-15)( )

a. Facility, Equipment and Drug Requirements. The following facilities, equipment and drugs shall be available for immediate use during the sedation and recovery phase: (4-11-15)

i. An operating room large enough to adequately accommodate the patient on an operating table or in an operating chair and to allow an operating team of at least two (2) individuals to freely move about the patient; (4-11-15)

ii. An operating table or chair that permits the patient to be positioned so the operating team can maintain the patient's airway, quickly alter the patient's position in an emergency, and provide a firm platform for the administration of basic life support; (4-11-15)

iii. A lighting system that permits evaluation of the patient's skin and mucosal color and a backup lighting system of sufficient intensity to permit completion of any operation underway in the event of a general power failure; (4-11-15)

iv. Suction equipment that permits aspiration of the oral and pharyngeal cavities and a backup suction device which will function in the event of a general power failure; (4-11-15)



- v. An oxygen delivery system with adequate full face mask and appropriate connectors that is capable of delivering high flow oxygen to the patient under positive pressure, together with an adequate backup system; (4-11-15)
- vi. A recovery area that has available oxygen, adequate lighting, suction and electrical outlets. The recovery area can be the operating room; (4-11-15)
- vii. A sphygmomanometer, pulse oximeter, oral and nasopharyngeal airways, supraglottic airway devices, and automated external defibrillator (AED); and (4-11-15)
- viii. Emergency drugs including, but not limited to, pharmacologic antagonists appropriate to the drugs used, bronchodilators, and antihistamines. (4-11-15)
- ix. Additional emergency equipment and drugs required for moderate parenteral sedation permits include precordial/pretracheal stethoscope or end-tidal carbon dioxide monitor, intravenous fluid administration equipment, vasopressors, and anticonvulsants. (3-29-17)
- b.** Personnel. For moderate sedation, the minimum number of personnel shall be two (2) including: (4-7-11)
- i. The operator; and (10-1-87)
- ii. An assistant currently certified in Basic Life Support for Healthcare Providers. (4-7-11)
- iii. Auxiliary personnel must have documented training in basic life support for healthcare providers, shall have specific assignments, and shall have current knowledge of the emergency cart inventory. The dentist and all office personnel must participate in documented periodic reviews of office emergency protocol, including simulated exercises, to assure proper equipment function and staff interaction. (4-11-15)
- c.** Pre-sedation Requirements. Before inducing moderate sedation, a dentist shall: (4-11-15)
- i. Evaluate the patient's medical history and document, using the American Society of Anesthesiologists Patient Physical Status Classifications, that the patient is an appropriate candidate for moderate sedation; (4-11-15)
- ii. Give written preoperative and postoperative instructions to the patient or, when appropriate due to age or psychological status of the patient, the patient's guardian; (4-11-15)
- iii. Obtain written informed consent from the patient or patient's guardian for the sedation; and (4-11-15)
- iv. Maintain an anesthesia record, and enter the individual patient's sedation into a case/drug log. (4-11-15)
- d.** Patient Monitoring. Patients shall be monitored as follows: (4-11-15)
- i. Patients must be continuously monitored using pulse oximetry. The patient's blood pressure, heart rate, and respiration shall be recorded every five (5) minutes during the sedation and then continued every fifteen (15) minutes until the patient meets the requirements for discharge. These recordings shall be documented in the patient record. The record must also include documentation of preoperative and postoperative vital signs, all medications administered with dosages, time intervals and route of administration. If this information cannot be obtained, the reasons shall be documented in the patient's record. A patient under moderate sedation shall be continuously monitored; (3-29-17)
- ii. During the recovery phase, the patient must be monitored by an individual trained to monitor patients recovering from moderate sedation; (4-11-15)

iii. A dentist shall not release a patient who has undergone moderate sedation except to the care of a responsible third party; (4-11-15)

iv. The dentist shall assess the patient's responsiveness using preoperative values as normal guidelines and discharge the patient only when the following criteria are met: vital signs are stable, patient is alert and oriented, and the patient can ambulate with minimal assistance; and (4-11-15)

v. A discharge entry shall be made by the dentist in the patient's record indicating the patient's condition upon discharge and the name of the responsible party to whom the patient was discharged. (4-11-15)

e. Sedation of Other Patients. The permit holder shall not initiate sedation on another patient until the previous patient is in a stable monitored condition and in the recovery phase following discontinuation of their sedation. (4-11-15)

f. Permit Renewal. Before the expiration date of a permit, the Board will, as a courtesy, mail notice for renewal of permit to the last mailing address on file in the Board's records. The licensee must return the completed renewal application along with the current renewal fees prior to the expiration of said permit. Failure to submit a renewal application and permit fee shall result in expiration of the permit and termination of the licensee's right to administer moderate sedation. Failure to submit a complete renewal application and permit fee within thirty (30) days of expiration of the permit shall result in cancellation of the permit. A licensee whose permit is canceled due to failure to renew within the prescribed time is subject to the provisions of Paragraph 060.03.g. of these rules. Renewal of the permit will be required every five (5) years. Proof of a minimum of twenty-five (25) credit hours continuing education in moderate sedation which may include training in medical/office emergencies will be required to renew a permit. A fee shall be assessed to cover administrative costs. In addition to the continuing education hours, a dentist must: (3-29-17)

i. For a moderate enteral sedation permit, maintain current certification in basic life support for healthcare providers or advanced cardiac life support; (4-11-15)

ii. For a moderate parenteral sedation permit, maintain current certification in advanced cardiac life support. (3-20-14)

g. Reinstatement. A dentist may make application for the reinstatement of a canceled or surrendered permit issued by the Board under this rule within five (5) years of the date of the permit's cancellation or surrender. Applicants for reinstatement of a permit shall satisfy the facility and personnel requirements of this rule and shall be required to verify that they have obtained an average of five (5) credit hours of continuing education in moderate sedation for each year subsequent to the date upon which the permit was canceled or surrendered. A fee for reinstatement shall be assessed to cover administrative costs. (3-29-17)

**IDAPA 28 – DEPARTMENT OF COMMERCE**

**28.02.03 – RULES OF THE IDAHO REGIONAL TRAVEL AND CONVENTION GRANT PROGRAM**

**DOCKET NO. 28-0203-1801**

**NOTICE OF RULEMAKING – ADOPTION OF TEMPORARY RULE**

**EFFECTIVE DATE:** The effective date of the temporary rule is March 2, 2018.

**AUTHORITY:** In compliance with Sections 67-5226, Idaho Code, notice is hereby given this agency has adopted a temporary rule. The action is authorized pursuant to Sections 67-4702, 67-4715 and 67-4717, Idaho Code.

**DESCRIPTIVE SUMMARY:** The following is the required finding and concise statement of its supporting reasons for adopting a temporary rule:

The Idaho Department of Commerce adopted a temporary rule on March 2, 2018 to define and clarify allowable costs of the Idaho Regional Travel and Convention Grant Program so that the program would continue to operate without interruption.

**TEMPORARY RULE JUSTIFICATION:** Pursuant to Sections 67-5226(1)(c), Idaho Code, the Governor has found that temporary adoption of the rule is appropriate for the following reasons:

This temporary rule was adopted to confer a benefit by providing clarity to applicants during the current grant application cycle and allow current grant recipients to be reimbursed for allowable costs.

**FEE SUMMARY:** Pursuant to Section 67-5226(2), the Governor has found that the fee or charge being imposed or increased is justified and necessary to avoid immediate danger and the fee is described herein:

There is no fee or charge imposed or increased.

**ASSISTANCE ON TECHNICAL QUESTIONS:** For assistance on technical questions concerning the temporary rule, contact Bobbi-Jo Meuleman, Director at (208) 334-2470.

DATED this 23rd day of March, 2018.

Bobbi-Jo Meuleman, Director  
Idaho Department of Commerce  
P.O. Box 87370  
700 W. State St., 2nd Floor  
Boise, ID 83720-0093  
(208) 334-2470

THE FOLLOWING IS THE TEXT OF THE TEMPORARY RULE FOR DOCKET NO. 28-0203-1801  
(Only Those Sections With Amendments Are Shown.)

018. ~~INELIGIBLE PROJECTS~~ **ADMINISTRATIVE EXPENSES.**

**01. Program Purpose.** It is not the purpose of this grant program to fund the day-to-day, administrative expenses of organizations that have a travel or convention promotion element. Projects that have alternative funding sources (for example, regular Chamber of Commerce budgets) or that have been funded previously with the agency's own funds may be deemed ineligible. ~~(3-29-10)~~(3-2-18)T

~~01. Organizational Administrative Expense. Rent, phone, supplies, wages and salaries, other overhead and administrative expenses are not reimbursable; however, the actual cost of staff wages and benefits (Other Personnel Expenses (OPE)) may be used as cash match with documentation.~~ ~~(3-29-10)~~

**02. Salary or Personnel Administrative Expense.** ~~Expenses related to grant writing are not eligible.~~ The following administrative and overhead costs are allowable: ~~(3-29-10)~~(3-2-18)T

**a. Wages and Benefits.** Wages and benefits of one (1) designated grant administrator for time directly related to the task of grant administration. Other employee wages and benefits incurred in the execution of the grant program may be used as cash match with documentation. (3-2-18)T

**b. Overhead.** Reasonable, apportioned overhead costs of the grantee organization required to execute the grant program shall be approved by the Idaho Travel Council. The Department shall recommend preferred apportionment methods. (3-2-18)T

**c. Grant Writing.** No expenses related to grant writing, or grant application are eligible. (3-2-18)T

~~03. Alternative Funding Sources. Projects that have alternative funding sources (for example, regular Chamber of Commerce budgets) or that have been funded previously with the agency's own funds may be deemed ineligible.~~ ~~(3-29-10)~~

## **IDAPA 35 – STATE TAX COMMISSION**

### **35.01.02 – IDAHO SALES AND USE TAX ADMINISTRATIVE RULES**

#### **DOCKET NO. 35-0102-1801**

#### **NOTICE OF INTENT TO PROMULGATE RULES – NEGOTIATED RULEMAKING**

**AUTHORITY:** In compliance with Section 67-5220, Idaho Code, notice is hereby given that this agency intends to promulgate rules and desires public comment prior to initiating formal rulemaking procedures. This negotiated rulemaking action is authorized pursuant to Sections 67—5220(1)&(2), 63-105(2), and Section 63-3624(a), Idaho Code.

**METHOD OF PARTICIPATION:** Interested persons wishing to participate in the negotiated rulemaking may do any of the following:

Negotiated meetings will be scheduled and all scheduled meetings shall be posted and made accessible on the agency website at the address listed below.

1. Attend the negotiated rulemaking meeting(s) and participate in the negotiation process,
2. Attend through a teleconference,
3. Provide oral or written recommendations, or both, at the negotiated rulemaking meeting, and/or
4. Submit written recommendations and comments to the address below.

Upon conclusion of the negotiated rulemaking, any unresolved issues, all key issues considered, and conclusions reached during the negotiated rulemaking will be addressed in a written summary and made available on the agency website.

Failure of interested persons to respond to this notice of intent or the lack of a sufficient number of responses to this notice of intent may result in the discontinuation of further informal proceedings. In either event the agency shall have sole discretion in determining the feasibility of scheduling and conducting informal negotiated rulemaking and may proceed directly to formal rulemaking if proceeding with negotiated rulemaking is deemed infeasible.

**DESCRIPTIVE SUMMARY:** The following is a statement in nontechnical language of the substance and purpose of the intended negotiated rulemaking and the principle issues involved:

#### **Rule 037 – Aircraft and Flying Services**

In general, when a third-party dealer or repair facility performs a repair and bills the seller of a warranty or service agreement, the third-party dealer or repair facility will separately state and charge sales tax on the parts to the seller of the warranty or service agreement. Section 63-3622GG, Idaho Code, exempts parts installed in non-resident aircraft if those parts are installed by a FAA approved repair station. This includes parts that are being installed as a result of a warranty or a service agreement. Currently this scenario has not been addressed in rule. The proposed rulemaking would add language that clarifies that these parts are exempt, even if the repair is paid for under a warranty agreement. Addressing this issue provides clarity that the exemption for parts installed on non-resident aircraft applies, even if the parts were paid for under a warranty agreement.

#### **Rule 049 – Warranties and Service Agreements**

The proposed rulemaking would add a cross reference to Rule 037 regarding the exemption for parts installed in non-resident aircraft if those parts are installed by a FAA approved repair station. Also would add a statutory reference to 63-3613, Idaho Code.

#### **Rule 068 – Collection of Tax**

Section 63-3619, Idaho Code, requires the Tax Commission to provide retailers with schedules for collection of the tax on sales which involve a fraction of a dollar. Currently, Rule 068 has two of these schedules, one for 5% sales tax and another for 6%. The 5% schedule is no longer necessary because the rate has been stable at 6% since 2006. The proposed rulemaking would strike subsection 04 & then renumber the subsequent sections. Also would add a statutory reference to 63-3619, Idaho Code.

**CONTACT INFORMATION, WEB ADDRESS, ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS:** For assistance on technical questions concerning this negotiated rulemaking, contact Leah Parsons, (208) 334-7531. Materials pertaining to the negotiated rulemaking, including any available preliminary rule drafts, can be found on the commission website at the following web address: [www.tax.idaho.gov](http://www.tax.idaho.gov).

All written comments must be directed to the address below.

Dated this 6th day of April, 2018.

Leah Parsons  
Tax Policy Specialist  
Idaho State Tax Commission  
800 Park Blvd., Plaza IV  
P.O. Box 36  
Boise ID 83722-0410  
Phone: (208) 334-7531  
Fax: (208) 334-7846

## **IDAPA 35 – STATE TAX COMMISSION**

### **35.01.03 – PROPERTY TAX ADMINISTRATIVE RULES**

**DOCKET NO. 35-0103-1801**

#### **NOTICE OF INTENT TO PROMULGATE RULES – NEGOTIATED RULEMAKING**

**AUTHORITY:** In compliance with Section 67-5220, Idaho Code, notice is hereby given that this agency intends to promulgate rules and desires public comment prior to initiating formal rulemaking procedures. This negotiated rulemaking action is authorized pursuant to Sections 63-105A and 63-802, Idaho Code.

**METHOD OF PARTICIPATION:** Interested persons wishing to participate in the negotiated rulemaking may do any of the following:

Negotiated meetings will be scheduled and all scheduled meetings shall be posted and made accessible on the agency website at the address listed below.

1. Attend the negotiated rulemaking meeting(s) and participate in the negotiation process,
2. Attend through a teleconference,
3. Provide oral or written recommendations, or both, at the negotiated rulemaking meeting, and/or
4. Submit written recommendations and comments to the address below.

Upon conclusion of the negotiated rulemaking, any unresolved issues, all key issues considered, and conclusions reached during the negotiated rulemaking will be addressed in a written summary and made available on the agency website.

Failure of interested persons to respond to this notice of intent or the lack of a sufficient number of responses to this notice of intent may result in the discontinuation of further informal proceedings. In either event the agency shall have sole discretion in determining the feasibility of scheduling and conducting informal negotiated rulemaking and may proceed directly to formal rulemaking if proceeding with negotiated rulemaking is deemed infeasible.

**DESCRIPTIVE SUMMARY:** The following is a statement in nontechnical language of the substance and purpose of the intended negotiated rulemaking and the principle issues involved:

#### **Property Tax Rule 312**

This rule changes the time when government owned property transferred to a private owner becomes taxable. The existing rule defers the time until the next January 1, 2019. The proposed change will conform to I. C. 63-602Y, which provides that property changing status from exempt status to taxable status, becomes taxable quarterly and the tax is prorated accordingly.

#### **Property Tax Rule 408**

Subsection 408.02 requires final values of operating properties be sent to county assessors. Subsection 408.03 designates July 15 as the date by which county assessors may file a complaint concerning the valuation or allocation of the value. There is a need to review the timing of this process because the operating property values are not final values until after the Tax Commission meets in August as the State Board of Equalization.

#### **Property Tax Rule 610**

This rule will explain that the primary guidance in determining partial ownership relative to the homeowner's exemption program is the specific language found in the transfer deed.

#### **Property Tax Rule 613**

A petition has been received asking a review of the manner in which agricultural values are determined.

#### **Property Tax Rule 614**

A petition has been received asking a review of the manner in which agricultural values are determined.

#### **Property Tax Rule 630**

Recently enacted HB591 made operating property owners eligible to apply for this exemption. This rule is being

changed to require taxpayers to apply to the Tax Commission for the exemption whenever operating property is involved in the exemption.

**Property Tax Rule 709**

This rule will explain that the primary guidance in determining partial ownership relative to the property tax reduction program is the specific language found in the transfer deed.

**Property Tax Rule 802**

Idaho Code 63-301A and Rule 802.06 provides that new construction is not counted in a revenue allocation area (RAA) until the RAA dissolves. Additional clarification is needed to show how new construction is counted when a dissolving RAA has expanded into a taxing district, or when a taxing district has expanded into an RAA.

**Property Tax Rule 803**

Recently passed legislation (HB559) created a provisional property tax exemption; (HB392) clarified the dates when solar farm gross earnings receipts are to be reported and deducted from property tax revenue; and HB567(a) revised the levy process to follow when cemetery taxing districts consolidate. The changes describe the handling of revenue distributed or refunds made pertaining to the new provisional exemption found in I. C. 63-602(4). The dates for reporting certain gross earnings tax are changed to June 30, and the deduction of the solar revenue from the property tax budget is explained. A detailed explanation of how to compute levies for consolidating cemetery taxing districts is provided.

**Property Tax Rule 804**

This rule will clarify whether or not the “base assessment roll” includes the property which existed in the revenue allocation area (RAA) at the time of RAA formation and subsequently became taxable.

**Property Tax Rule 962**

This rule will adopt the process by which the county assessor may change a forest parcel’s productivity class. The process, at a minimum, will set forth requirements for landowner notification, inspector qualifications and retention of documents.

**CONTACT INFORMATION, WEB ADDRESS, ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS:** For assistance on technical questions concerning this negotiated rulemaking, contact Alan Dornfest, (208) 334-7742. Materials pertaining to the negotiated rulemaking, including any available preliminary rule drafts, can be found on the commission website at the following web address: [www.tax.idaho.gov](http://www.tax.idaho.gov).

All written comments must be directed to the address below.

Dated this 6th day of April, 2018.

Alan Dornfest  
Tax Policy Supervisor  
State Tax Commission  
P.O. Box 36  
Boise, ID 83722-0410  
(208) 334-7742



**IDAPA 39 – IDAHO TRANSPORTATION DEPARTMENT**

**IDAPA 39.03.01 THROUGH IDAPA 39.03.25**

**RULES THAT REGULATE VEHICLES AND/OR LOADS THAT ARE REQUIRED TO OPERATE UNDER AN OVERLEGAL PERMIT**

**DOCKET NO. 39-0300-1801**

**OMNIBUS NOTICE OF INTENT TO PROMULGATE RULES – NEGOTIATED RULEMAKING**

**AUTHORITY:** In compliance with Sections 67-5220(1) and 67-5220(2), Idaho Code, notice is hereby given that this agency intends to promulgate rules and desires public comment prior to initiating formal rulemaking procedures. This negotiated rulemaking action is authorized pursuant to Sections 40-312 and 49-1004, Idaho Code.

**MEETING SCHEDULE:** Public meetings on the negotiated rulemaking concerning permits for overlegal loads and/or vehicles will be held as follows:

<b>PUBLIC MEETINGS</b>	
<b>Wednesday, May 23, 2018 &amp; Wednesday, June 13, 2018 3:00 pm to 8:00 pm (MDT)</b>	
<b>ITD Headquarters 3311 W. State Street Boise, ID 83702</b>	<b>ITD District 1 Office 600 W. Prairie Avenue Coeur d’Alene, ID 83815</b>
<b>ITD District 2 Office 2600 Frontage Road Lewiston, ID 83501</b>	<b>ITD District 4 Office 216 S. Date Street Shoshone, ID 83352</b>
<b>ITD District 5 Office 5151 S. 5th Avenue Pocatello, ID 83204</b>	<b>ITD District 6 Office 206 N. Yellowstone Highway Rigby, ID 83442</b>

**METHOD OF PARTICIPATION:** The Department is holding a statewide, simultaneous video-conference. Persons wishing to participate in the negotiated rulemaking, must participate in-person at the above listed locations.

The Department is also soliciting written comments (please see instructions in the “Contact Information” section below).

**DESCRIPTIVE SUMMARY:** The following is a statement in nontechnical language of the substance and purpose of the intended negotiated rulemaking and the principle issues involved:

This rulemaking is being initiated based on the directive given by the 2018 Legislature in [SCR130](#). The Department was also approached by industry regarding the consolidation of permits in an effort to streamline the permitting process. These administrative rules provide the authority, process and details for the Department's issuance of commercial motor vehicle overlegal permits. There are currently twenty-two administrative rule chapters that deal with overlegal permits and it is the Department’s goal to reduce that number to less than ten chapters. There are currently seventeen different types of single trip permits and fifteen different types of annual permits. This consolidation will result in approximately eleven total.

Rather than condensing and reorganizing the Department's administrative rules for permitting, they have simply been added to overtime which has resulted in an increase in the number of rule chapters regulating permitting. Further, it is also the Department’s goal that this process will provide customers and industry a much more efficient

permitting process. Therefore, this rulemaking will consist of consolidating or combining, or both, numerous administrative rules into fewer chapters.

The following rule chapters are germane to this negotiated rulemaking:

- 39.03.01, Rules Governing Definitions Regarding Overlegal Permits
- 39.03.04, Rules Governing Movement of Disabled Vehicles
- 39.03.05, Rule Governing Variable Load Suspension Axles
- 39.03.06, Rules Governing Allowable Vehicle Size
- 39.03.07, Rules Governing Restricted Routes for Semitrailers
- 39.03.09, Rules Governing Overlegal Permits - General Conditions and Requirements
- 39.03.10, Rules Governing When An Overlegal Permit Is Required
- 39.03.11, Rules Governing Overlegal Permittee Responsibility And Travel Restrictions
- 39.03.12, Rules Governing Safety Requirements of Overlegal Permits
- 39.03.13, Rules Governing Overweight Permits
- 39.03.14, Rules Governing Policy During Spring Breakup Season
- 39.03.15, Rules Governing Excess Weight Permits for Reducible Loads
- 39.03.16, Rules Governing Oversize Permits for Non-Reducible Vehicles and/or Loads
- 39.03.17, Rules Governing Permits for Manufactured Homes, Modular Buildings, and Office Trailers
- 39.03.18, Rules Governing Overlegal Permits for Relocation of Buildings or Houses
- 39.03.19, Rules Governing Annual Overlegal Permits
- 39.03.20, Rules Governing Application for Special Permits
- 39.03.21, Rules Governing Overlegal Permit Fees
- 39.03.22, Rules Governing Overlegal Permits for Extra-Length, Excess Weight, and Up to 129,000 Pound Vehicle Combinations
- 39.03.23, Rules Governing Revocation of Overlegal Permits
- 39.03.24, Rules Governing Self-Propelled Snowplows
- 39.03.25, Rules Governing Lights on Snow Removal Equipment

**CONTACT INFORMATION, WEB ADDRESS, ASSISTANCE ON TECHNICAL QUESTIONS AND SUBMISSION OF WRITTEN COMMENTS:** For assistance on technical questions concerning this negotiated rulemaking, please contact Craig Roberts, Motor Vehicle Program Supervisor at (208) 334-8292.

Materials pertaining to the negotiated rulemaking process and the draft administrative rules can be found on the Idaho Transportation Department's website at <http://itd.idaho.gov/rulemaking>.

All written comments must be directed to the undersigned and be delivered on or before Friday, June 15, 2018. Comments may be submitted electronically, by phone or via USPS.

Dated this 11th day of April, 2018.

Ramón Hobdey-Sánchez  
Governmental Affairs Program Specialist  
Idaho Transportation Department  
3311 W. State Street  
P.O. Box 7129  
Boise, ID 83707-1129  
Phone: (208) 334-8810  
[ramon.hobdey-sanchez@itd.idaho.gov](mailto:ramon.hobdey-sanchez@itd.idaho.gov)

## IDAPA 47 – DIVISION OF VOCATIONAL REHABILITATION

### 47.01.02 – RULES AND MINIMUM STANDARDS GOVERNING EXTENDED EMPLOYMENT SERVICES

DOCKET NO. 47-0102-1801

#### NOTICE OF INTENT TO PROMULGATE RULES – NEGOTIATED RULEMAKING

**AUTHORITY:** In compliance with Sections 67-5220(1) and 67-5220(2), Idaho Code, notice is hereby given that this agency intends to promulgate rules and desires public comment prior to initiating formal rulemaking procedures. This negotiated rulemaking action is authorized pursuant to Sections 33-2211 and 33-2303, Idaho Code.

**MEETING SCHEDULE:** Public meetings on the negotiated rulemaking will be held as follows:

<b>PUBLIC MEETINGS (All Times Are Local)</b>		
<b>Tuesday, May 15, 2018 9:00 am – 11:00 am</b>	<b>Tuesday, May 22, 2018 10:00 am – 12:00 pm</b>	<b>Thursday, May 24, 2018 10:00 am – 12:00 pm</b>
<b>Department of Labor 1515 E. Lincoln Rd. Teton Room Idaho Falls, ID 83401</b>	<b>Coeur d’Alene Public Library 702 E. Front Ave. Jameson Room Coeur d’Alene, ID 83814</b>	<b>Boise City Library 715 S. Capitol Blvd. Marion Bingham Room Boise, ID 83702</b>

The meeting sites will be accessible to persons with disabilities, if needed. Requests for accommodation must be made not later than five (5) days prior to the meeting to the agency address below.

**METHOD OF PARTICIPATION:** Persons wishing to participate in the negotiated rulemaking must do the following:

To participate in the negotiated rulemaking you must attend one of the scheduled negotiated rulemaking meeting scheduled in this notice or submit written comments on or before June 7, 2018. All written comments must be submitted to:

Idaho Division of Vocational Rehabilitation  
Attn: Nanna Hanchett, Deputy Administrator  
650 West State Street, Room 150  
Boise, ID 83720-0096

Upon conclusion of the negotiated rulemaking, any unresolved issues, all key issues considered, and conclusion reached during the negotiated rulemaking will be addressed in a written summary. The summary will be made available to interested persons who contact the agency or, if the agency chooses, the summary may be posted on the agency website.

**DESCRIPTIVE SUMMARY AND STATEMENT OF PURPOSE:** The following is a statement in nontechnical language of the substance and purpose of the intended negotiated rulemaking and the principal issues involved:

Proposed amendments would make technical corrections and amendments to the referral and eligibility requirements for the Extended Employment Services Program.

**ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS, OBTAINING DRAFT COPIES:** For assistance on technical questions concerning this negotiated rulemaking, contact Nanna Hanchett, Deputy Administrator at (208) 334-3390 or [nanna.hanchett@vr.idaho.gov](mailto:nanna.hanchett@vr.idaho.gov). Materials pertaining to the negotiated rulemaking, including any available preliminary rule drafts, can be found on the Idaho Division of Vocational Rehabilitation web site at the following web address: [https://vr.idaho.gov/about/proposed\\_rules](https://vr.idaho.gov/about/proposed_rules).

Anyone may submit written comments regarding this negotiated rulemaking. All written comments must be directed to the address above and must be delivered on or before June 7, 2018.

Dated this 17th day of April, 2018.

Tracie Bent, Chief Planning and Policy Officer  
Idaho State Board of Education  
650 W. State Street  
P.O. Box 83720  
Boise, ID 83720-0037  
Phone: (208) 332-1582  
Fax: (208) 334-2632

# IDAPA 50 – IDAHO COMMISSION OF PARDONS AND PAROLE

## 50.01.01 – RULES OF THE COMMISSION OF PARDONS AND PAROLE

DOCKET NO. 50-0101-1701

### NOTICE OF FINAL RULE – AGENCY FILING

**AUTHORITY:** In compliance with Sections 67-5224 and 67-5291, Idaho Code, notice is hereby given that the legislature has taken action by concurrent resolution on the pending rule promulgated under Docket No. 50-0101-1701. Only that section of the rule effected by House Concurrent Resolution (HCR) 57 is being reprinted here as a final rule.

**DESCRIPTIVE SUMMARY:** The following is a concise explanatory statement regarding the partial rejection:

Pursuant to **HCR 57**, IDAPA 50.01.01, “Rules of the Commission of Pardons and Parole,” the amendments to Section 551, Subsections 03.c. and 03.d., only, adopted as a pending rule under Docket Number **50-0101-1701**, are not consistent with legislative intent and are rejected and declared null, void and of no force and effect. Only Section 551 is reprinted here as affected by HCR 57 following this notice.

**ASSISTANCE ON TECHNICAL QUESTIONS:** For assistance on technical questions concerning this notice, contact Dennis Stevenson, Administrative Rules Coordinator, at (208) 332-1820.

DATED this 20th day of April, 2018.

Dennis Stevenson  
Administrative Rules Coordinator  
Office of the Administrative Rules Coordinator  
Department of Administration  
P. O. Box 83720, Boise, ID 83720-0306  
E-mail: [rulescoordinator@adm.idaho.gov](mailto:rulescoordinator@adm.idaho.gov)

**The pending rule adopted under this docket was partially rejected by HCR 57.  
The following rule text is the codified final rule and includes the rejected  
pending rule text shown here as underscored and stricken.**

#### **551. RESTORATION OF FIREARMS RIGHTS PURSUANT TO SECTION 18-310, IDAHO CODE.**

**01. General.** An application for restoration of the civil right to ship, transport, possess, or receive a firearm may be considered upon final discharge under Section 18-310(3), Idaho Code. This is not a pardon for the conviction of a crime, nor is the applicant’s criminal record expunged. (3-21-18)

**02. Application.** An application may not be made until five (5) years after the date of final discharge from supervision or incarceration. (3-21-18)

- a.** An application may be obtained from the Commission office or on the Commission website. (4-11-15)
- b.** The application must be the original and returned to the Commission office. (4-11-15)
- i.** The application must request the restoration of the right to ship, transport, possess, or receive a

- firearm under Section 18-310, Idaho Code. (4-11-15)
- ii. The application must be in writing and legible. (4-11-15)
  - iii. All court convictions, judgment orders, including any dismissal documents, as well as police reports related to said convictions must accompany the application. (3-21-18)
  - iv. An application may be submitted once every twelve (12) months, or at the Commission's discretion. (4-11-15)
  - v. The petition must state the reason for the request. (4-11-15)
  - vi. Review or deliberation on the petition will be conducted in executive session. (4-11-15)
  - vii. The Commission will determine whether a hearing will be granted and the applicant will be advised of the decision. (3-21-18)
  - viii. An incarcerated offender is not eligible to apply for the restoration of gun rights until completion of sentence or supervision after five (5) years have elapsed. (3-21-18)
- c.** Upon receipt of the completed application and required documentation, eligible applications will be reviewed by the Commission. The Commission may request an investigation of the applicant by Commission staff. The report shall include, but shall not be limited to, the following: (3-21-18)
- i. A records check will be conducted to include any law enforcement contact since release from supervision or incarceration. (3-21-18)
  - ii. The applicant's employment history since discharge from supervision or incarceration. (3-21-18)
  - iii. The applicant's willingness to fulfill the obligations of a law abiding citizen, including family information, community involvement, volunteer service, hobbies, and related interests. (3-21-18)
  - iv. The applicant's employment and education status, including any professional or vocational achievements, training and any additional information as deemed necessary or appropriate. (3-21-18)
  - v. Confirmation that all restitution and fines as ordered by the sentencing court have been paid. (3-21-18)
  - vi. An interview with the applicant may be conducted and a summary of the interview provided. The interview may be conducted in person or by electronic means. (3-21-18)
- 03. Hearing.** The scheduling of a hearing is at the complete discretion of the Commission or the Executive Director. (4-11-15)
- a.** If a hearing is scheduled, the Commission will determine the date of the hearing. (4-11-15)
  - b.** Any hearing may be continued for additional information. (3-21-18)
- ~~**e.** Notice of a restoration of firearm rights hearing shall be published in a newspaper of general circulation at least once a week for four (4) consecutive weeks immediately prior to the hearing. ( )~~
- ~~**f.** A copy of the publication will be mailed to the prosecuting attorney of the county from which the petitioner was sentenced. ( )~~
- c.** Written notice of the hearing date, time, and location will be sent to the applicant at the address given on the application or as otherwise requested. (3-21-18)

i. The applicant's appearance at the hearing is not mandatory but is encouraged. If the applicant decides not to attend the hearing, the applicant must notify the Commission in writing. (3-21-18)

d. The decision and supporting documents regarding the decision to grant or deny an application to restore firearms rights will be filed with the Secretary of State. (3-21-18)

i. The fact and number of dissenting votes of the Commissioners voting will be a matter of public record. The dissenting votes of any Commissioner voting shall be separately reduced to writing with the reason for said dissent and signed by the dissenting Commissioner. The written record of the vote by each voting Commission dissent shall be submitted to the office of the Secretary of State. Disclosure of the dissenting vote(s) and reason(s) shall be maintained and disclosed in accordance with the Idaho Public Records Act, Idaho Code Section 74-101 et seq. (3-21-18)

ii. All written material considered in the decision process, with the exception of the pre-sentence investigation report, victim information, mental health records, criminal history information, medical records, or other documents determined by the Executive Director or Commissioners or designee as confidential, will be submitted to the Office of the Secretary of State and will be a matter of public. (3-21-18)

e. The applicant will be given written notice of the decision and such notice will be sent to the last known address. (3-21-18)

**04. Authority to Grant.** The Commission has the full and final authority and discretion to grant restoration of civil rights to ship, transport, possess, or receive a firearm under Section 18-310, Idaho Code. (4-11-15)

**05. Exceptions.** See the exceptions listed in Section 18-310, Idaho Code. (4-11-15)

## **IDAPA 58 – DEPARTMENT OF ENVIRONMENTAL QUALITY**

### **POTLATCH RIVER WATERSHED ASSESSMENT AND TOTAL MAXIMUM DAILY LOAD (TMDL): 2017 TEMPERATURE TMDL (HUC ID 17060306)**

**DOCKET NO. 58-0000-1801**

### **NOTICE OF FINAL DECISION**

**AUTHORITY:** In compliance with Section 39-3611, Idaho Code, notice is hereby given that this agency has issued a final decision on the Potlatch River Watershed Assessment and Total Maximum Daily Load (TMDL): 2017 Temperature TMDL.

**DESCRIPTIVE SUMMARY:** The Department of Environmental Quality (DEQ) hereby gives notice of the final decision on the Potlatch River Watershed Assessment and TMDL: 2017 Temperature TMDL. The final decision may be appealed to the Board of Environmental Quality by initiating a contested case in accordance with Sections 39-107(5), 67-5240 et seq., Idaho Code, and IDAPA 58.01.23, “Rules of Administrative Procedure Before the Board of Environmental Quality.” The petition initiating a contested case must be filed with the undersigned hearing coordinator within thirty-five (35) days of the publication date of this notice in the Idaho Administrative Bulletin.

The area covered by the Potlatch River Watershed Assessment and TMDL: 2017 Temperature TMDL (Hydrologic Unit Code 17060306) establishes twenty-one (21) temperature TMDLs on water quality impaired stream reaches (assessment units). DEQ has submitted this TMDL to the U.S. Environmental Protection Agency for approval under the Clean Water Act.

**AVAILABILITY OF THE TMDL:** Electronic copy of the TMDL can be obtained at <http://www.deq.idaho.gov/media/60181331/potlatch-river-watershed-assessment-tmdl-2017-temperature-tmdl-0318.pdf> or by contacting Graham Freeman, TMDL Program Coordinator, at (208) 373-0461 or e-mail [graham.freeman@deq.idaho.gov](mailto:graham.freeman@deq.idaho.gov).

Dated this 2nd day of May, 2018

Paula J. Wilson  
Hearing Coordinator  
Department of Environmental Quality  
1410 N. Hilton Street  
Boise, Idaho 83706-1255  
Phone: (208) 373-0418 / Fax: (208) 373-0481  
E-mail: [paula.wilson@deq.idaho.gov](mailto:paula.wilson@deq.idaho.gov)



**IDAPA 58 – DEPARTMENT OF ENVIRONMENTAL QUALITY**

**58.01.01 – RULES FOR THE CONTROL OF AIR POLLUTION IN IDAHO**

**DOCKET NO. 58-0101-1802**

**NOTICE OF INTENT TO PROMULGATE RULES – NEGOTIATED RULEMAKING**

**AUTHORITY:** In compliance with Section 67-5220, Idaho Code, and IDAPA 58.01.23, Rules of Administrative Procedure Before the Board of Environmental Quality, Sections 810 through 815, notice is hereby given that this agency intends to promulgate a rule and desires public participation before publishing a proposed rule. This rulemaking action is authorized by Sections 39-105, 39-107, Idaho Code.

**METHOD OF PARTICIPATION:** Those interested in participating in the negotiated rulemaking process are encouraged to attend the meeting at one of the following locations. The public may participate by telephone and web conferencing at any of the meeting locations or with individual connections. Individuals interested in participating by telephone and web conferencing should contact the undersigned by the date provided in the table below. For those who cannot participate by attending the meeting, information for submitting written comments is provided at the end of this notice.

**MEETING SCHEDULE:** The negotiated rulemaking meeting will be held as follows. Additional meetings will be scheduled if necessary.

<b>*ORIGINATING LOCATION – LIVE MEETING*</b>	
<b>DEQ Central State Office Conference Center 1410 N. Hilton, Boise, Idaho</b>	
<b>Tuesday, May 22nd, 2018 - 9:00 a.m. to 12:30 p.m. (MDT)</b>	
<b>*TELEPHONE AND WEB CONFERENCE LOCATIONS*</b>	
<b>DEQ Coeur d’Alene Regional Office 2110 Ironwood Parkway Coeur d’Alene, ID 83814</b>	<b>DEQ Lewiston Regional Office 1118 F Street Lewiston, ID 83501</b>
<b>DEQ Twin Falls Regional Office 650 Addison Avenue West, Suite 110 Twin Falls, ID 83301</b>	<b>DEQ Pocatello Regional Office 444 Hospital Way #300 Pocatello, ID 83201</b>
<b>DEQ Idaho Falls Regional Office 900 N. Skyline, Suite B Idaho Falls, ID 83402</b>	
<b>TELEPHONE AND WEB CONFERENCE INFORMATION</b>	

**Contact the undersigned by *May 14, 2018* to make arrangements for participation by telephone and web conferencing**

The meeting locations will be accessible to persons with disabilities, and language translators will be made available upon request. Requests for these accommodations must be made no later than five (5) days prior to the meeting date. For arrangements, contact the undersigned.

**PRELIMINARY DRAFT RULE:** The preliminary draft rule is available at [www.deq.idaho.gov/58-0101-1802](http://www.deq.idaho.gov/58-0101-1802) or by contacting the undersigned.

**DESCRIPTIVE SUMMARY:** DEQ initiated this rulemaking to negotiate a significant rate for ammonia in PM2.5 nonattainment areas where the nonattainment plan requires that the control requirements apply to major stationary sources and major modifications of ammonia as a PM2.5 precursor regulated new source review pollutant.

The text of the rule will be drafted by DEQ in conjunction with a negotiating committee made up of persons having an interest in the development of this rule. Members of the regulated community who may be subject to Idaho's air quality rules, special interest groups, public officials, and members of the public who have an interest in the regulation of air emissions from sources in Idaho may be interested in participating in this rulemaking.

Upon conclusion of negotiations, DEQ intends to publish a proposed rule for public comment in the summer of 2018 and then present the final proposal to the Idaho Board of Environmental Quality (Board) in the fall of 2018 for adoption of a pending rule. If adopted by the Board, the rule will be reviewed by the 2019 Idaho Legislature.

**ASSISTANCE ON TECHNICAL QUESTIONS AND SUBMISSION OF WRITTEN COMMENTS:** For assistance on questions concerning this rulemaking, contact Carl Brown at [Carl.Brown@deq.idaho.gov](mailto:Carl.Brown@deq.idaho.gov) or (208) 373-0206.

Written comments may be submitted by mail, fax or email at the address below. The written comment deadline on the preliminary draft rule is June 7, 2018. Information regarding future public comment opportunities provided throughout the negotiated rulemaking process for this rule docket is available at [www.deq.idaho.gov/58-0101-1802](http://www.deq.idaho.gov/58-0101-1802) or by contacting the undersigned.

Dated this 2nd day of May, 2018.

Paula J. Wilson  
Hearing Coordinator  
Department of Environmental Quality  
1410 N. Hilton Street  
Boise, Idaho 83706-1255  
Phone: (208) 373-0418 / Fax: (208) 373-0481  
E-mail: [paula.wilson@deq.idaho.gov](mailto:paula.wilson@deq.idaho.gov)

**IDAPA 58 – DEPARTMENT OF ENVIRONMENTAL QUALITY**

**58.01.02 – WATER QUALITY STANDARDS**

**DOCKET NO. 58-0102-1802**

**NOTICE OF INTENT TO PROMULGATE RULES – NEGOTIATED RULEMAKING**

**AUTHORITY:** In compliance with Section 67-5220, Idaho Code, and IDAPA 58.01.23, Rules of Administrative Procedure Before the Board of Environmental Quality, Sections 810 through 815, notice is hereby given that this agency intends to promulgate a rule and desires public participation before publishing a proposed rule. This rulemaking action is authorized by Sections 39-105, 39-107, and 39-3601 et seq., Idaho Code.

**MEETING SCHEDULE:** The negotiated rulemaking meetings will be held as follows. Additional meetings will be scheduled if necessary.

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**\*ORIGINATING LOCATION – LIVE MEETING\***  
**DEQ State Office**  
**Conference Center**  
**1410 N. Hilton, Boise, Idaho**

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**Thursday, May 31, 2018 - 9:00 a.m. to 12:30 p.m. (MDT)**

**Contact the undersigned by *May 24, 2018* to make arrangements for participation by telephone and web conferencing**

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**AND**

**Thursday, June 28, 2018 - 9:00 a.m. to 12:30 p.m. (MDT)**

**Contact the undersigned by *June 21, 2018* to make arrangements for participation by telephone and web conferencing**

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**\*TELEPHONE AND WEB CONFERENCE LOCATIONS\***

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**DEQ Coeur d’Alene Regional Office**  
**2110 Ironwood Parkway**  
**Coeur d’Alene, Idaho**

**DEQ Pocatello Regional Office**  
**444 Hospital Way #300**  
**Pocatello, Idaho**

**METHOD OF PARTICIPATION:** Those interested in participating in the negotiated rulemaking process are encouraged to attend the meetings at one of the following locations. The public may participate by telephone and web conferencing at any of the meeting locations or with individual connections. Individuals interested in participating by telephone and web conferencing should contact the undersigned by the date provided in the table below. For those who cannot participate by attending the meetings, information for submitting written comments is provided at the end of this notice.

The meeting locations will be accessible to persons with disabilities, and language translators will be made available upon request. Requests for these accommodations must be made no later than five (5) days prior to the meeting date. For arrangements, contact the undersigned.

**PRELIMINARY DRAFT RULE:** The preliminary draft rule is available at [www.deq.idaho.gov/58-0102-1802](http://www.deq.idaho.gov/58-0102-1802) or by contacting the undersigned.

**DESCRIPTIVE SUMMARY:** This rulemaking has been initiated to make certain revisions identified as high priority in the 2017 Triennial Review of Idaho Water Quality Standards and to comply with federal requirements for consideration of EPA recommended (aka §304(a)) criteria (40 CFR 131.20): (1) Adopt aquatic life criteria for acrolein, carbaryl, and diazinon in accordance with EPA's current §304(a) recommended criteria, and (2) collapse recreation use subcategories into single contact recreation use and adopt EPA's current §304(a) recommended criteria for bacteria.

**EPA's Recommended §304(a) Aquatic life Criteria for Acrolein, Carbaryl, and Diazinon**

This rulemaking adds criteria for acrolein, carbaryl, and diazinon in Subsection 210.01. Currently, Idaho does not have aquatic life criteria for acrolein, carbaryl, and diazinon, although EPA has issued new recommended aquatic life criteria for these toxics. Acrolein is an aquatic herbicide and is known to be toxic to aquatic life, particularly amphibians and fish. In 2009, EPA added acrolein to the §304(a) list of aquatic life criteria. Carbaryl and diazinon are pesticides that are toxic to aquatic life, particularly invertebrates. EPA added diazinon to the §304(a) list of aquatic life criteria in 2005 and added carbaryl in 2012.

In order to avoid EPA promulgating federal standards for acrolein, carbaryl, and diazinon for Idaho, DEQ proposes to undertake a negotiated rulemaking to revise these aquatic life criteria in Idaho's water quality standards. By adopting these criteria, DEQ will comply with federal requirements for consideration of EPA recommended criteria (40 CFR 131.20) and ensure that its criteria provide sufficient protection of aquatic life uses.

**Recreation Use Subcategories and EPA's §304(a) Recommended Criteria for Bacteria**

This rulemaking collapses the subcategories of recreation use into a single contact recreation use category and adopts EPA's 2012 §304(a) recommended criteria for bacteria. EPA's 2012 §304(a) criteria includes both E. coli criteria as well as enterococci criteria; either of which would be considered protective of contact recreation. States (and dischargers) can use either criterion to demonstrate compliance with water quality standards.

Because there is no difference in the geometric mean bacteria criteria or the toxics criteria applicable to primary and secondary contact recreation uses or to public swimming beaches, there appears to be no value in maintaining a distinction between primary and secondary contact recreation. Furthermore, this distinction has led to some needless confusion in the course of antidegradation review and assessment of water quality. Collapsing the two subcategories into a single contact recreation use category could avoid this confusion and will simplify future monitoring and assessment.

Consideration of enterococci criteria as included in EPA's 2012 §304(a) recommendation is necessary to comply with federal requirements for consideration of EPA recommended criteria (40 CFR 131.20). Enterococci criteria are more directly related to incidences of gastrointestinal illnesses than E. coli criteria. In addition, rapid analytical techniques for enterococci are currently being developed. By adopting enterococci criteria, Idaho will be in a position to easily integrate any advances to improve sampling logistics (for example, extended holding times and field preservation to allow for monitoring and assessment of more remote waters, and rapid notification of affected swimming beaches and recreational facilities).

DEQ will also consider the adoption of statistical threshold values (STV) as criteria. The STV is a concentration that is not to be exceeded more frequently than 10% of valid samples collected in a 30-day period. The STV can be used as the basis of water quality based effluent limits (WQBEL) and for TMDL targets for non-continuous or episodic discharges.

By revising recreational use subcategories and adopting EPA's 2012 §304(a) criteria recommendation, DEQ can simplify monitoring and assessment and meet a recommendation of the 2017 Triennial Review while providing the same level of protection for Idaho water bodies.

The text of the rule will be drafted by DEQ in conjunction with a negotiating committee made up of persons having an interest in the development of this rule. Idahoans that recreate in, drink from, or fish Idaho's surface waters and all who discharge pollutants to those same waters may be interested in participating in this rulemaking.

Upon conclusion of negotiations, DEQ intends to publish a proposed rule for public comment in the fall of 2018 and then present the final proposal to the Idaho Board of Environmental Quality (Board) in November 2018 for adoption of a pending rule. If adopted by the Board, the rule will be reviewed by the 2019 Idaho Legislature.

**EFFECTIVE FOR CLEAN WATER ACT PURPOSES:** Water quality standards adopted and submitted to EPA since May 30, 2000, are not effective for federal Clean Water Act (CWA) purposes until EPA approves them (see **40 CFR 131.21**). This is known as the Alaska Rule. This rulemaking will be promulgated so that the existing rule, which continues to be effective for CWA purposes, remains in the Idaho Administrative Code until EPA approves the rule revisions. Notations explaining the effectiveness of the rule sections are also included. Upon EPA approval, the revised rule will become effective for CWA purposes and the previous rule and notations will be deleted from the Idaho Administrative Code. Information regarding the status of EPA review will be posted at <http://www.deq.idaho.gov/epa-actions-on-proposed-standards>

**ASSISTANCE ON TECHNICAL QUESTIONS AND SUBMISSION OF WRITTEN COMMENTS:**

For assistance on questions concerning this rulemaking, contact Jason Pappani at [Jason.Pappani@deq.idaho.gov](mailto:Jason.Pappani@deq.idaho.gov), (208) 373-0515.

Written comments may be submitted by mail, fax or email at the address below. The written comment deadline on the preliminary draft rule is June 8, 2018. Information regarding future public comment opportunities provided throughout the negotiated rulemaking process is available at [www.deq.idaho.gov/58-0102-1802](http://www.deq.idaho.gov/58-0102-1802) or by contacting the undersigned.

Dated this 2nd day of May, 2018.

Paula J. Wilson  
Hearing Coordinator  
Department of Environmental Quality  
1410 N. Hilton Street  
Boise, Idaho 83706-1255  
Phone: (208) 373-0418 / Fax: (208) 373-0481  
E-mail: [paula.wilson@deq.idaho.gov](mailto:paula.wilson@deq.idaho.gov)

**IDAPA 60 – IDAHO STATE SOIL AND WATER CONSERVATION COMMISSION**

**60.05.01 – RESOURCE CONSERVATION AND RANGELAND DEVELOPMENT PROGRAM**

**DOCKET NO. 60-0501-1801**

**NOTICE OF INTENT TO PROMULGATE RULES – NEGOTIATED RULEMAKING**

**AUTHORITY:** In compliance with Section 67-5220, Idaho Code, and IDAPA 04.11.01, the Idaho Rules of Administrative Procedure of the Attorney General, Sections 811 through 812, notice is hereby given that this agency intends to promulgate a rule and desires public participation before publishing a proposed rule. This rulemaking action is authorized by Section 22-2718, Idaho Code.

**MEETING SCHEDULE:** The negotiated rulemaking meeting will be held as follows. Additional meetings will be scheduled if necessary.

**LIVE PUBLIC MEETING**

**Wednesday, June 20, 2018 – 9:00 a.m. to Noon\* (MDT)**

**Idaho Water Center  
322 E. Front Street  
6th Floor, Salmon/Clearwater Conference Room  
Boise, ID 83702**

**TELECONFERENCE CALL-IN**

**Toll Free: 1-877-820-7831  
Participant Code: 9223837**

*\* The negotiated rulemaking meeting is scheduled to run until noon but may adjourn early after all participants comments and concerns have been presented and considered.*

**METHOD OF PARTICIPATION:** Those interested in participating in the negotiated rulemaking process are encouraged to attend the meeting at the following location. The public may participate by telephone conference by calling the number provided in the table below. For those who cannot participate by attending the meeting, information for submitting written comments is provided at the end of this notice.

The meeting locations will be accessible to persons with disabilities, and language translators will be made available upon request. Requests for these accommodations must be made no later than five (5) days prior to the meeting date. For arrangements, contact the undersigned.

**PRELIMINARY DRAFT RULE:** The preliminary draft rule is available from the Idaho Soil and Water Conservation Commission (ISWCC) website at <https://swc.idaho.gov> or by contacting Terry Hoebelheinrich at [terry.hoebelheinrich@swc.idaho.gov](mailto:terry.hoebelheinrich@swc.idaho.gov), (208) 332-1793.

**DESCRIPTIVE SUMMARY:** ISWCC initiated this rulemaking to resolve inconsistencies between Title 22, Chapter 27, Idaho Code and the Resource Conservation and Rangeland Development Program (RCRDP) Rules, remove outdated references, resolve internal inconsistencies, and correct typographical errors. The revisions also include adding or changing provisions to streamline the loan application process, update credit guidelines, and give more flexibility to set maximum loan amounts.

The proposed changes include: Adding sections to the rules as required by the Office of Administrative Rules Coordinator. Update section 10 (Definitions) to resolve inconsistencies with Title 22, Chapter 27, Idaho Code and other rule provisions, and/or clarify ambiguous terms. Update various sections in order to streamline the application process, incorporate more comprehensive and adaptable credit standards, and give ISWCC more flexibility to set loan limits. It is intended that the text of the rules will be drafted by ISWCC in conjunction with interested persons who participate in negotiated rulemaking. ISWCC also intends to make changes throughout other Sections of the rules as needed for internal consistency, to correct typographical errors, or to remove outdated references.

**ASSISTANCE ON TECHNICAL QUESTIONS AND SUBMISSION OF WRITTEN COMMENTS:** For assistance on questions concerning this rulemaking, contact Terry Hoebelheinrich at [terry.hoebelheinrich@swc.idaho.gov](mailto:terry.hoebelheinrich@swc.idaho.gov), (208) 332-1793.

Written comments may be submitted by mail, fax or email at the address below. The written comment deadline on the preliminary draft rule is June 29, 2018. Information regarding future public comment opportunities provided throughout the negotiated rulemaking process for this rule docket is available from the ISWCC website at <https://swc.idaho.gov> or by contacting the undersigned below.

Dated this 6th day of April, 2018.

Terry Hoebelheinrich  
Loan Officer  
Idaho Soil and Water Conservation Commission  
P.O. Box 83720  
Boise, ID 83720-0083  
[terry.hoebelheinrich@swc.idaho.gov](mailto:terry.hoebelheinrich@swc.idaho.gov)  
Phone: (208) 332-1793  
Fax: (208) 332-1799

## IDAPA 61 – STATE PUBLIC DEFENSE COMMISSION

### 61.01.07 – RULES GOVERNING STANDARDS FOR DEFENDING ATTORNEYS THAT UTILIZE IDAHO’S PRINCIPLES OF AN INDIGENT DEFENSE DELIVERY SYSTEM

DOCKET NO. 61-0107-1701

#### NOTICE OF FINAL RULE – AGENCY FILING

**AUTHORITY:** In compliance with Sections 67-5224 and 67-5291, Idaho Code, notice is hereby given that the legislature has taken action by concurrent resolution on the pending rule promulgated under Docket No. 61-0107-1701. Only that section of the rule effected by House Concurrent Resolution (HCR) 56 is being reprinted here as a final rule.

**DESCRIPTIVE SUMMARY:** The following is a concise explanatory statement regarding the partial rejection:

Pursuant to **HCR 56**, IDAPA 61.01.07, “Rules Governing Standards for Defending Attorneys that Utilize Idaho’s Principles of an Indigent Defense Delivery System,” the amendment to Section 020, Subsection 01.d., only, adopted as a pending rule under Docket Number **61-0107-1701**, is not consistent with legislative intent and is rejected and declared null, void and of no force and effect. Only Section 020 is reprinted here as affected by HCR 56 following this notice.

**ASSISTANCE ON TECHNICAL QUESTIONS:** For assistance on technical questions concerning this notice, contact Dennis Stevenson, Administrative Rules Coordinator, at (208) 332-1820.

DATED this 20th day of April, 2018.

Dennis Stevenson  
Administrative Rules Coordinator  
Office of the Administrative Rules Coordinator  
Department of Administration  
P. O. Box 83720, Boise, ID 83720-0306  
E-mail: [rulescoordinator@adm.idaho.gov](mailto:rulescoordinator@adm.idaho.gov)

**The pending rule adopted under this docket was partially rejected by HCR 56.  
The following rule text is the codified final rule and includes the rejected  
pending rule text shown here as underscored and stricken.**

#### **020. PUBLIC DEFENSE ROSTERS.**

**01. Public Defense Roster Membership.** The PDC will create and maintain a roster of all indigent defense providers, defending attorneys and non-attorney staff under their regular employ or supervision who are compliant with current Indigent Defense Standards. (5-1-18)

**a.** Maintenance of Public Defense Roster. The public defense roster will be updated in November of each year or whenever there is a change requiring an update. (5-1-18)

**b.** Public Defense Roster Contents. The public defense roster will include the name of each compliant defending attorney or non-attorney staff, their Idaho State Bar Number, and professional contact information, including email address, physical address, and telephone number. The roster will also indicate the county or counties within which the defending attorney provides indigent defense services. (5-1-18)



c. Secondary Roster. The PDC will create and maintain a secondary roster of all non-compliant indigent defense providers and defending attorneys who continue to provide indigent defense services. The contents of the secondary roster will be the same as the Public Defense Roster but will include information as to how the attorney is not meeting established standards and the date on which the attorney was removed from the Public Defense Roster for such non-compliance. (5-1-18)

~~d. Former Defending Attorneys Roster. The PDC will create and maintain a roster of all attorneys who have provided indigent defense services for a county, but are no longer providing those services. The FDA Roster will include the same contents as the Public Defense Roster but will include the information regarding when they stopped providing indigent defense services and the reason why. (5-1-18)~~

d. Availability of Public Defense Roster. The rosters are available from the PDC office upon request. (5-1-18)

**02. Application for Public Defense Roster Inclusion.** Any attorney who is not employed by an indigent defense provider, who does not work under an existing indigent defense services contract, or who has become compliant after a period of non-compliance with Indigent Defense Standards, may apply to the PDC for inclusion on the Public Defense Roster. The application is available on the PDC website: <https://pdc.idaho.gov/forms>. (5-1-18)

a. Approval. Inclusion on the Public Defense Roster must be approved by the Executive Director. (5-1-17)

**03. Membership Benefits.** Membership on the public defense roster ensures access to PDC trainings and scholarships as outlined in IDAPA 61.01.01. (5-1-18)

**04. Capital Counsel Roster Membership.** The PDC will create and maintain a roster of all qualified capital defending attorneys. Inclusion on the capital counsel roster requires compliance with Standards for Defending Attorneys and current Indigent Defense Standards. (5-1-18)

a. Maintenance of Capital Counsel Roster. The capital counsel roster will be updated in November of each year, but may be updated more frequently in order to accurately reflect changes made throughout the year. (5-1-18)

b. Capital Counsel Roster Contents. The capital counsel roster will include the name of each qualified capital counsel who meets the Standards for Defending Attorneys: Capital Counsel Qualifications and Roster, their Idaho State Bar number and professional contact information including email address, physical address, and telephone number. (5-1-18)

**05. Application for Capital Counsel Roster Inclusion.** Any defending attorney who represents indigent defendants at public expense in defense of a capital crime shall apply for inclusion on the capital counsel roster. The application is available on the PDC website: <https://pdc.idaho.gov/forms>. (5-1-18)

a. Approval. The PDC must approve inclusion on the capital counsel roster. (5-1-18)

## **IDAPA 61 – STATE PUBLIC DEFENSE COMMISSION**

### **61.01.08 – RULES GOVERNING THE ADMINISTRATION OF IDAHO'S INDIGENT DEFENSE DELIVERY SYSTEMS – RULE DEFINITIONS**

**DOCKET NO. 61-0108-1801**

#### **(SECOND) NOTICE OF INTENT TO PROMULGATE RULES – NEGOTIATED RULEMAKING**

**AUTHORITY:** In compliance with Section 67-5220, Idaho Code, notice is hereby given that this agency intends to promulgate rules and desires public comment prior to initiating formal rulemaking procedures. This negotiated rulemaking action is authorized pursuant to Sections 19-850(1) and 19-862A, Idaho Code.

**METHOD OF PARTICIPATION:** Interested persons wishing to participate in the negotiated rulemaking must respond to this notice by contacting the undersigned either in writing, by email, or by calling the phone number listed below. To participate, responses must be received by May 31, 2018.

Should a reasonable number of persons respond to this notice, negotiated meetings will be scheduled and all scheduled meetings shall be posted and made accessible on the agency website at the address listed below.

Failure of interested persons to respond to this notice of intent or the lack of a sufficient number of responses to this notice of intent may result in the discontinuation of further informal proceedings. In either event, the agency shall have sole discretion in determining the feasibility of scheduling and conducting informal negotiated rulemaking and may proceed directly to formal rulemaking if proceeding with negotiated rulemaking is deemed infeasible.

Upon the conclusion of the negotiated rulemaking, any unresolved issues, all key issues considered, and conclusions reached during the negotiated rulemaking will be addressed in a written summary. The summary will be made available to interested persons who contact the agency or, if the agency chooses, the summary may be posted on the agency website.

**DESCRIPTIVE SUMMARY:** The following is a statement in nontechnical language of the substance and purpose of the intended negotiated rulemaking and the principal issues involved:

This rule will amend standards for defending attorneys and provide a workload standard to ensure that defending attorneys are handling an appropriate workload. This amendment will ensure that representation of Idaho's indigent defendants meets constitutional scrutiny.

**ASSISTANCE ON TECHNICAL QUESTIONS, MEETING ACCOMMODATIONS, SUBMISSION OF WRITTEN COMMENTS, OBTAINING DRAFT COPIES:** For assistance on technical questions concerning this negotiated rulemaking, requests for special meeting accommodations or accessibility, or to obtain a preliminary draft copy of the rule text (if available), contact Kimberly Simmons at (208) 332-1735. Materials pertaining to the negotiated rulemaking, including any available preliminary rule drafts, can be found on the State Public Defense Commission web site at the following web address: <https://pdc.idaho.gov>.

Dated this 28th day of February, 2018.

Kimberly Simmons, Executive Director  
State Public Defense Commission  
816 W. Bannock St., Suite 201  
Boise, ID 83702  
(208) 332-1725

## HOUSE CONCURRENT RESOLUTION NO. 33

LEGISLATURE OF THE STATE OF IDAHO  
Sixty-fourth Legislature, Second Regular Session – 2018

IN THE HOUSE OF REPRESENTATIVES  
HOUSE CONCURRENT RESOLUTION NO. 33  
BY RESOURCES AND CONSERVATION COMMITTEE

A CONCURRENT RESOLUTION STATING FINDINGS OF THE LEGISLATURE  
AND REJECTING A CERTAIN RULE OF THE DEPARTMENT OF FISH AND GAME RELATING TO  
RULES GOVERNING THE TAKING OF BIG GAME ANIMALS IN THE STATE OF IDAHO.

Be It Resolved by the Legislature of the State of Idaho:

WHEREAS, the Legislature is vested with authority to reject executive agency rules under the provisions of Section 67-5291, Idaho Code, in the event that the Legislature finds that the rules are not consistent with legislative intent; and

WHEREAS, it is the finding of the Legislature that certain rules of the Department of Fish and Game relating to Rules Governing the Taking of Big Game Animals in the State of Idaho are not consistent with legislative intent and should be rejected.

NOW, THEREFORE, BE IT RESOLVED by the members of the Second Regular Session of the Sixty-fourth Idaho Legislature, the House of Representatives and the Senate concurring therein, that IDAPA 13.01.08, Rules Governing the Taking of Big Game Animals in the State of Idaho, Section 421., Subsection 02., adopted as a pending rule under Docket Number **13-0108-1706**, only, be, and the same is hereby rejected and declared null, void and of no force and effect.

### Statement of Purpose / Fiscal Impact:

#### STATEMENT OF PURPOSE RS25842

This is a Concurrent Resolution to reject Subsection 02 of Section 421 of the pending rule found in Docket No. 13-0108-1706 from the Idaho Department of Fish and Game's mandatory reporting rule.

#### FISCAL NOTE

There is no fiscal impact because this is a rejection of a change to a current rule.

#### Contact:

Representative Terry Gestrin  
(208) 332-100

Adopted: February 21, 2018.

## HOUSE CONCURRENT RESOLUTION NO. 46

LEGISLATURE OF THE STATE OF IDAHO  
Sixty-fourth Legislature, Second Regular Session – 2018

IN THE HOUSE OF REPRESENTATIVES  
HOUSE CONCURRENT RESOLUTION NO. 46  
BY HEALTH AND WELFARE COMMITTEE

A CONCURRENT RESOLUTION STATING FINDINGS OF THE LEGISLATURE  
AND REJECTING A CERTAIN RULE OF THE BOARD OF DENTISTRY RELATING TO  
RULES OF THE IDAHO STATE BOARD OF DENTISTRY.

Be It Resolved by the Legislature of the State of Idaho:

WHEREAS, the Legislature is vested with authority to reject executive agency rules under the provisions of Section 67-5291, Idaho Code, in the event that the Legislature finds that the rules are not consistent with legislative intent; and

WHEREAS, it is the finding of the Legislature that certain rules of the Board of Dentistry relating to Rules of the Idaho State Board of Dentistry are not consistent with legislative intent and should be rejected.

NOW, THEREFORE, BE IT RESOLVED by the members of the Second Regular Session of the Sixty-fourth Idaho Legislature, the House of Representatives and the Senate concurring therein, that IDAPA 19.01.01, Rules of the Idaho State Board of Dentistry, adopted as a pending rule under Docket Number **19-0101-1701**, the entire rulemaking docket, be, and the same is hereby rejected and declared null, void and of no force and effect.

### Statement of Purpose / Fiscal Impact:

#### STATEMENT OF PURPOSE RS26157

This is a Concurrent Resolution to reject in its entirety a certain pending rule under Docket Number 19-0101-1701 for the Idaho State Board of Dentistry.

#### FISCAL NOTE

There is no fiscal impact because this is a pending rule rejection.

#### Contact:

Representative Kelley Packer  
(208) 332-1000

Adopted: March 6, 2018.

## HOUSE CONCURRENT RESOLUTION NO. 47

LEGISLATURE OF THE STATE OF IDAHO  
Sixty-fourth Legislature, Second Regular Session – 2018

IN THE HOUSE OF REPRESENTATIVES  
HOUSE CONCURRENT RESOLUTION NO. 47  
BY HEALTH AND WELFARE COMMITTEE

A CONCURRENT RESOLUTION STATING FINDINGS OF THE LEGISLATURE  
AND REJECTING A CERTAIN RULE OF HEALTH AND WELFARE RELATING TO  
RULES GOVERNING THE TEMPORARY ASSISTANCE FOR FAMILIES IN IDAHO (TAFI) PROGRAM.

Be It Resolved by the Legislature of the State of Idaho:

WHEREAS, the Legislature is vested with authority to reject executive agency rules under the provisions of Section 67-5291, Idaho Code, in the event that the Legislature finds that the rules are not consistent with legislative intent; and

WHEREAS, it is the finding of the Legislature that certain rules of the Department of Health and Welfare relating to Rules Governing the Temporary Assistance for Families in Idaho (TAFI) Program are not consistent with legislative intent and should be rejected.

NOW, THEREFORE, BE IT RESOLVED by the members of the Second Regular Session of the Sixty-fourth Idaho Legislature, the House of Representatives and the Senate concurring therein, that IDAPA 16.03.08, Rules Governing the Temporary Assistance for Families in Idaho (TAFI) Program, adopted as a pending rule under Docket Number **16-0308-1701**, the entire rulemaking docket, be, and the same is hereby rejected and declared null, void and of no force and effect.

### Statement of Purpose / Fiscal Impact:

#### STATEMENT OF PURPOSE RS26158

This is a Concurrent Resolution to reject in its entirety a certain pending rule under Docket Number 16-0308-1701 for the Temporary Assistance for Families in Idaho (TAFI) Program in the Department of Health and Welfare.

#### FISCAL NOTE

There is no fiscal impact because this is a pending rule rejection.

#### Contact:

Representative Kelley Packer  
(208) 332-1000

Adopted: March 6, 2018.

## HOUSE CONCURRENT RESOLUTION NO. 55

LEGISLATURE OF THE STATE OF IDAHO  
Sixty-fourth Legislature, Second Regular Session – 2018

IN THE HOUSE OF REPRESENTATIVES  
HOUSE CONCURRENT RESOLUTION NO. 55  
BY WAYS AND MEANS COMMITTEE

A CONCURRENT RESOLUTION STATING FINDINGS OF THE LEGISLATURE  
AND REJECTING A CERTAIN RULE OF THE DEPARTMENT OF JUVENILE CORRECTIONS  
RELATING TO RULES AND STANDARDS FOR SECURE JUVENILE DETENTION CENTERS.

Be It Resolved by the Legislature of the State of Idaho:

WHEREAS, the Legislature is vested with authority to reject executive agency rules under the provisions of Section 67-5291, Idaho Code, in the event that the Legislature finds that the rules are not consistent with legislative intent; and

WHEREAS, it is the finding of the Legislature that certain rules of the Department of Juvenile Corrections relating to Rules and Standards for Secure Juvenile Detention Centers are not consistent with legislative intent and should be rejected.

NOW, THEREFORE, BE IT RESOLVED by the members of the Second Regular Session of the Sixty-fourth Idaho Legislature, the House of Representatives and the Senate concurring therein, that IDAPA 05.01.02, Rules and Standards for Secure Juvenile Detention Centers, Section 010., Subsection 37., adopted as a pending rule under Docket Number **05-0102-1701**, only, be, and the same is hereby rejected and declared null, void and of no force and effect.

### Statement of Purpose / Fiscal Impact:

#### STATEMENT OF PURPOSE RS26299

This is a Concurrent Resolution to reject Section 010., Subsection 37 of Docket No. 05-0102-1701 from the Idaho Department of Juvenile Corrections. This section of the pending rule relates to the definition of pat search.

#### FISCAL NOTE

There is no fiscal impact to the General Fund or the budgets of other local entities.

#### Contact:

Representative Luke Malek  
(208) 332-1000

Adopted: March 21, 2018.

## HOUSE CONCURRENT RESOLUTION NO. 56

LEGISLATURE OF THE STATE OF IDAHO  
Sixty-fourth Legislature, Second Regular Session – 2018

IN THE HOUSE OF REPRESENTATIVES  
HOUSE CONCURRENT RESOLUTION NO. 56  
BY WAYS AND MEANS COMMITTEE

A CONCURRENT RESOLUTION STATING FINDINGS OF THE LEGISLATURE  
AND REJECTING A CERTAIN RULE OF THE STATE PUBLIC DEFENSE COMMISSION  
RELATING TO RULES GOVERNING STANDARDS FOR DEFENDING ATTORNEYS THAT  
UTILIZE IDAHO'S PRINCIPLES OF AN INDIGENT DEFENSE DELIVERY SYSTEM.

Be It Resolved by the Legislature of the State of Idaho:

WHEREAS, the Legislature is vested with authority to reject executive agency rules under the provisions of Section 67-5291, Idaho Code, in the event that the Legislature finds that the rules are not consistent with legislative intent; and

WHEREAS, it is the finding of the Legislature that certain rules of the State Public Defense Commission relating to Rules Governing Standards for Defending Attorneys that Utilize Idaho's Principles of an Indigent Defense Delivery System are not consistent with legislative intent and should be rejected.

NOW, THEREFORE, BE IT RESOLVED by the members of the Second Regular Session of the Sixty-fourth Idaho Legislature, the House of Representatives and the Senate concurring therein, that IDAPA 61.01.07, Rules Governing Standards for Defending Attorneys that Utilize Idaho's Principles of an Indigent Defense Delivery System, Section 020., Subsection 01.d., adopted as a pending rule under Docket Number **61-0107-1701**, only, be, and the same is hereby rejected and declared null, void and of no force and effect.

### Statement of Purpose / Fiscal Impact:

#### STATEMENT OF PURPOSE RS26300

This is a Concurrent Resolution to reject Section 020., Subsection 01.d., of Docket No. 61-0107-1701 from the State Public Defense Commission. This section of the pending rule relates a Former Defending Attorney Roster.

#### FISCAL NOTE

There is no fiscal impact to the General Fund or the budgets of other local entities.

#### Contact:

Representative Luke Malek  
(208) 332-1000

Adopted: March 21, 2018.

## HOUSE CONCURRENT RESOLUTION NO. 57

LEGISLATURE OF THE STATE OF IDAHO  
Sixty-fourth Legislature, Second Regular Session – 2018

IN THE HOUSE OF REPRESENTATIVES  
HOUSE CONCURRENT RESOLUTION NO. 57  
BY WAYS AND MEANS COMMITTEE

A CONCURRENT RESOLUTION STATING FINDINGS OF THE LEGISLATURE  
AND REJECTING A CERTAIN RULE OF THE COMMISSION OF  
PARDONS AND PAROLE RELATING TO RULES OF  
THE COMMISSION OF PARDONS AND PAROLE.

Be It Resolved by the Legislature of the State of Idaho:

WHEREAS, the Legislature is vested with authority to reject executive agency rules under the provisions of Section 67-5291, Idaho Code, in the event that the Legislature finds that the rules are not consistent with legislative intent; and

WHEREAS, it is the finding of the Legislature that certain rules of the Commission of Pardons and Parole relating to Rules of the Commission of Pardons and Parole are not consistent with legislative intent and should be rejected.

NOW, THEREFORE, BE IT RESOLVED by the members of the Second Regular Session of the Sixty-fourth Idaho Legislature, the House of Representatives and the Senate concurring therein, that IDAPA 50.01.01, Rules of the Commission of Pardons and Parole, Section 551., Subsections 03.c. and 03.d., adopted as a pending rule under Docket Number **50-0101-1701**, only, be, and the same are hereby rejected and declared null, void and of no force and effect.

### Statement of Purpose / Fiscal Impact:

#### STATEMENT OF PURPOSE RS26301

This is a Concurrent Resolution to reject Section 551., Subsections 03.c. and 03.d. of Docket No. 50-0101-1701 from the Idaho Commission of Pardons and Parole. This section of the pending rule relates to firearms restoration and public notice.

#### FISCAL NOTE

There is no fiscal impact to the General Fund or the budgets of other local entities.

#### Contact:

Representative Luke Malek  
(208) 332-1000

Adopted: March 21, 2018.



## HOUSE CONCURRENT RESOLUTION NO. 62

LEGISLATURE OF THE STATE OF IDAHO  
Sixty-fourth Legislature, Second Regular Session – 2018

IN THE HOUSE OF REPRESENTATIVES  
HOUSE CONCURRENT RESOLUTION NO. 62  
BY WAYS AND MEANS COMMITTEE

A CONCURRENT RESOLUTION STATING FINDINGS OF THE LEGISLATURE  
AND REJECTING A CERTAIN RULE OF THE PERSI  
(PUBLIC EMPLOYEE RETIREMENT SYSTEM OF IDAHO)  
RELATING TO PERSI CONTRIBUTION RULES.

Be It Resolved by the Legislature of the State of Idaho:

WHEREAS, the Legislature is vested with authority to reject executive agency rules under the provisions of Section 67-5291, Idaho Code, in the event that the Legislature finds that the rules are not consistent with legislative intent; and

WHEREAS, it is the finding of the Legislature that certain rules of the PERSI (Public Employee Retirement System of Idaho) relating to PERSI Contribution Rules are not consistent with legislative intent and should be rejected.

NOW, THEREFORE, BE IT RESOLVED by the members of the Second Regular Session of the Sixty-fourth Idaho Legislature, the House of Representatives and the Senate concurring therein, that IDAPA 59.01.03, PERSI Contribution Rules, adopted as a pending rule under Docket Number [59-0103-1702](#), the entire rulemaking docket, be, and the same is hereby rejected and declared null, void and of no force and effect.

### Statement of Purpose / Fiscal Impact:

#### STATEMENT OF PURPOSE RS26285

This resolution will reject one pending rule relating to Contribution Rules of Public Employee Retirement System of Idaho, adopted as a pending rule under Docket Number 59-0103-1702, the entire rulemaking docket, IDAPA 59.01.03.

#### FISCAL NOTE

The proposed rulemaking being rejected does not indicate any negative fiscal impact on the state general fund because the rejection will be published with the proposed rules.

#### Contact:

Representative Mike Kingsley  
(208) 332-1000

Adopted: March 22, 2018.

## SENATE CONCURRENT RESOLUTION NO. 137

LEGISLATURE OF THE STATE OF IDAHO  
Sixty-fourth Legislature, Second Regular Session – 2018

IN THE SENATE  
SENATE CONCURRENT RESOLUTION NO. 137  
BY JUDICIARY AND RULES COMMITTEE COMMITTEE

A CONCURRENT RESOLUTION STATING FINDINGS OF THE LEGISLATURE  
AND REJECTING A CERTAIN RULE OF THE IDAHO STATE POLICE RELATING TO  
RULES OF THE IDAHO PEACE OFFICER STANDARDS AND TRAINING COUNCIL.

Be It Resolved by the Legislature of the State of Idaho:

WHEREAS, the Legislature is vested with authority to reject executive agency rules under the provisions of Section 67-5291, Idaho Code, in the event that the Legislature finds that the rules are not consistent with legislative intent; and

WHEREAS, it is the finding of the Legislature that certain rules of the Idaho State Police relating to Rules of the Idaho Peace Officer Standards and Training Council are not consistent with legislative intent and should be rejected.

NOW, THEREFORE, BE IT RESOLVED by the members of the Second Regular Session of the Sixty-fourth Idaho Legislature, the Senate and the House of Representatives concurring therein, that IDAPA 11.11.01, Rules of the Idaho Peace Officer Standards and Training Council, Section 201., Subsection 01.d., adopted as a pending rule under Docket Number **11-1101-1701**, only, be, and the same is hereby rejected and declared null, void and of no force and effect.

### Statement of Purpose / Fiscal Impact:

#### STATEMENT OF PURPOSE RS25875

This Concurrent Resolution rejects the amended language within Section 201 of the Rules of the Idaho Peace Officer Standards and Training Council due to the Legislature finding that the language is not consistent with the legislative intent, and also corrects a transcription error that occurred during the publication of the docket.

#### FISCAL NOTE

There will be no Fiscal impact.

#### Contact:

Victor McCraw, POST Division Administrator  
(208) 884-7251

Dennis Stevenson, State Administrative Rules Coordinator  
(208) 332-1822

Adopted: March 15, 2018.

## **SENATE CONCURRENT RESOLUTION NO. 139**

LEGISLATURE OF THE STATE OF IDAHO  
Sixty-fourth Legislature, Second Regular Session – 2018

IN THE SENATE  
SENATE CONCURRENT RESOLUTION NO. 139  
BY JUDICIARY AND RULES COMMITTEE COMMITTEE

A CONCURRENT RESOLUTION STATING FINDINGS OF THE LEGISLATURE  
AND REJECTING A CERTAIN RULE OF THE IDAHO STATE POLICE RELATING TO  
RULES OF THE IDAHO PEACE OFFICER STANDARDS AND TRAINING COUNCIL.

Be It Resolved by the Legislature of the State of Idaho:

WHEREAS, the Legislature is vested with authority to reject executive agency rules under the provisions of Section 67-5291, Idaho Code, in the event that the Legislature finds that the rules are not consistent with legislative intent; and

WHEREAS, it is the finding of the Legislature that certain rules of the Idaho State Police relating to Rules of the Idaho Peace Officer Standards and Training Council are not consistent with legislative intent and should be rejected.

NOW, THEREFORE, BE IT RESOLVED by the members of the Second Regular Session of the Sixty-fourth Idaho Legislature, the Senate and the House of Representatives concurring therein, that IDAPA 11.11.01, Rules of the Idaho Peace Officer Standards and Training Council, Section 064., Subsection 05., adopted as a pending rule under Docket Number **11-1101-1701**, only, be, and the same is hereby rejected and declared null, void and of no force and effect.

### **Statement of Purpose / Fiscal Impact:**

#### **STATEMENT OF PURPOSE RS26239**

This Concurrent Resolution rejects executive agency rules under the provisions of Section 67-5291 of the Rules of the Idaho State Police relating to the Rules of the Idaho Peace Officer Standards and Training Council due to the Legislature finding that the language is not consistent with the legislative intent.

#### **FISCAL NOTE**

No Fiscal Impact is expected because this is a pending administrative rule.

#### **Contact:**

Victor McCraw, Division Administrator POST  
(208) 884-7251

Dennis Stevenson, State Administrative Rules Coordinator  
(208) 332-1822

Adopted: March 15, 2018.

# SENATE CONCURRENT RESOLUTION NO. 149

LEGISLATURE OF THE STATE OF IDAHO  
Sixty-fourth Legislature, Second Regular Session – 2018

IN THE SENATE  
SENATE CONCURRENT RESOLUTION NO. 149  
BY STATE AFFAIRS COMMITTEE

A CONCURRENT RESOLUTION STATING LEGISLATIVE FINDINGS  
AND APPROVING ADMINISTRATIVE RULES THAT IMPOSE A FEE OR CHARGE.

Be It Resolved by the Legislature of the State of Idaho:

WHEREAS, the Legislature pursuant to Section 67-5224, Idaho Code, must approve certain administrative rules that impose a fee or charge by adoption of a concurrent resolution before the rules become effective; and

WHEREAS, the Legislature is vested with authority to reject executive agency rules under the provisions of Section 67-5291, Idaho Code, in the event that the Legislature finds that the rules are not consistent with legislative intent; and

WHEREAS, the Legislature finds that it is in the public interest to adopt this resolution.

NOW, THEREFORE, BE IT RESOLVED by the members of the Second Regular Session of the Sixty-fourth Idaho Legislature, the Senate and the House of Representatives concurring therein, that all pending administrative rules or portions of pending administrative rules adopted by state agencies pursuant to the Administrative Procedure Act during the prior calendar year, and submitted through the Office of the Administrative Rules Coordinator to the Legislature for review during the 2018 legislative session, which impose a fee or charge, be, and the same are approved and shall be in full force and effect upon the adoption of this concurrent resolution or upon the date specified in the administrative rule.

BE IT FURTHER RESOLVED that rule provisions imposing fees or charges that were not submitted through the Office of Rules Coordinator for legislative review or that otherwise are not included and approved in this concurrent resolution shall be null, void and of no force and effect unless approved by adoption of a separate concurrent resolution by both houses of the Legislature as provided in Section 67-5224, Idaho Code.

## Statement of Purpose / Fiscal Impact:

### STATEMENT OF PURPOSE RS26404

By statute, state agency rules promulgated under the Idaho Administrative Procedures Act that impose a fee or charge do not go into effect unless approved by concurrent resolution of the Legislature. This concurrent resolution approves agency rules imposing a fee or charge that were adopted during the prior calendar year and were submitted through the Office of the Administrative Rules Coordinator to the Legislature for review during the 2018 legislative session which shall be in full force and effect upon the adoption of this concurrent resolution or upon the date specified in the administrative rule.

### FISCAL NOTE

Adoption of this concurrent resolution, in and of itself, could have no fiscal impact upon any state or local government funds or accounts beyond the scope or impact of the individual fee rules themselves.

### Contact:

Dennis Stevenson, Administrative Rules Coordinator  
Department of Administration  
(208) 332-1822

Adopted: March 22, 2018.

# SENATE CONCURRENT RESOLUTION NO. 150

LEGISLATURE OF THE STATE OF IDAHO  
Sixty-fourth Legislature, Second Regular Session – 2018

IN THE SENATE  
SENATE CONCURRENT RESOLUTION NO. 150  
BY STATE AFFAIRS COMMITTEE

A CONCURRENT RESOLUTION STATING LEGISLATIVE FINDINGS AND  
APPROVING AND EXTENDING TEMPORARY RULES REVIEWED BY THE LEGISLATURE.

Be It Resolved by the Legislature of the State of Idaho:

WHEREAS, the Legislature by statute must approve temporary rules by adoption of a concurrent resolution approving the rule if the temporary rule is to remain in effect beyond the end of the current legislative session; and

WHEREAS, the expiration of temporary rules would occasion additional expense to state agencies in readopting and republishing temporary rules needed to conduct state business; and

WHEREAS, the Legislature finds that it is in the public interest to adopt this resolution.

NOW, THEREFORE, BE IT RESOLVED by the members of the Second Regular Session of the Sixty-fourth Idaho Legislature, the Senate and the House of Representatives concurring therein, that all temporary rules adopted by state agencies pursuant to the Administrative Procedure Act and submitted to the Legislature at the Legislature's request through the Office of the Administrative Rules Coordinator for review during the 2018 legislative session, be, and the same are approved.

BE IT FURTHER RESOLVED that a temporary rule or partial temporary rule approved by this concurrent resolution shall remain in effect until it expires by its own terms or by operation of law or until it is replaced by a final rule, but in no event shall a temporary rule remain in effect beyond the conclusion of the First Regular Session of the Sixty-fifth Idaho Legislature unless it is further extended by adoption of a concurrent resolution by both houses of the Legislature. Temporary rules or sections of temporary rules which are excepted from approval hereunder or which were not submitted to the Legislature for review during the 2018 legislative session shall expire by operation of statute upon adjournment of the Second Regular Session of the Sixty-fourth Idaho Legislature, unless approved by adoption of a separate concurrent resolution by both houses of the Legislature.

## Statement of Purpose / Fiscal Impact:

### STATEMENT OF PURPOSE RS26405

By statute, temporary rules promulgated by state agencies under the Idaho Administrative Procedures Act expire at the end of the current legislative session. This concurrent resolution approves and extends state agency temporary rules beyond the current legislative session.

### FISCAL NOTE

Adoption of this concurrent resolution, in and of itself, could have no fiscal impact upon any state or local government funds or accounts beyond the scope of impact of the individual rules themselves. By adopting this concurrent resolution, the Legislature avoids having agency rules expire, which would occasion additional expense to state agencies for readopting and republishing temporary rules needed to conduct state business.

### Contact:

Dennis Stevenson, Administrative Rules Coordinator  
Department of Administration  
(208) 332-1822

Adopted: March 22, 2018.

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# LEGAL NOTICE

## Summary of Proposed Rulemakings

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### **PUBLIC NOTICE OF INTENT TO PROPOSE OR PROMULGATE NEW OR CHANGED AGENCY RULES**

The following agencies of the state of Idaho have published the complete text and all related, pertinent information concerning their intent to change or make the following rules in the latest publication of the state Administrative Bulletin.

*The proposed rule public hearing request deadline is May 16, 2018, unless otherwise posted.  
The proposed rule written comment submission deadline is May 23, 2018, unless otherwise posted.  
(Temp & Prop) indicates the rulemaking is both Temporary and Proposed.  
(\*PH) indicates that a public hearing has been scheduled.*

#### **IDAPA 16 – DEPARTMENT OF HEALTH AND WELFARE PO Box 83720, Boise, ID 83720-0036**

*16-0208-1801, Vital Statistics Rules.* (Temp & Prop) Establishes a process for the amendment of a gender marker on a birth certificate; requires a notarized affidavit from the applicant; prohibits the marking of the replacement birth certificate as amended; and designates that a previous or concurrent name change must not show revision history, or be marked as amended.

*\*16-0315-1801, Secure Treatment Facility for People With Intellectual Disabilities.* (\*PH) New chapter sets standards and provides the licensing requirements and the criteria for use of restrictive or secure features at this type of facility, including staffing, treatment requirements, and enforcement remedies; provides for and addresses client rights. Comment By: 6/30/18

#### **IDAPA 19 – IDAHO STATE BOARD OF DENTISTRY PO Box 83720, Boise, ID 83720-0021**

*19-0101-1801, Rules of the Idaho State Board of Dentistry.* Deletes the American Dental Association's sedation-related documents as incorporated by reference; the rule regarding moderate sedation (19.01.01.060) is being amended by the addition of qualifying course requirements.

#### **NOTICE OF ADOPTION OF TEMPORARY RULE**

##### **IDAPA 28 – DEPARTMENT OF COMMERCE**

*28-0203-1801* – Rules of the Idaho Regional Travel and Convention Grant Program (eff. 3-2-18)T

#### **NOTICES OF PROPOSED PROCLAMATION OF THE FISH AND GAME COMMISSION**

##### **IDAPA 13 – IDAHO DEPARTMENT OF FISH AND GAME**

*13-0108-1701P (amended)*, Rules Governing the Taking of Big Game Animals in the State of Idaho

*13-0108-1801P*, Rules Governing the Taking of Big Game Animals in the State of Idaho

*13-0109-1802P*, Rules Governing the Taking of Game Birds in the State of Idaho

*13-0111-1802P*, Rules Governing Fish

**NOTICE OF INTENT TO PROMULGATE – NEGOTIATED RULEMAKING****IDAPA 02 – DEPARTMENT OF AGRICULTURE**

*02-0501-1801*, Rules Governing Produce Safety (see Bulletin for scheduled meeting dates/times)

**IDAPA 07 – DIVISION OF BUILDING SAFETY**

*07-0206-1702 (3rd Notice)*, Rules Concerning Idaho State Plumbing Code (see Bulletin for scheduled meeting dates/times)

*07-0401-1801*, Rules Governing Safety Inspections – General (see Bulletin for scheduled meeting dates/times)

*07-0901-1801*, Safety and Health Rules for Places of Public Employment (see Bulletin for scheduled meeting dates/times)

*07-1001-1801*, Rules Governing the Damage Prevention Board, Division of Building Safety (see Bulletin for scheduled meeting dates/times)

**IDAPA 16 – DEPARTMENT OF HEALTH AND WELFARE**

*16-0310-1704 (3rd Notice)*, Medicaid Enhanced Plan Benefits (see Bulletin for scheduled meeting dates/times)

*16-0310-1801*, Medicaid Enhanced Plan Benefits (see Bulletin for scheduled meeting dates/times)

*16-0314-1801*, Rules and Minimum Standards for Hospitals in Idaho (see Bulletin for scheduled meeting dates/times)

**IDAPA 35 – STATE TAX COMMISSION**

*35-0102-1801*, Idaho Sales and Use Tax Administrative Rules (see Bulletin for participation information)

*35-0103-1801*, Property Tax Administrative Rules (see Bulletin for participation information)

**IDAPA 39 – IDAHO TRANSPORTATION DEPARTMENT**

*39-0300-1801*, Vehicles and/or Loads That are Required to Operate Under an Overlegal Permit (see Bulletin for scheduled meeting dates/times)

**IDAPA 47 – DIVISION OF VOCATIONAL REHABILITATION**

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Please refer to the Idaho Administrative Bulletin, **May 5, 2018, Volume 18-5**, for the notices and text of all rulemakings, public hearings schedules, information on negotiated rulemakings, executive orders of the Governor, and agency contact information.

*Issues of the Idaho Administrative Bulletin can be viewed at [adminrules.idaho.gov](http://adminrules.idaho.gov).*

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# **CUMULATIVE RULEMAKING INDEX OF IDAHO ADMINISTRATIVE RULES**

*Office of the Administrative Rules Coordinator  
Idaho Department of Administration*

*July 1, 1993 — Present*

## [CUMULATIVE RULEMAKING INDEX OF IDAHO ADMINISTRATIVE RULES](#)

This online index provides a history of all agency rulemakings beginning with the first Administrative Bulletin in July 1993 to the most recent Bulletin publication. It tracks all rulemaking activities on each chapter of rules by the rulemaking docket numbers and includes negotiated, temporary, proposed, pending and final rules, public hearing notices, vacated rulemaking notices, notice of legislative actions taken on rules, and executive orders of the Governor.

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**(Index of Current and Active Rulemakings)**

*Office of the Administrative Rules Coordinator  
Idaho Department of Administration*

*March 29, 2017 — May 2, 2018*

*(eff. PLR) - Final Effective Date Is Pending Legislative Review*

*(eff. date)L - Denotes Adoption by Legislative Action*

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*SCR # - denotes the number of a Senate Concurrent Resolution (Legislative Action)*

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- 08-0204-1701** Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)  
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**08.03.01, Rules of the Public Charter School Commission**

- 08-0301-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-5  
**08-0301-1701** Temporary and Proposed Rulemaking, Bulletin Vol. 17-10 (eff. 8-31-17)T  
**08-0301-1701** Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)  
**08-0301-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

**08.04.01, Rules of the Idaho Digital Learning Academy - State Board of Education Rules**

- 08-0401-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-6  
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**08-0401-1701** Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)  
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- 08-0501-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7  
**08-0501-1701** Proposed Rulemaking, Bulletin Vol. 17-10  
**08-0501-1701** Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)  
**08-0501-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

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**09-0130-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

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**10-0101-1701** Adoption of Pending Rule, Bulletin Vol. 17-11 (PLR 2018)  
**10-0101-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

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- 10-0102-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 16-11  
**10-0102-1701** Proposed Rulemaking, Bulletin Vol. 17-7  
**10-0102-1701** Adoption of Pending Rule, Bulletin Vol. 17-9 (PLR 2018)  
**10-0102-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

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- 10-0104-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-6  
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**10-0104-1701** Adoption of Pending Rule, Bulletin Vol. 17-11 (PLR 2018)  
**10-0104-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

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- 11-0201-1701** Notice of Public Hearing (Fee Rule), Bulletin Vol. 18-2
- 11-0201-1701** OARC Omnibus Notice of Legislative Action-Extension of Temporary Rule by SCR 150, Bulletin Vol. 18-5 (eff. 10-2-17)T

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- 11-0301-1801** Adoption of Temporary Rule, Bulletin Vol. 18-1 (eff. 12-14-17)T
- 11-0301-1801** OARC Omnibus Notice of Legislative Action-Extension of Temporary Rule by SCR150, Bulletin Vol. 18-5 (eff. 12-14-17)T

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- 11-0406-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

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- 11-1101-1701** OARC Omnibus Notice of Legislative Action - Partial Rejection of Pending Rule by SCRs 137 and 139, Bulletin Vol. 18-5 (eff. 3-15-18)
- 11-1101-1701** Notice of Final Rule - Agency Filing - Partial Rejection of Pending Rule by SCRs 137 and 139, Bulletin Vol. 18-5 (eff. 3-15-18)

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- 11-1105-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

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- 12-0110-1701** Adoption of Pending Rule, Bulletin Vol. 17-12 (eff. PLR 2018)
- 12-0110-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

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- 13-0104-1703** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7
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- 13-0104-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)
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- 13-0106-1701 Proposed Rulemaking, Bulletin Vol. 17-10
- 13-0106-1701 Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 13-0106-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

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- 13-0108-1701P\* Notice of Proclamation, Bulletin Vol. 17-5
- 13-0108-1702 Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7
- 13-0108-1703 Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7
- 13-0108-1704 Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7
- 13-0108-1704 Proposed Rulemaking, Bulletin Vol. 17-10
- 13-0108-1705 *Temporary and Proposed Rulemaking, Bulletin Vol. 17-10 (eff. 12-1-17)T (Rescinded eff 12-1-17)*
- 13-0108-1706 Proposed Rulemaking, Bulletin Vol. 17-10
- 13-0108-1705 *Notice of Vacation of Proposed Rulemaking and Rescission of Temporary Rule, Bulletin Vol. 17-12 (eff.12-1-17)*
- 13-0108-1704 Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
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- 13-0108-1701P\* Notice of Amended Proclamation of Rulemaking, Bulletin Vol. 18-5
- 13-0108-1704 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)
- 13-0108-1706 OARC Omnibus Notice of Legislative Action-Partial Rejection of Pending Rule by HCR 33, Bulletin Vol. 18-5 (eff. 2-21-18)
- 13-0108-1706 Notice of Final Rule - Agency Filing - Partial Rejection of Pending Rule by HCR 33, Bulletin Vol. 18-5 (eff. 2-21-18)
- 13-0108-1801P Notice of Proclamation of Rulemaking, Bulletin Vol. 18-5

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- 13-0109-1702P Notice of Proclamation, Bulletin Vol. 17-5
- 13-0109-1703P Notice of Proclamation, Bulletin Vol. 17-7
- 13-0109-1704P Notice of Proclamation, Bulletin Vol. 17-10
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15-0401-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

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- 16-0202-1701 Proposed Rulemaking, Bulletin Vol. 17-10
- 16-0202-1701 Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 16-0202-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 7-1-18)

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- 16-0204-1701 (Second) Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-6
- 16-0204-1701 Proposed Rulemaking (Chapter Repeal), Bulletin Vol. 17-9
- 16-0204-1701 Adoption of Pending Rule (Chapter Repeal), Bulletin Vol. 18-1 (eff. PLR 2018)
- 16-0204-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 7-1-18)

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- 16-0210-1701 OARC Omnibus Notice of Legislative Action - Extension of Temporary Rule by SCR 121, Bulletin Vol. 17-5
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- 16-0212-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 7-1-18)

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- 16-0301-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)
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- 16-0305-1701 Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7
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- 16-0305-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

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- 16-0308-1701 Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7
- 16-0308-1701 Proposed Rulemaking, Bulletin Vol. 17-10
- 16-0308-1701 Adoption of Pending Rule, Bulletin Vol. 17-12 (eff. PLR 2018)
- 16-0308-1701 OARC Omnibus Notice of Legislative Action - Rejection of Pending Rule by HCR 47, Bulletin Vol. 18-5 (null & void)

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- 16-0310-1704 2nd (Second) Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-12
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- 16-0310-1703 Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 16-0310-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)
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- 16-0315-1801 Notice of Intent to Promulgate a Rule (New Chapter) - Negotiated Rulemaking, Bulletin Vol. 18-1
- 16-0315-1801 Adoption of Temporary Rule and Notice of Public Hearing, Bulletin Vol. 18-4 (eff. 2-22-18)T
- 16-0315-1801 Proposed Rulemaking (New Chapter), Bulletin Vol. 18-5

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- 16-0318-1701 Proposed Rulemaking (Fee Rule), Bulletin Vol. 17-10
- 16-0318-1701 Adoption of Pending Fee Rule, Bulletin Vol. 17-12 (eff. PLR 2018)
- 16-0318-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Fee Rule by SCR 149, Bulletin Vol. 18-5 (eff. 3-22-18)

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- 16-0319-1701 Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-5
- 16-0319-1701 Proposed Rulemaking, Bulletin Vol. 17-9
- 16-0319-1701 Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
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- 16-0417-1701 2nd Notice of Intent to Promulgate a Rule (2nd Notice) - Negotiated Rulemaking, Bulletin Vol. 17-1
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- 16-0417-1701 Proposed Rulemaking (Chapter Repeal), Bulletin Vol. 17-8
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- 16-0417-1702 Adoption of Pending Rule (Chapter Rewrite), Bulletin Vol. 18-1 (eff. PLR 2018)
- 16-0417-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule (Repeal), Bulletin Vol. 18-5 (eff. 7-1-18)
- 16-0417-1702 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule (Rewrite), Bulletin Vol. 18-5 (eff. 7-1-18)

**16.05.03, Rules Governing Contested Cases Proceedings and Declaratory Rulings**

- 16-0503-1701 Proposed Rulemaking, Bulletin Vol. 17-9
- 16-0503-1701 Adoption of Pending Rule and Temporary Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 16-0503-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

**16.05.07, The Investigation and Enforcement of Fraud, Abuse, and Misconduct**

- 16-0507-1701 Proposed Rulemaking, Bulletin Vol. 17-10
- 16-0507-1701 Adoption of Pending Rule, Bulletin Vol. 17-12 (eff. PLR 2018)
- 16-0507-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

**16.06.01, Child and Family Services**

- 16-0601-1701 Temporary and Proposed Rulemaking, Bulletin Vol. 17-7 (eff. 7-1-17)T
- 16-0601-1702 Proposed Rulemaking, Bulletin Vol. 17-9
- 16-0601-1701 Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 16-0601-1702 Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 16-0601-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)
- 16-0601-1702 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

**16.06.12, Rules Governing the Idaho Child Care Program (ICCP)**

- 16-0612-1701 Proposed Rulemaking, Bulletin Vol. 17-10
- 16-0612-1701 Adoption of Pending Rule, Bulletin Vol. 17-12 (eff. PLR 2018)
- 16-0612-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

**16.07.15, Behavioral Health Programs**

- 16-0715-1701 Proposed Rulemaking, Bulletin Vol. 17-9
- 16-0715-1701 Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 16-0715-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 7-1-18)

**16.07.17, Substance Use Disorders Services**

- 16-0717-1701 Proposed Rulemaking, Bulletin Vol. 17-9
- 16-0717-1701 Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 16-0717-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 7-1-18)

**16.07.30, Behavioral Health Community Crisis Centers**

- 16-0730-1701 Proposed Rulemaking, Bulletin Vol. 17-9
- 16-0730-1701 Adoption of Pending Rule, Bulletin Vol. 17-12 (eff. PLR 2018)
- 16-0730-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 7-1-18)

**16.07.33, Adult Mental Health Services**

- 16-0733-1701 Proposed Rulemaking, Bulletin Vol. 17-9



- 16-0733-1701 Adoption of Pending Rule, Bulletin Vol. 17-12 (eff. PLR 2018)  
16-0733-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 7-1-18)

**16.07.37, Children's Mental Health Services**

- 16-0737-1701 Proposed Rulemaking, Bulletin Vol. 17-10  
16-0737-1701 Adoption of Pending and Temporary Rule, Bulletin Vol. 17-12 (eff. (1-1-18)T, PLR 2018)  
16-0737-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 7-1-18)

**16.07.50, Minimum Standards for Non-hospital, Medically-Monitored Detoxification/  
Mental Health Diversion Units**

- 16-0750-1701 Proposed Rulemaking, Bulletin Vol. 17-9  
16-0750-1701 Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)  
16-0750-1701 OARCC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 7-1-18)

**IDAPA 17 – INDUSTRIAL COMMISSION****17.02.04, Administrative Rules of the IC Under the Worker's Compensation Law - Benefits**

- 17-0204-1701 Proposed Rulemaking, Bulletin Vol. 17-11  
17-0204-1702 Proposed Rulemaking, Bulletin Vol. 17-11  
17-0204-1701 Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)  
17-0204-1702 Vacation of Proposed Rulemaking, Bulletin Vol. 18-1  
17-0204-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

**17.02.07, Procedures to Obtain Compensation**

- 17-0207-1701 Adoption of Temporary Rule, Bulletin Vol. 17-5 (eff. 3-1-17)T  
17-0207-1701 Proposed Rulemaking, Bulletin Vol. 17-11  
17-0207-1701 Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)  
17-0207-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

**17.02.08, Miscellaneous Provisions**

- 17-0208-1701 Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-6  
17-0208-1701 Proposed Rulemaking, Bulletin Vol. 17-11  
17-0208-1701 Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)  
17-0208-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

**17.02.09, Medical Fees**

- 17-0209-1701 Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-6

**17.02.10, Administrative Rules of the Industrial Commission Under the Workers' Compensation Law --  
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- 17-0210-1701 Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-6  
17-0210-1701 Proposed Rulemaking, Bulletin Vol. 17-11  
17-0210-1701 Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)  
17-0210-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

**17.02.11, Administrative Rules of the Industrial Commission Under the Workers' Compensation Law --  
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- 17-0211-1701 Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-6  
17-0211-1701 Proposed Rulemaking, Bulletin Vol. 17-11  
17-0211-1701 Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)  
17-0211-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

**IDAPA 18 – DEPARTMENT OF INSURANCE**

**18.01.02, Insurance Policy Titles**

- 18-0102-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7
- 18-0102-1701** Proposed Rulemaking (Chapter Repeal), Bulletin Vol. 17-9
- 18-0102-1701** Adoption of Pending Rule (Chapter Repeal), Bulletin Vol. 17-11 (PLR 2018)
- 18-0102-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

**18.01.08, Filing of Life Policy Forms**

- 18-0108-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7
- 18-0108-1701** Proposed Rulemaking (Chapter Repeal), Bulletin Vol. 17-9
- 18-0108-1701** Adoption of Pending Rule (Chapter Repeal), Bulletin Vol. 17-11 (PLR 2018)
- 18-0108-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

**18.01.20, Automobile Insurance Policies**

- 18-0120-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7
- 18-0120-1701\*** Proposed Rulemaking, Bulletin Vol. 17-9
- 18-0120-1701\*** Adoption of Pending Rule, Bulletin Vol. 17-11 (PLR 2018)
- 18-0120-1701\*** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)  
(\*Changes chapter name from: "Cancellation of, or Refusal to Renew Automobile Insurance Policies"  
to: "Automobile Insurance Policies")

**18.01.22, Sale of Insurance by Vending Machines**

- 18-0122-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7
- 18-0122-1701** Proposed Rulemaking (Chapter Repeal), Bulletin Vol. 17-9
- 18-0122-1701** Adoption of Pending Rule, Bulletin Vol. 17-11 (PLR 2018)
- 18-0122-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

**18.01.25, Title Insurance and Title Insurance Agents and Escrow Officers**

- 18-0125-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7
- 18-0125-1701** Proposed Rulemaking, Bulletin Vol. 17-9
- 18-0125-1701** Adoption of Pending Rule, Bulletin Vol. 17-11 (PLR 2018)
- 18-0125-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

**18.01.30, Individual Disability and Group Supplemental Disability Insurance Minimum Standards Rule**

- 18-0130-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7
- 18-0130-1701** Proposed Rulemaking, Bulletin Vol. 17-9
- 18-0130-1701** Adoption of Pending Rule, Bulletin Vol. 17-11 (PLR 2018)
- 18-0130-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

**18.01.35, Guidelines Respecting the Use of Claim Forms for Disability Insurance Claims**

- 18-0135-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7
- 18-0135-1701** Proposed Rulemaking (Chapter Repeal), Bulletin Vol. 17-9
- 18-0135-1701** Adoption of Pending Rule, Bulletin Vol. 17-11 (PLR 2018)
- 18-0135-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

**18.01.56, Rebates and Illegal Inducements to Obtaining Title Insurance Business Rules**

- 18-0156-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7
- 18-0156-1701** Proposed Rulemaking, Bulletin Vol. 17-9
- 18-0156-1701** Adoption of Pending Rule, Bulletin Vol. 17-11 (PLR 2018)
- 18-0156-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

**18.01.73, Rule to Implement the Individual Health Insurance Availability Act Plan Design**

- 18-0173-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7
- 18-0173-1701** Proposed Rulemaking (Chapter Repeal), Bulletin Vol. 17-9
- 18-0173-1701** Adoption of Pending Rule, Bulletin Vol. 17-11 (PLR 2018)
- 18-0173-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

***18.01.75, Credit for Reinsurance Rules***

- 18-0175-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-6
- 18-0175-1701** Proposed Rulemaking, Bulletin Vol. 17-8
- 18-0175-1701** Notice of Adoption of Pending Rule, Bulletin Vol. 17-10 (PLR 2018)
- 18-0175-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

***18.01.81, Corporate Governance Annual Disclosure***

- 18-0181-1701** Notice of Intent to Promulgate a Rule (New Chapter) - Negotiated Rulemaking, Bulletin Vol. 17-6
- 18-0181-1701** Proposed Rulemaking (New Chapter), Bulletin Vol. 17-8
- 18-0181-1701** Notice of Adoption of Pending Rule (New Chapter), Bulletin Vol. 17-10 (PLR 2018)
- 18-0181-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

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- 19-0101-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7
- 19-0101-1702** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7
- 19-0101-1703** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7
- 19-0101-1701** Proposed Rulemaking, Bulletin Vol. 17-9
- 19-0101-1702** Proposed Rulemaking, Bulletin Vol. 17-9
- 19-0101-1703** Proposed Rulemaking, Bulletin Vol. 17-9
- 19-0101-1701** Adoption of Pending Rule, Bulletin Vol. 17-11 (PLR 2018)
- 19-0101-1702** Adoption of Pending Rule, Bulletin Vol. 17-11 (PLR 2018)
- 19-0101-1703** Adoption of Pending Rule, Bulletin Vol. 17-11 (PLR 2018)
- 19-0101-1801** Adoption of Temporary Rule, Bulletin Vol. 18-3 (eff. 3-30-18)T
- 19-0101-1701** OARC Omnibus Notice of Legislative Action - Rejection of Pending Rule by HCR 46, Bulletin Vol. 18-5 (null & void)
- 19-0101-1702** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)
- 19-0101-1703** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)
- 19-0101-1801** Proposed Rulemaking, Bulletin Vol. 18-5

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- 20-0401-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-10

***IDAPA 21 – DIVISION OF VETERANS SERVICES******21.01.01, Rules Governing Admission, Residency, and Maintenance Charges in Idaho State Veterans Homes and Division of Veterans Services Administrative Procedure***

- 21-0101-1701** Temporary and Proposed Rulemaking, Bulletin Vol. 17-7 (eff. 7-1-17)T
- 21-0101-1701** Adoption of Pending Rule, Bulletin Vol. 17-9 (PLR 2018)
- 21-0101-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

***IDAPA 22 – BOARD OF MEDICINE******22.01.13, Rules for the Licensure of Dietitians***

- 22-0113-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-8
- 22-0113-1701** Proposed Rulemaking, Bulletin Vol. 17-10
- 22-0113-1701** Adoption of Pending Rule, Bulletin Vol. 17-12 (eff. PLR 2018)
- 22-0113-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

***IDAPA 23 – BOARD OF NURSING******23.01.01, Rules of the Idaho Board of Nursing***

- 23-0101-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7
- 23-0101-1701** Proposed Rulemaking, Bulletin Vol. 17-9
- 23-0101-1701** Adoption of Pending Rule, Bulletin Vol. 17-11 (PLR 2018)
- 23-0101-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

***IDAPA 24 – BUREAU OF OCCUPATIONAL LICENSES******24.01.01, Rules of the Board of Architectural Examiners***

- 24-0101-1701** Proposed Rulemaking (Fee Rule), Bulletin Vol. 17-10
- 24-0101-1701** Adoption of Pending Fee Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 24-0101-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Fee Rule by SCR 149, Bulletin Vol. 18-5 (eff. 3-22-18)

***24.03.01, Rules of the State Board of Chiropractic Physicians***

- 24-0301-1701** Proposed Rulemaking (Fee Rule), Bulletin Vol. 17-10
- 24-0301-1701** Adoption of Pending Fee Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 24-0301-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Fee Rule by SCR 149, Bulletin Vol. 18-5 (eff. 3-22-18)

***24.06.01, Rules for the Licensure of Occupational Therapists and Occupational Therapy Assistants***

- 24-0601-1701** Proposed Rulemaking (Fee Rule), Bulletin Vol. 17-10
- 24-0601-1701** Adoption of Pending Fee Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 24-0601-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Fee Rule by SCR 149, Bulletin Vol. 18-5 (eff. 3-22-18)

***24.07.01, Rules of the Idaho State Board of Landscape Architects***

- 24-0701-1701** Proposed Rulemaking (Fee Rule), Bulletin Vol. 17-10
- 24-0701-1701** Adoption of Pending Fee Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 24-0701-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Fee Rule by SCR 149, Bulletin Vol. 18-5 (eff. 3-22-18)

***24.08.01, Rules of the State Board of Morticians***

- 24-0801-1701** Proposed Rulemaking (Fee Rule), Bulletin Vol. 17-10
- 24-0801-1701** Adoption of Pending Fee Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 24-0801-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Fee Rule by SCR 149, Bulletin Vol. 18-5 (eff. 3-22-18)

***24.12.01, Rules of the State Board of Psychologist Examiners***

- 24-1201-1701** Proposed Rulemaking, Bulletin Vol. 17-10
- 24-1201-1701** Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 24-1201-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

***24.13.01, Rules Governing the Physical Therapy Licensure Board***

- 24-1301-1701** Proposed Rulemaking, Bulletin Vol. 17-10
- 24-1301-1701** Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 24-1301-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

***24.18.01, Rules of the Real Estate Appraiser Board***

- 24-1801-1601** *Adoption of Temporary Rule, Bulletin Vol. 16-5 (eff. 4-1-16)T*
- 24-1801-1601** *OARC Omnibus Notice of Legislative Action - Extension of Temporary Rule by SCR 121, Bulletin Vol. 17-5 (Expired)*
- 24-1801-1701** Proposed Rulemaking (Fee Rule), Bulletin Vol. 17-10
- 24-1801-1701** Adoption of Pending Fee Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 24-1801-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Fee Rule by SCR 149, Bulletin Vol. 18-5 (eff. 3-22-18)

**24.23.01, Rules of the Speech and Hearing Services Licensure Board**

- 24-2301-1701 Proposed Rulemaking, Bulletin Vol. 17-10
- 24-2301-1702 Proposed Rulemaking (Fee Rule), Bulletin Vol. 17-10
- 24-2301-1701 Adoption of Pending Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 24-2301-1702 Adoption of Pending Fee Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 24-2301-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)
- 24-2301-1702 OARC Omnibus Notice of Legislative Action - Approval of Pending Fee Rule by SCR 149, Bulletin Vol. 18-5 (eff. 3-22-18)

**24.24.01, Rules of the Genetic Counselors Licensing Board**

- 24-2401-1701 Proposed Rulemaking (Fee Rule), Bulletin Vol. 17-10
- 24-2401-1701 Adoption of Pending Fee Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 24-2401-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Fee Rule by SCR 149, Bulletin Vol. 18-5 (eff. 3-22-18)

**24.25.01, Rules of the Idaho Driving Businesses Licensure Board**

- 24-2501-1701 Proposed Rulemaking (Fee Rule), Bulletin Vol. 17-10
- 24-2501-1701 Adoption of Pending Fee Rule, Bulletin Vol. 18-1 (eff. PLR 2018)
- 24-2501-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Fee Rule by SCR 149, Bulletin Vol. 18-5 (eff. 3-22-18)

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- 26-0110-1701 Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-10

**26.01.20, Rules Governing the Administration of Park and Recreation Areas and Facilities**

- 26-0120-1701 Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-10

**26.01.23, Rules Governing Filming Within Idaho State Parks**

- 26-0123-1701 Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-10

**IDAPA 27 – BOARD OF PHARMACY****27.01.01, Rules of the Idaho State Board of Pharmacy**

- 27-0101-1701 Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-6
- 27-0101-1701 2nd Notice of Intent to Promulgate a Rule - Negotiated Rulemaking (2nd Notice), Bulletin Vol. 17-8
- 27-0101-1701 Proposed Rulemaking (Chapter Repeal), Bulletin Vol. 17-10
- 27-0101-1701 Adoption of Pending Rule (Chapter Repeal), Bulletin Vol. 17-12 (eff. PLR 2018)
- 27-0101-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule (Chapter Repeal), Bulletin Vol. 18-5 (eff. 7-1-18)

**27.01.01, General Provisions**

- 27-0101-1702 Proposed Rulemaking (New Chapter), Bulletin Vol. 17-10
- 27-0101-1702 Adoption of Pending Rule (New Chapter), Bulletin Vol. 17-12 (eff. PLR 2018)
- 27-0101-1702 OARC Omnibus Notice of Legislative Action - Approval of Pending Rule (New Chapter), Bulletin Vol. 18-5 (eff. 7-1-18)

**27.01.02, Rules Governing Licensure and Registration**

- 27-0102-1701 Proposed Rulemaking (New Chapter, Fee Rule), Bulletin Vol. 17-10
- 27-0102-1701 Adoption of Pending Fee Rule (New Chapter), Bulletin Vol. 17-12 (eff. PLR 2018)
- 27-0102-1801 Adoption of Temporary Fee Rule, Bulletin Vol. 18-4 (eff. 7-1-18)T
- 27-0102-1701 OARC Omnibus Notice of Legislative Action - Approval of Pending Fee Rule by SCR 149, Bulletin Vol. 18-5 (eff. 7-1-18)

**27.01.03, Rules Governing Pharmacy Practice**

- 27-0103-1701 Proposed Rulemaking (New Chapter), Bulletin Vol. 17-10
- 27-0103-1701 Adoption of Pending Rule (New Chapter), Bulletin Vol. 17-12 (eff. PLR 2018)

**27-0103-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule (New Chapter), Bulletin Vol. 18-5 (eff. 7-1-18)

**27.01.04, Rules Governing Pharmacist Prescriptive Authority**

**27-0104-1701** Proposed Rulemaking (New Chapter), Bulletin Vol. 17-10

**27-0104-1701** Adoption of Pending Rule (New Chapter), Bulletin Vol. 17-12 (eff. PLR 2018)

**27-0104-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule (New Chapter), Bulletin Vol. 18-5 (eff. 7-1-18)

**27.01.05, Rules Governing Drug Compounding**

**27-0105-1701** Proposed Rulemaking (New Chapter), Bulletin Vol. 17-10

**27-0105-1701** Adoption of Pending Rule (New Chapter), Bulletin Vol. 17-12 (eff. PLR 2018)

**27-0105-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule (New Chapter), Bulletin Vol. 18-5 (eff. 7-1-18)

**27.01.06, Rules Governing DME, Manufacturing, and Distribution**

**27-0106-1701** Proposed Rulemaking (New Chapter), Bulletin Vol. 17-10

**27-0106-1701** Adoption of Pending Rule (New Chapter), Bulletin Vol. 17-12 (eff. PLR 2018)

**27-0106-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule (New Chapter), Bulletin Vol. 18-5 (eff. 7-1-18)

***IDAPA 28 -- DEPARTMENT OF COMMERCE***

**28.02.03, Rules of the Idaho Regional Travel and Convention Grant Program**

**28-0203-1801** Adoption of Temporary Rule, Bulletin Vol. 18-5 (eff. 3-2-18)T

***IDAPA 31 – IDAHO PUBLIC UTILITIES COMMISSION***

**31.11.01, Safety and Accident Reporting Rules for Utilities Regulated by the Idaho Public Utilities Commission**

**31-1101-1701** Proposed Rulemaking, Bulletin Vol. 17-10

**31-1101-1701** Adoption of Pending Rule, Bulletin Vol. 17-12 (eff. PLR 2018)

**31-1101-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

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**35.01.01, Income Tax Administrative Rules**

**35-0101-1601** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 16-6

**35-0101-1701** Proposed Rulemaking, Bulletin Vol. 17-7

**35-0101-1701** Adoption of Pending Rule, Bulletin Vol. 17-12 (eff. PLR 2018)

**35-0101-1701** OARC Omnibus Notice of Legislative Action - Approval of Pending Rule, Bulletin Vol. 18-5 (eff. 3-28-18)

**35.01.02, Idaho Sales and Use Tax Administrative Rules**

**35-0102-1701** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-5

**35-0102-1702** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7

**35-0102-1703** Notice of Intent to Promulgate a Rule - Negotiated Rulemaking, Bulletin Vol. 17-7

**35-0102-1701** Proposed Rulemaking, Bulletin Vol. 17-8

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