IDAHO ADMINISTRATIVE BULLETIN

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Preface

The Idaho Administrative Bulletin is published once each month by the Department of Administration, Office of the Administrative Rules Coordinator, pursuant to Section 67-5203, Idaho Code. The Bulletin is a monthly compilation of all administrative rulemaking documents in Idaho. The Bulletin publishes the official rulemaking notices and administrative rule text of state agency rulemakings and other official documents as necessary.

State agencies are required to provide public notice of rulemaking activity and invite public input. The public receives notice of a rulemaking activity through the Idaho Administrative Bulletin and the Legal Notice published monthly in local newspapers. The Legal Notice provides reasonable opportunity for public input, either oral or written, which may be presented to the agency within the time and manner specified in the Rulemaking Notice published in the Bulletin. After the comment period closes, the agency considers fully all information submitted in regard to the rule. Comment periods are not provided in temporary or final rulemaking activities.

CITATION TO THE IDAHO ADMINISTRATIVE BULLETIN

The Bulletins are cited by year and volume number. For example, Bulletin 02-1 refers to the first Bulletin issued in calendar year 2002, 03-1 refers to the first Bulletin issued in calendar year 2003. Volume numbers, which proceed from 1 to 12 in a given year, correspond to the months of publication, i.e.; Volume No.02-1 refers to January 2002; Volume No. 02-2 refers to February 2002; and so forth. Example: The Bulletin published in January of 2003 is cited as Volume 03-1, the December 2002 Bulletin is cited as Volume 02-12, etc.

RELATIONSHIP TO THE IDAHO ADMINISTRATIVE CODE

The **Idaho Administrative Code** is published once a year and is a compilation or supplemental compilation of all final and enforceable administrative rules in effect in Idaho. In an effort to provide the reader with current, enforceable rules, temporary rules are also published in the Administrative Code. Temporary rules and final rules that have been adopted and approved by the legislature during the legislative session, and published in the monthly Idaho Administrative Bulletin, supplement the Administrative Code. Negotiated, proposed, and pending rules are <u>not</u> printed in the Administrative Code and are published only in the Bulletin.

To determine if a particular rule remains in effect, or to determine if a change has occurred, the reader should refer to the **Cumulative Index of Administrative Rulemaking**, printed in each Bulletin.

TYPES OF RULEMAKINGS PUBLISHED IN THE ADMINISTRATIVE BULLETIN

The state of Idaho administrative rulemaking process, governed by the Administrative Procedure Act, comprises five distinct activities; Negotiated, Proposed, Temporary, Pending, and Final rulemaking. Not all rulemakings include all five. At a minimum a rulemaking includes proposed, pending, and final rulemaking. Many rules are adopted as temporary rules when meeting required statutory criteria and agencies often engage in negotiated rulemaking at the beginning of the process to facilitate concensus building in controversial or complex rulemakings. In the majority of cases, the process begins with proposed rulemaking and ends with final rulemaking. The following is a brief explanation of each type of administrative rule.

NEGOTIATED RULEMAKING

Negotiated rulemaking is a process in which all interested parties and the agency seek a consensus on the

content of the rule. Agencies are encouraged, and in some cases required, to engage in this rulemaking activity whenever it is feasible to do so. Publication of a Notice of Intent to Promulgate a Rule in the Administrative Bulletin by the agency is optional. This process should result in the formulation of a proposed and/or temporary rule.

PROPOSED RULEMAKING

A proposed rulemaking is an action by an agency in which 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 proposed rulemaking in the Bulletin. The notice of proposed rulemaking must include:

- a) the specific statutory authority for the rulemaking including a citation to a specific federal statute or regulation if that is the basis of authority or requirement for the rulemaking;
- b) a statement in nontechnical language of the substance of the proposed rule, including a specific description of any fee or charge imposed or increased;
- c) the text of the proposed rule prepared in legislative format;
- d) the location, date, and time of any public hearings the agency intends to hold on the proposed rule;
- e) the manner in which persons may make written comments on the proposed rule, including the name and address of a person in the agency to whom comments on the proposal may be sent;
- f) the manner in which persons may request an opportunity for an oral presentation; and
- g) the deadline for public (written) comments on the proposed rule.

As stated, the text of the proposed rule must be published in the Bulletin. After meeting the statutory rulemaking criteria for a proposed rule, the agency may proceed to the pending rule stage. A proposed rule does not have an assigned effective date unless published in conjunction with a temporary rule docket. An agency may vacate a proposed rulemaking if it decides not to proceed further with the promulgation process.

TEMPORARY RULEMAKING

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

- a) the 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 any one or all of the above requirements, a rule may become effective before it has been submitted to the legislature for review and the agency may proceed and adopt a temporary rule. However, a temporary rule that imposes a fee or charge may be adopted only if the Governor finds that the fee or charge is necessary to avoid an immediate danger which justifices the impostion of the fee or charge.

A temporary rule expires at the conclusion of the next succeeding regular session of the legislature unless the rule is approved, amended, or modified by concurrent resolution or when the rule has been replaced by a final rule.

State law requires that the text of both a proposed rule and a temporary rule be published in the Administrative Bulletin. In cases where the text of the temporary rule is the same as that of the proposed rule, the rulemaking can be done concurrently as a temporary/proposed rule. Combining the rulemaking allows for a single publication of the text.

An agency may, at any time, rescind a temporary rule that has been adopted and is in effect. If the temporary rule is being replaced by a new temporary rule or if it has been published concurrently with a proposed rulemaking that is being vacated, the agency, in most instances, should rescind the temporary rule.

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 Pending Rule. This includes:

- *a)* the reasons for adopting the rule;
- b) a statement of any change between the text of the proposed rule and the pending rule with an explanation of the reasons for any changes;
- c) the date the pending rule will become final and effective; and
- d) an identification of any portion of the rule imposing or increasing a fee or charge.

Agencies are required to republish the text of the 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 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. With the permission of the Rules Coordinator, only the Section(s) that have changed from the proposed text are republished. If no changes have been made to the previously published text, it is not required to republish the text again and only the Notice of Pending Rule is published.

FINAL RULEMAKING

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

No pending rule adopted by an agency will become final and effective until it has been submitted to the legislature for review. Where the legislature finds that the agency has violated the legislative intent of the statute under which the rule was made, a concurrent resolution may be adopted to reject the rulemaking or any part thereof. A Notice of Final Rule must be published in the Idaho Administrative Bulletin for any rule that is rejected, amended, or modified by the legislature showing the changes made. A rule that has been reviewed by the legislature and has not been rejected, amended, or modified will become final with no further legislative action. No rule shall become final and effective before the conclusion of the regular or special legislative session at which the rule was submitted for review. However, a rule which is final and effective may be applied retroactively, as provided in the rule.

AVAILABILITY OF THE ADMINISTRATIVE CODE AND BULLETIN

The Idaho Administrative Code and all monthly Bulletins are available for viewing and use by the public in all 44 county law libraries, state university and college and community college libraries, the state law library, the state library, the Public Libraries in Boise, Pocatello, Idaho Falls and Twin Falls, the Lewiston City Library, East Bonner County Library, Eastern Idaho Technical College Library, BYU Idaho Library, and Northwest Nazarene College Library.

SUBSCRIPTIONS AND DISTRIBUTION

For subscription information and costs of publications, please contact the Department of Administration, Office of the Administrative Rules Coordinator, 650 W. State Street, Room 100, Boise, Idaho 83720-0306, telephone (208) 332-1820.

The Administrative Bulletin is an official monthly publication of the State of Idaho. Yearly subscriptions or individual copies are available for purchase.

The Administrative Code, is an annual compilation or supplemental compilation of all final and enforceable temporary administrative rules and includes tables of contents, reference guides, and a subject index.

Individual Rule Chapters and Individual Rulemaking Dockets, are specific portions of the Bulletin and Administrative Code produced on demand.

Internet Access - The Administrative Code and Administrative Bulletin, individual chapters and dockets, are available on the Internet at the following address: http://www2.state.id.us/adm/adminrules/

EDITOR'S NOTE: All rules are subject to frequent change. Users should reference all current issues of the Administrative Bulletin for negotiated, temporary, proposed, pending, and final changes to all rules, or call the Office of the Administrative Rules at (208) 332-1820 or FAX (208) 332-1896.

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 system. 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 with a number of subsections. An example IDAPA number is as follows:

IDAPA 38.05.01.060.02.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.

"IDAPA 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".

"060." refers to Major Section 060, "Content of the Invitation to Bid".

"02." refers to Subsection 060.02.

"c." refers to Paragraph 060.02.c.

"ii." refers to Subparagraph 060.02.c.ii.

DOCKET NUMBERING SYSTEM

Internally, the Bulletin is organized sequentially using a rule docketing system. All rulemaking actions (documents) are assigned a "DOCKET NUMBER". The "Docket Number" is a series of numbers separated by a hyphen "-", (38-0501-0101). The docket numbers are published sequentially by IDAPA designation (e.g. the two-digit agency code). The following example is a breakdown of a typical rule docket:

"DOCKET NO. 38-0501-0301"

"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).

"0301" denotes the year and sequential order of the docket submitted and published during the year; in this case the first rulemaking action of the chapter published in calendar year 2003.

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)"

INTERNAL AND EXTERNAL CITATIONS TO ADMINISTRATIVE RULES IN THE CODE AND BULLETIN

When making a citation to another Section or Subsection that is part of the same rule, a typical internal citation may appear as follows:

"...as found in Section 201 of this rule." OR "...in accordance with Subsection 201.06.c. of this rule."

It may also be cited to include the IDAPA, Title, and Chapter number also, as follows:

- "...in accordance with IDAPA 38.05.01.201."
- "38" denotes the IDAPA number of the agency.
- "05" denotes the TITLE number of the agency rule.
- "01" denotes the Chapter number of the agency rule.
- "201" references the main Section number of the rule that is being cited.

Citations made within a rule to a different rule chapter (external citation) should also include the name of the Department and the name of the rule chapter being referenced, as well as the IDAPA, Title, and Chapter numbers. The following is a typical example of an external citation to another rule chapter:

"...as outlined in the Rules of the Department of Administration, IDAPA 38.04.04, 'Rules Governing Capitol Mall Parking."

BULLETIN PUBLICATION SCHEDULE FOR CALENDAR YEAR 2004

Volume No.	Monthly Issue of Bulletin	Closing Date for Agency Filing	Publication Date	21-day Comment Period End Date
04-1	January, 2004	*November 19, 2003	January 7, 2004	January 28, 2004
04-2	February, 2004	January 7, 2004	February 4, 2004	February 25, 2004
04-3	March, 2004	February 4, 2004	March 3, 2004	March 24, 2004
04-4	April, 2004	March 3, 2004	April 7, 2004	April 25, 2004
04-5	May, 2004	March 31, 2004	May 5, 2004	May 26, 2004
04-6	June, 2004	May 5, 2004	June 2, 2004	June 22, 2004
04-7	July, 2004	June 2, 2004	July 7, 2004	July 28, 2004
04-8	August, 2004	June 30, 2004	August 4, 2004	August 25, 2004
04-9	September, 2004	July 28, 2004	September 1, 2004	September 22, 2004
04-10	October, 2004	**August 25, 2004	October 6, 2004	October 27, 2004
04-11	November, 2004	October 6, 2004	November 3, 2004	November 24, 2004
04-12	December, 2004	November 3, 2004	December 1, 2004	December 22, 2004

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05-4	April, 2005	March 4, 2005	April 6, 2005	April 27, 2005
05-5	May, 2005	April 1, 2005	May 4, 2005	May 25, 2005
05-6	June, 2005	April 29, 2005	June 1, 2005	June 22, 2005
05-7	July, 2005	June 3, 2005	July 6, 2005	July 27, 2005
05-8	August, 2005	July 1, 2005	August 3, 2005	August 24, 2005
05-9	September, 2005	July 29, 2005	September 7, 2005	September 28, 2005
05-10	October, 2005	**August 24, 2005	October 5, 2005	October 26, 2005
05-11	November, 2005	September 30, 2005	November 2, 2005	November 23, 2005
05-12	December, 2005	Octobert 28, 2005	December 7, 2005	December 28, 2005

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

^{**}Last day to submit proposed rules in order to complete rulemaking for review by legislature.

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IDAPA 05 - DEPARTMENT OF JUVENILE CORRECTIONS

05.01.01 - RULES OF THE DEPARTMENT OF JUVENILE CORRECTIONS AND STANDARDS FOR PRIVATE CONTRACT PROVIDERS

DOCKET NO. 05-0101-0401

NOTICE OF RULEMAKING - TEMPORARY RULE

EFFECTIVE DATE: The effective date of the temporary rule is May 1, 2004.

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 20-504(2), 20-504(9), 20-504(11), 20-504(14), 20-531(4), and 20-545(1), Idaho Code.

DESCRIPTIVE SUMMARY: The following is the required finding and concise statement of the supporting reasons for temporary rulemaking:

This is a repeal of this chapter.

TEMPORARY RULE JUSTIFICATION: Pursuant to Section(s) 67-5226(1)(a), Idaho Code, the Governor has found that temporary adoption of the rule is appropriate for the following reasons:

The repeal and replacement of the existing rules chapter is necessary to comply with HIPAA regulations, Performance-based Standards, and state Department of Education's specific education reviews.

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: N/A

ASSISTANCE ON TECHNICAL QUESTIONS: For assistance on technical questions concerning the temporary rule, contact Nancy Bishop, Deputy Attorney General, 334-5100, ext. 384.

DATED this December 19, 2003.

Nancy Bishop Deputy Attorney General Idaho Department of Juvenile Corrections 400 N. 10th St., 2nd Floor P.O. Box 83720 Boise, ID 83720-0285 Phone: 334-5100, ext. 384

Phone: 334-5100, ext Fax: 334-5120

IDAPA 05.01.01 IS BEING REPEALED IN ITS ENTIRETY.

IDAPA 05 - DEPARTMENT OF JUVENILE CORRECTIONS

05.01.01 - RULES FOR CONTRACT PROVIDERS

DOCKET NO. 05-0101-0402

NOTICE OF RULEMAKING - TEMPORARY RULE

EFFECTIVE DATE: The effective date of the temporary rule is May 1, 2004.

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 20-504(2), 20-504(9), 20-504(11), 20-504(14), 20-531(4), and 20-545(1), Idaho Code.

DESCRIPTIVE SUMMARY: The following is the required finding and concise statement of the supporting reasons for temporary rulemaking:

A new rules chapter is being adopted to replace the existing rules chapter, IDAPA 05.01.01. The new chapter consists of some former rules that were retained resulting in an improvement in format and language, standards criteria for good care and treatment of juveniles placed with contract providers, and standards criteria toward managing risk.

TEMPORARY RULE JUSTIFICATION: Pursuant to Section(s) 67-5226(1)(a), Idaho Code, the Governor has found that temporary adoption of the rule is appropriate for the following reasons:

The repeal and replacement of the existing rules chapter is necessary to comply with HIPAA regulations, Performance-based Standards, and state Department of Education's specific education reviews.

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: N/A

ASSISTANCE ON TECHNICAL QUESTIONS: For assistance on technical questions concerning the temporary rule, contact Nancy Bishop, Deputy Attorney General, 334-5100, ext. 384.

DATED this December 19, 2003.

Nancy Bishop, Deputy Attorney General Idaho Department of Juvenile Corrections 400 N. 10th St., 2nd Floor P.O. Box 83720, Boise, ID 83720-0285 Phone: 334-5100, ext. 384; Fax: 334-5120

THE FOLLOWING IS THE TEXT OF DOCKET NO. 05-0101-0402

IDAPA 05, TITLE 01, CHAPTER 01

05.01.01 - RULES FOR CONTRACT PROVIDERS

000. LEGAL AUTHORITY.

01. Section 20-504(2), Idaho Code. Pursuant to Section 20-504(2), Idaho Code, the Idaho Department of Juvenile Corrections shall establish minimum standards for detention, care and certification of approved detention facilities based upon such standards. (5-1-04)T

- **02. Section 20-504(9), Idaho Code**. Pursuant to Section 20-504(9), Idaho Code, the department shall establish minimum standards for the operations of all private residential and nonresidential facilities and programs which provide services to juvenile offenders. (5-1-04)T
- **O3.** Section 20-504(11), Idaho Code. Pursuant to Section 20-504(11), Idaho Code, the department shall have authority to adopt such administrative rules pursuant to the procedures provided in Chapter 52, Title 67, Idaho Code, as are deemed necessary or appropriate for the functioning of the department and the implementation and administration of the Juvenile Corrections Act. (5-1-04)T
- **O4.** Section 20-504(14), Idaho Code. Pursuant to Section 20-504(14), Idaho Code, the department, in cooperation with the courts and the counties, shall establish uniform standards for county juvenile probation services, as well as qualifications and standards for the training of juvenile probation officers. (5-1-04)T
- **O5. Section 20-531(4), Idaho Code**. Pursuant to Section 20-531(4), Idaho Code, the department shall adopt standards, policies and procedures for the regulation and operation of secure facilities. (5-1-04)T
- **96. Section 20-545(1), Idaho Code**. Pursuant to Section 20-545(1), Idaho Code, the department shall have the power to adopt rules for the state juvenile corrections center as may be required by the Juvenile Corrections Act. (5-1-04)T
- **07. Interstate Compact On Juveniles**. By the provisions of Sections 16-1901, et seq., Idaho Code, the "Interstate Compact on Juveniles," the department is authorized to promulgate rules and regulations to carry out more effectively the terms of the compact. (5-1-04)T

001. TITLE AND SCOPE.

- **01. Title**. These rules shall be cited as IDAPA 05.01.01, "Rules for Contract Providers," IDAPA 05, Title 01, Chapter 01. (5-1-04)T
- **O2. Scope**. These rules are established to ensure that the juvenile corrections system in Idaho will be consistently based on the following principles: accountability; community protection; and competency development. (5-1-04)T

002. WRITTEN INTERPRETATIONS.

In accordance with Section 67-5201(19)(b)(iv), Idaho Code, this agency has written statements which pertain to the interpretations of these rules. The document is available for public inspection and copying at cost at the Idaho Department of Juvenile Corrections, 400 N. 10th St., 2nd Floor, P.O. Box 83720, Boise, Idaho, 83720-0285.

(5-1-04)T

003. ADMINISTRATIVE APPEALS.

This chapter does not provide for appeal of the administrative requirements for agencies.

(5-1-04)T

004. INCORPORATION BY REFERENCE.

There are no documents incorporated by reference into these rules.

(5-1-04)T

005. OFFICE -- OFFICE HOURS -- MAILING ADDRESS AND STREET ADDRESS.

- **01. Street Address**. The Idaho Department of Juvenile Corrections is located at 400 N. 10th St., 2nd Floor, Boise, Idaho 83720. (5-1-04)T
 - **Hours**. Business hours are typically 8 a.m. to 5 p.m., Monday through Friday, excluding holidays. (5-1-04)T
- **03. Mail Address**. Mail regarding the Idaho Department of Juvenile Corrections' rules should be directed to 400 N. 10th St., 2nd Floor, P.O. Box 83720, Boise, Idaho 83720-0285. (5-1-04)T
 - **O4.** Telephone And FAX. The telephone of the office is (208) 334-5100 and the telecommunications

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relay service of the office is 1-800-377-1363 or 1-800-377-1711. The facsimile number of the office is (208) 334-5120.

006. PUBLIC RECORDS ACT COMPLIANCE.

The records associated with the contract providers are juvenile records of the Idaho Department of Juvenile Corrections, and are subject to the Idaho Public Records Act, Title 9, Chapter 3, Idaho Code. (5-1-04)T

007. -- 009. (RESERVED).

010. **DEFINITIONS.**

As used in this chapter:

(5-1-04)T

01. Adult. A person eighteen (18) years of age or older.

(5-1-04)T

(5-1-04)T

- **02. Assessment**. The process of gathering information to determine risk and program needs for the purpose of guiding placement decisions and to develop the individualized treatment plan. (5-1-04)T
- **03. Clinical Services Administrator**. Administrative person who has oversight of the department's clinical services division. Supervises the regional clinical supervisors and works with the regional superintendents in the maintenance and development of treatment programs. (5-1-04)T
- **04. Clinical Supervisor**. Person who supervises juvenile services coordinators and clinicians in assigned regions. This person is responsible for recommending releases from department custody and approving transfers in collaboration with the clinical services administrator, placement specialist, and regional superintendent. This responsibility also includes oversight of the regional observation and assessment process, and assists in the maintenance and development of treatment programs. (5-1-04)T
 - **05. Commit.** Commit means to transfer legal custody to the Idaho Department of Juvenile Corrections. (5-1-04)T
- **06. Community Treatment Team.** A team including the juvenile services coordinator, contract provider case manager, juvenile probation officer, family, and others, as necessary, who work together to provide input into each juvenile's treatment plan, implement their respective sections of that plan, and monitor and report progress on treatment goals. (5-1-04)T
 - **07. Contraband.** Any item not issued or authorized by the contract provider. (5-1-04)T
- **08. Confidential Information**. Information that may only be used or disclosed as provided by state or federal law, federal regulations, or state rule. (5-1-04)T
- **09. Contract Provider.** A residential or nonresidential program under contract with the department to supervise juveniles, provide accountability and competency development in the least restrictive setting, consistent with public safety. (5-1-04)T
 - **10.** Court. Means district court or magistrate's division thereof.
 - **11. Department**. The Idaho Department of Juvenile Corrections.
- **12. Detention**. Detention means the temporary placement of juveniles who require secure custody for their own or the community's protection in physically restricting facilities. (5-1-04)T
 - **13. Director**. The director of the Idaho Department of Juvenile Corrections. (5-1-04)T
 - **14. Facility**. The physical plant associated with the operation of residential or nonresidential programs. (5-1-04)T
 - 15. Facility Treatment Team. The group of staff employed by the contract provider who have input

into developing the juvenile's treatment plan; who provide direct services to juveniles; and who monitor and report on the progress on meeting the goals in that plan. The facility treatment team is responsible for working with the community treatment team to develop and implement the treatment plan. (5-1-04)T

- **16. Health Assessment**. The purpose of a health assessment is to thoroughly review and determine a juvenile's comprehensive health needs. This information is used to develop the medical terms of a juvenile's treatment plan. (5-1-04)T
- **17. Health Screening.** The purpose of health screening is to quickly identify a juvenile's immediate health needs and to determine if there are any immediate needs related to a chronic health condition. (5-1-04)T
- **18. Health Services**. Health services is defined as including, but not limited to, routine and emergency medical, dental, optical, obstetrics, mental health, or other related health service. (5-1-04)T
- **19. Incident Report**. A written document reporting any occurrence or event, or any other incident which threatens the safety and security of staff, juveniles or others, or which threatens the security of the program and which requires a staff response. (5-1-04)T
- **20. Interns.** A paraprofessional staff who is pursuing a degree and who, as a part of documented coursework with a college or university, may provide counseling or other services to juveniles in the department's custody or their families, under direct supervision of qualified staff. (5-1-04)T
 - **21. Judge**. A district judge or a magistrate.

- **22. Juvenile**. A person less than eighteen (18) years of age or who was less than eighteen (18) years of age at the time of any act, omission or status bringing the person within the purview of the Juvenile Corrections Act. (5-1-04)T
- **23. Juvenile Offender**. A person under the age of eighteen (18), committed by the court to the custody, care and jurisdiction of the department for confinement in a secure facility following adjudication for a delinquent act which would constitute a felony or misdemeanor if committed by an adult. (5-1-04)T
- **24. Juvenile Records**. Information concerning the individual's delinquent or criminal, personal, and medical history and behavior and activities while in custody, including but not limited to commitment papers, court orders, detainer, personal property receipts, visitors' lists, type of custody, disciplinary infractions and actions taken, grievance reports, work assignments, program participation, and miscellaneous correspondence. (5-1-04)T
- **25. Juvenile Services Coordinator**. An individual employed by the department who is responsible for the monitoring of therapeutic or rehabilitative treatment services to juveniles participating in a treatment program. This responsibility includes monitoring treatment plans and progress reports and sharing information with family, community, courts, and with other department employees. (5-1-04)T
- **26. Legal Custody**. The relationship created by the court's decree which imposes upon the custodian responsibilities of physical possession of the juvenile, the duty to protect, train and discipline him and to provide him with food, shelter, education and ordinary medical care. (5-1-04)T
- **27. 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. (5-1-04)T
- **28. Mechanical Restraints**. Any method of physical control of a juvenile which involves the use of devices to restrict physical activity. (5-1-04)T
- **29. Mental Health Assessment**. The purpose of a mental health assessment is to thoroughly review and determine a juvenile's comprehensive mental health needs. This information is used to develop the medical terms of a juvenile's treatment plan. (5-1-04)T

- **30. Mental Health Screening.** The purpose of mental health screening is to quickly identify a juvenile's immediate mental health needs and to determine if there are any immediate needs related to a chronic mental health condition. (5-1-04)T
- 31. Nonresidential Programs. Programs providing services to juveniles in the custody of the department and their families in which the juvenile continues to live with a parent or guardian and not in a residential care facility. (5-1-04)T
- **32. Observation And Assessment Program**. A residential or nonresidential program designed to complete assessments of juveniles in the custody of the department. (5-1-04)T
- **33. Physical Restraint**. Any method of physical control of a juvenile which involves staff touching or holding a juvenile to limit or control his actions. (5-1-04)T
- **34. Quality Assurance**. Department employees responsible for overseeing contract providers' compliance with contract terms and these rules. (5-1-04)T
- **35. Region**. Subunits of the department organized by geographical areas and including all services and programs offered by the department in that area. (5-1-04)T
- **36. Regional Facility**. Department operated juvenile correctional centers located in each region of the state. (5-1-04)T
- **37. Reintegration Plan.** That part of the juvenile's treatment plan which specifically addresses the terms, conditions and services to be provided as the juvenile moves to a lower level of care or leaves the custody of the department. (5-1-04)T
- **38. Release From Department Custody**. Refers to the termination of the department's legal custody of a juvenile. (5-1-04)T
- **39. Restitution**. Financial payment or service work intended to reimburse victims for the cost of damage or harm caused by a juvenile. Restitution may be court ordered or may be imposed following a formal disciplinary process within a contract provider program. (5-1-04)T
- **40. Restricted Clinical Information**. Any record, document or other information legally protected from dissemination to the general public by statute or rule, such as psychological evaluations, therapy notes, therapy journals, sex histories, polygraph results, and psychological testing, or other legally confidential information.

- **41. Room Confinement.** Instances in which a juvenile is confined in the room in which he usually sleeps, rather than being confined in an isolation room. (5-1-04)T
- **42. Separation Or Isolation**. Any instance when a juvenile is confined alone for over fifteen (15) minutes in a room other than the room in which he usually sleeps. (5-1-04)T
- 41. Staffing. Regularly scheduled meetings of the community and facility treatment team members to review progress on treatment goals and objectives identified in each juvenile's individual treatment plan. (5-1-04)T
- **42. Strip Search**. An examination of the juvenile's naked body for weapons, contraband, injuries, or vermin infestations. This also includes a thorough search of all the juvenile's clothing while such is not being worn. (5-1-04)T
- **43. Suicide Risk Assessment**. An evaluation performed by a mental health professional to determine the level of immediate risk of a juvenile attempting suicide, and to apply this information in developing a safety plan for the juvenile. (5-1-04)T

- **44. Suicide Risk Screening.** An evaluation that is used to quickly determine, based upon known history and current behavior, whether a juvenile presents any identifiable risk of immediate suicidal behavior, and to call in a mental health professional to complete a suicide risk assessment. (5-1-04)T
- **45. Transfer**. Any movement of a juvenile in the custody of the department from one (1) facility to another, including a regional facility, without a release from department custody. (5-1-04)T
- **46. Treatment**. Any program of planned services developed to meet risks and needs of juveniles and their families, as identified in an assessment, and as related to activities designed to teach alternate behaviors and to support change in the beliefs that drive those behaviors. Treatment as referenced in this context also includes the maintenance of conditions that keep juveniles, staff and the community safe. (5-1-04)T
- **47. Variation**. The means of complying with the intent and purpose of a child care licensing rule in a manner other than that specifically prescribed in the rule. (5-1-04)T
- **48. Vocational Services**. Any service provided related to assessment, education, guidance or training in the area of work or basic living skills. (5-1-04)T
- **49. Volunteer.** A person from the community who freely chooses to do or provide both direct or indirect services to juveniles or staff at a facility or juvenile correctional center. This person is not compelled to do so and is not compensated for the services. (5-1-04)T
- **50. Waiver.** The nonapplication of one (1) or more of these rules based upon a request by the provider and a written decision issued by the department. (5-1-04)T
- **51. Work Program**. A public service work project which employs juveniles at a reasonable wage for the purpose of reimbursing victims of juveniles' delinquent behavior. (5-1-04)T

011. -- 099. (RESERVED).

100. INITIATION OF SERVICES.

Juveniles are committed to the department under the provisions of the Juvenile Corrections Act. (Sections 20-501 through 20-547, Idaho Code) and the Interstate Compact on Juveniles (Sections 16-1901 through 16-1910, Idaho Code).

(5-1-04)T

101. WAIVER OR VARIATION.

Minimum program standards established herein shall apply to all services provided by the contract provider. Any waiver or variation from the standards stated in these rules must receive prior written approval from the department and must be attached as a formal amendment to the contract.

(5-1-04)T

102. -- 199. (RESERVED).

200. AUTHORITY TO INSPECT.

- **01. Inspections**. The department shall have the authority to conduct reviews of programs, program operations, and facilities to ensure the contract provider's compliance with these rules. The contract provider shall cooperate with the department's review, and must provide access to the facility and all juvenile records for juveniles in department custody, as deemed necessary by the department. The department may not access individual juvenile records for juveniles not in the custody of the department. However, in order to more fully assess the operation of the program, aggregate data and information for all juveniles must be made available. (5-1-04)T
- **02. Written Reports**. In order to assist the department in monitoring contract programs for key areas of operational performance, each contract provider will be required to submit a written, quarterly report to the department's quality assurance staff. These reports may be submitted by facsimile, mail, or electronically within thirty (30) calendar days of the end of each quarter. The reports shall include, at a minimum, the following information:

 (5-1-04)T

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a.	Changes made in the population served, program design or functioning	s, and table of organization,
including specifi	fic management and administrative staff who may have left the program;	(5-1-04)T

b.	Staff turnover during the quarter;	(5-1-04)T
c.	Number of reportable incidents of the type listed below:	(5-1-04)T
i.	Assaults against juveniles;	(5-1-04)T
ii.	Assaults against staff;	(5-1-04)T
iii.	Behavioral and psychiatric emergencies;	(5-1-04)T
iv.	Contraband;	(5-1-04)T
v.	Escapes;	(5-1-04)T
vi.	Injuries or illness requiring significant medical attention;	(5-1-04)T
vii.	Restraints;	(5-1-04)T
viii.	Separation or isolation;	(5-1-04)T
ix.	Sexually acting out; and	(5-1-04)T
х.	Suicide precautions.	(5-1-04)T
d.	Number of hours and topics included in staff training for the quarter;	(5-1-04)T

- **e.** Personal funds, earned income, and restitution for each juvenile in department custody according to Subsection 212.02; and (5-1-04)T
 - **f.** A copy of juvenile grievances and resolutions according to Subsection 246.02. (5-1-04)T
- **03. Additional Reporting Requirements**. In situations where the department has determined that the safety, security, or order of a program are at risk, more frequent and more detailed reporting will be required by the director, or designee. (5-1-04)T

201. COMPLIANCE WITH STATE AND LOCAL CODES AND ORDINANCES.

The contract provider shall maintain compliance with all state and local building, life safety, and zoning requirements. Documentation of compliance shall be made available to the Idaho Department of Juvenile Corrections. (5-1-04)T

202. COMPLIANCE WITH RULES REQUIREMENTS.

The contract provider shall comply with all relevant child care licensing rules of the Idaho Department of Health and Welfare as well as the rules of the Idaho Department of Juvenile Corrections. If a conflict exists between department rules, the more restrictive rule applies. Any and all subcontractors and consultants of the contract provider are also subject to these rules.

(5-1-04)T

203. ACCESSIBILITY, GENERAL SAFETY AND MAINTENANCE OF BUILDINGS AND GROUNDS.

- **01. Reasonable Access**. The program buildings, parking lots and other facilities shall provide reasonable access as required by the Americans with Disabilities Act and other federal and state laws and regulations. (5-1-04)T
- **02. Maintenance**. The contract provider shall ensure that all structures are maintained in good repair and are free from hazards to health and safety. The facility grounds shall also be maintained and shall be free from

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any hazard to health and safety.

(5-1-04)T

(5-1-04)T

- **Written Plan**. The program shall have a written plan for preventive and ongoing maintenance of the facility. (5-1-04)T
- **O4. Safety Program**. Each contract provider shall have a designated staff member who is responsible for the safety program at the facility. This individual shall conduct routine inspections of the facility monthly, with copies of the inspections kept on file for review by the department, to identify: (5-1-04)T

a.	Fire safety;	(5-1-04)T
b.	Existing hazards;	(5-1-04)T
с.	Potential hazards; and	(5-1-04)T
d.	The corrective action that should be taken to address these hazards.	(5-1-04)T
05. procedure manus	Emergency Procedures . The contract provider will utilize and maintain a current all which shall include, at a minimum, procedures pertaining to:	emergency (5-1-04)T
a.	Fire safety and escape;	(5-1-04)T
b.	Emergency medical care;	(5-1-04)T
с.	Notification and filing charges on escape;	(5-1-04)T
d.	Incidents of violence within the facility;	(5-1-04)T
e.	Suicide prevention;	(5-1-04)T
f.	Child abuse reporting; and	(5-1-04)T

g. Sexu 204. VEHICLES.

Sexual abuse disclosures.

- **01. Condition.** Vehicles used to transport juveniles must be mechanically sound, in good repair, and meet the department's requirements for insurance coverage. (5-1-04)T
- **O2. Compliance With Applicable Laws**. All vehicles must possess current state licenses and shall comply with all applicable state laws. When in use, all vehicles must carry a standard first aid kit and a fire extinguisher. (5-1-04)T
- **03. Maintenance And Equipment CheckList.** The contract provider shall have a vehicle maintenance and equipment checklist, which shall include a listing of all critical operating systems and equipment inspections, the date of the last inspection, and the type of service or action taken. All repairs required to critical operating systems, such as brakes, headlights, shall be made immediately. All worn or missing critical equipment shall be replaced immediately, such as tires, jacks, seat belts. (5-1-04)T

205. TRANSPORTATION.

- **01. Transportation For Treatment Plan**. It shall be the responsibility of the contract provider to provide all transportation associated with the juvenile's individual treatment plan. The family may be relied upon to provide transportation for passes and some other community contacts as long as this does not present any undue risk to the juvenile, family, or to the community. (5-1-04)T
 - 02. Transportation And Notification For Court Proceedings. It is the responsibility of the

department to assure the juvenile's appearance in all court proceedings and to arrange transportation as indicated. It is the contract provider's responsibility to immediately notify the juvenile services coordinator of court dates and appearances. Contract providers may provide transportation under this section in consultation with the juvenile services coordinator. (5-1-04)T

- **03. Arrangements.** Arrangements for transportation related to court appearances as well as related to transfer or release of juveniles from department custody shall be made between the contract provider and the department's regional transport coordinator located in the contract provider's region. This communication is facilitated through the juvenile services coordinator. (5-1-04)T
- **04. Gender Specific Transportation**. In all transport situations there must be at least one (1) assigned staff of the same gender as the juvenile being transported. (5-1-04)T
- **05. Transport In Personal Vehicles**. Juveniles in the custody of the Idaho Department of Juvenile Corrections shall not be transported in personal vehicles unless an emergency situation exists and is substantiated by documentation. (5-1-04)T

206. JUVENILE RECORDS.

01. Case Management Documents. The contract provider shall maintain individual files on all juveniles which shall include: (5-1-04)T

a.	Observation and assessment report provided by the department;	(5-1-04)T
b.	A copy of the signed Referral Acceptance/Denial Form;	(5-1-04)T
c.	Additional assessments, which must be kept separate;	(5-1-04)T
d.	Individual treatment plans as referred to in Subsection 271.01;	(5-1-04)T
e.	Progress reports as referred to in Subsections 271.07 and 271.08;	(5-1-04)T
f.	Incident reports as referred to in Subsections 262.02 and 262.03;	(5-1-04)T
g.	Court documents and dispositions;	(5-1-04)T
h.	Professional correspondence;	(5-1-04)T
i.	Clinical notes, which must be kept separate;	(5-1-04)T
j.	Medical records, which must be kept separate;	(5-1-04)T
k.	Educational records and school history, which must be kept separate;	(5-1-04)T
l.	Identifying information and physical descriptions;	(5-1-04)T
m.	Last known parent or guardian address and telephone number;	(5-1-04)T
n.	Date of admittance and projected release from department custody;	(5-1-04)T
0.	A copy of the written reintegration plan; and	(5-1-04)T
p.	Records of juveniles' earnings and restitution payments.	(5-1-04)T
02.	Confidentiality.	(5-1-04)T
a.	Sections 20-525 and 9-340(2)(b), Idaho Code, and Idaho Court Administrative Rule 32	provide for

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confidentiality, under certain conditions, of records that contain information about juveniles.

(5-1-04)T

- **b.** All matters relating to confidentiality of juvenile files shall also comply with the federal Health Insurance Portability and Accountability Act (HIPAA) and 42 CFR Chapter 1, Sub-Chapter A, Part 2, "Confidentiality of Alcohol and Drug Abuse Patient Records". (5-1-04)T
- **c.** Restricted clinical information, as defined, education and medical records must each be filed separately and stored in a secured area. These file folders must be stamped "confidential" on the cover or outside folder. (5-1-04)T
- **d.** For contract providers that serve sex offenders, individual treatment assignments, such as journals, detailed sexual histories, must be destroyed at the time the juvenile is transferred or released from the program.

- **03. Automated Records**. Automated records shall include a procedure to ensure confidentiality and be in compliance with any state or federal privacy laws pertaining to those records. The procedure shall also include provisions for backing up automated records. (5-1-04)T
- **Policy And Procedure**. The contract provider shall have written policy and procedures to address the confidentiality of juvenile records. In compliance with HIPAA's privacy regulations, written procedures shall designate a privacy officer who will: (5-1-04)T
 - **a.** Supervise the maintenance of identifiable personal health care information; (5-1-04)T
 - **b.** Serve as custodian of all confidential juvenile records; and (5-1-04)T
 - **c.** Determine to whom records may be released. (5-1-04)T
 - **05.** Restrictions To Records Access. (5-1-04)T
 - a. Access to personal health information shall be limited to: (5-1-04)T
- i. Employees of the department and contract providers to the extent necessary to perform normal business functions, including health treatment, and other functions designed to maintain the good order, safety and security of the juveniles or facility; (5-1-04)T
- ii. Individuals participating in a staffing for a juvenile, who have a direct need to know the information, and who are obligated to or promise to maintain the confidentiality of information disclosed. These individuals may include employees or representatives of law enforcement, the department, the contract provider, probation officer, medical or mental health professionals and other appropriate individuals; (5-1-04)T
- iii. Law enforcement members, emergency medical personnel, the Idaho Department of Health and Welfare and similar court or government officials, as necessary to perform their duties, and only if not otherwise prohibited by state or federal law or rule. (5-1-04)T
- **b.** Access to all other confidential juvenile records shall be limited to the following authorized persons: (5-1-04)T
- i. Staff authorized by the contract provider and members of the administrative staff of the contract provider's parent agency; (5-1-04)T
- ii. A parent or guardian or the juvenile, to the extent that disclosure is not privileged and is clinically appropriate; (5-1-04)T
 - iii. Appropriate staff of the department; (5-1-04)T
 - iv. Counsel for the juvenile with signed consent form; (5-1-04)T

- v. Judges, prosecutors, juvenile probation officers, and law enforcement officers, when essential for official business; (5-1-04)T
- vi. Individuals and agencies approved by the department to conduct research and evaluation or statistical studies; or (5-1-04)T
 - vii. Schools, as appropriate.

(5-1-04)T

- **06. Withholding Of Information**. If the department or the contract provider believes that information contained in the record would be damaging to the juvenile's treatment or rehabilitation, that information may be withheld from the juvenile, or his parent, or guardian, or others, except under court order. (5-1-04)T
- **07. Retention Of Juvenile Records**. Educational, medical, and drug and alcohol records must be permanently retained. Contract providers shall have a written policy on the retention and disposal of records. At the time of transfer or release from department custody, all records must be forwarded to the juvenile's juvenile services coordinator. (5-1-04)T
- **08. Requests For Information**. Requests for information of any kind about juveniles in department custody, following their release or transfer from a contract provider's program must be directed to the juvenile correctional center in Nampa. (5-1-04)T

207. RELEASE FORMS.

- **01. Release Of Nonmedical Information**. The juvenile, parent or guardian, and department representative shall sign a release of information and consent form before information about the juvenile is released to any non-juvenile justice entity. A copy of the consent form shall be maintained in the juvenile's file at the program and in the file maintained by the department. (5-1-04)T
- **02. Release Of Medical Information**. Release of medical information requires more specific authorization according to Section 320, of these rules. (5-1-04)T
- **Minimum Information**. The release of information and consent form shall, at a minimum, include the following: (5-1-04)T
 - **a.** Name of person, agency or organization requesting information; (5-1-04)T
 - **b.** Name of person, agency or organization releasing information; (5-1-04)T
 - **c.** The specific information to be disclosed; (5-1-04)T
 - **d.** The date consent form is signed; (5-1-04)T
 - e. Signature of the juvenile and the parent or guardian; and (5-1-04)T
 - **f.** The signature of the person witnessing the juvenile's signature. (5-1-04)T
- **04. Document Reproduction**. The contract provider agrees that no documents provided by the department shall be reproduced or distributed without the written permission of the department. (5-1-04)T

208. JUVENILE PHOTOGRAPHS.

- **01. Limitations**. No juvenile in the custody of the department shall be used in person or by photograph or any other visual image for the express purpose of any fund raising efforts. (5-1-04)T
- **02. Department Authorization**. Permission to release or use the photographs and any other visual image of juveniles in the custody of the department shall require written authorization from the department director or

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designee. (5-1-04)T

209. CONTRACT PROVIDER ADMINISTRATIVE RECORDS.

- **01. Documentation Retention**. The contract provider shall document and retain documentation of all information related to the following items. (5-1-04)T
- **a.** Program consultation provided at the facility, such as technical assistance on program design and implementation; (5-1-04)T
 - **b.** Training provided to staff; (5-1-04)T
 - c. All alleged instances of child abuse; (5-1-04)T
 - **d.** Fiscal and program audits or reviews, including corrective actions required and taken; (5-1-04)T
- ${f e.}$ Reports of sexual abuse disclosures to Idaho Department of Health and Welfare or law enforcement; and (5-1-04)T
 - **f.** Juvenile or staff grievances. (5-1-04)T
- **02. Employee Files**. Employee personnel files, including minimum qualifications for the job held, hiring information, annual performance evaluations and copies of personnel actions, such as disciplinary action taken and acknowledgements of outstanding performance. (5-1-04)T

210. CLOTHING.

- **01. Sufficient Clothing.** Juveniles shall have sufficient clothing of the proper weight to participate in activities included in their individual treatment plan. Juveniles may arrive at the facility with their own clothing. If the juvenile does not have sufficient clothing, or appropriate clothing, the contract provider shall provide or purchase adequate and appropriate clothing for the juvenile. Contract providers shall not request nor require that the parent or guardian pay for or purchase clothing. (5-1-04)T
- **Release From Facility**. All clothing and incidentals become the property of the juvenile upon release from the facility. The contract provider will ensure the proper care and cleaning of clothing in the juvenile's possession. (5-1-04)T
- **03. Replacement Clothing.** Clothing provided or purchased as replacement will be at the expense of the contract provider. Unique items of clothing not required for program participation may be purchased at the expense of the juvenile. (5-1-04)T

211. FOOD SERVICE.

Juveniles shall be served a varied and nutritional diet with menus approved or developed by a qualified nutritionist or dietician and which meet the recommended dietary allowances of the National Research Council or its equivalent. Juveniles must be fed three (3) meals daily in accordance with the child care licensing rules of the Idaho Department of Health and Welfare. (5-1-04)T

212. PERSONAL FUNDS.

- **91. Funds Handled By A Contract Provider**. The contract provider will follow accepted accounting practices in managing personal funds of juveniles and in accordance with Section 213. (5-1-04)T
- a. A contract provider shall be required to deposit all personal funds collected for the juvenile in a public banking institution in an account specifically designated "Juvenile Personal Funds", and to maintain a reconciled ledger showing each juvenile's deposits and withdrawals within the "Juvenile Personal Funds" account. If the funds are collected in an interest bearing account the interest accrued must be credited to the juvenile for whom the funds are collected. In independent living programs the required personal account may be opened by the juvenile

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and will be maintained by him as a part of his competency development.

(5-1-04)T

- **b.** All withdrawals by a juvenile or expenditures made on behalf of a juvenile by the contract provider shall be documented signed and dated by the juvenile. This documentation shall be reconciled to the juvenile's ledger monthly. (5-1-04)T
 - **c.** A contract provider may limit the amount of any withdrawal.

(5-1-04)T

- **d.** A contract provider shall not require juveniles, parents or guardians to pay for services and supplies which are to be provided by the contract provider, such as clothing, toiletries, linen, laundry, drug screens, routine supplies, and lunch money. (5-1-04)T
- **Reporting Requirements.** A report shall be filed with the department's quality assurance staff quarterly as part of the report in Subsection 200.02. The personal funds report shall show a list of all juvenile account balances, date of admission and, if appropriate, the date of transfer or release from department custody. The personal fund account is subject to review or audit by the department or its representatives at any time. Any discrepancies in juvenile accounts shall be resolved within fourteen (14) calendar days of notification. (5-1-04)T
- 03. Transfer Of Personal Funds. When a juvenile is released from department custody or transferred to another program, the balance of the juvenile's account shall be given to or mailed to the juvenile within five (5) business days and documented on the Contract Provider Juvenile Check-out Form supplied by the department.

(5-1-04)T

04. Juveniles With Earned Income. The contract provider is responsible for maintaining and accounting for any money earned by a juvenile. These funds are to be deposited in the personal funds account. The contract provider shall establish a written plan, as part of the individual treatment plan, for the juvenile to save at least ten percent (10%) of his net earnings. The plan shall specify the purpose for which funds saved will be used at program completion, such as deposits on utilities and housing, or purchase of tools necessary for employment. Additionally, there shall be a plan for the priority use of the juvenile's earned income to pay court ordered restitution and a specific allocation for daily incidental expenses. (5-1-04)T

213. RESTITUTION.

A contract provider may utilize a portion of a juvenile's personal funds or earned income for the payment of restitution to victims or for program damages according to these rules. (5-1-04)T

- **01. Victim Restitution**. Except for those juveniles identified in Subsection 212.04, victim and court ordered restitution shall be a claim against and paid from the juvenile's personal funds account in the amount of fifty percent (50%) of those funds. Should the juvenile have no other funds available, then a plan must be developed by the contract provider to assist the juvenile in earning the amount of restitution and, if appropriate, help him develop a payment plan. (5-1-04)T
- **O2. Restitution For Damages**. Restitution for damages at the program will not be paid to the exclusion of victim or court ordered restitution. The contract provider shall not access the juvenile's account for program damages without following the disciplinary process provided in these rules. (5-1-04)T
- **a.** Restitution may be ordered as part of the disciplinary process when a juvenile has willfully damaged or destroyed property, has caused or attempted to cause injury to himself, other juveniles or staff resulting in expenses being incurred, or has a pattern of falsely alleging injury or illness with the result that medical expenses are incurred.

 (5-1-04)T
- **b.** "Actual Cost" restitution may be imposed when property is destroyed and when an incident results in outside medical care for staff or juveniles. (5-1-04)T
- **c.** In no instance shall a contract provider withdraw all funds in a juvenile's account to satisfy a restitution for damages claim. (5-1-04)T
 - **03. Disciplinary Process.** All juveniles shall be afforded an administrative hearing in accordance with

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the disciplinary procedure of the contract provider and standards set forth in these rules.

(5-1-04)T

214. NOTIFICATION OF DEATH OF A JUVENILE.

In the event of the death of a juvenile who is in the department's custody, the contract provider shall immediately notify the regional facility, juvenile's parent or guardian, the local coroner, and law enforcement. Other notifications will be coordinated between the contract provider and the department. (5-1-04)T

215. EMERGENCY CLOSURE OF FACILITY.

In the event of a natural disaster, fire, flood, or other emergency situation in which the contract facility may be closed temporarily, the contract provider will notify the regional facility in their respective region. (5-1-04)T

216. -- 219. (RESERVED).

220. CONSULTANTS AND SUBCONTRACTORS.

It is the responsibility of the contract provider to notify the department's quality assurance staff promptly, in writing, of any proposed changes in the use of consultants or subcontractors in the operations of a program. Any services offered by consultants and subcontractors, or interns, and not included in the terms of the existing contract, require the prior approval of the department. It is the responsibility of the contract provider to ensure that any consultant, subcontractor, or staff meets at least the minimum staff qualifications and terms of the original contract and these rules. The contract provider shall maintain a list of subcontracted service providers, interns, and their qualifications. Documentation of services provided by subcontractors shall include the number of units of service provided per program area. (5-1-04)T

221. STAFF QUALIFICATIONS.

- **01. Licenses**. All individuals providing services to juveniles in the custody of the department must possess all licenses or certifications for their particular position as required by statute, rule, or by the Idaho Department of Health and Welfare, as applicable. (5-1-04)T
- **02. Education Or Experience**. All individuals providing services must be qualified to do so on the basis of knowledge, skills, and abilities. In addition, certain program and professional care givers must meet specific minimum standards for education or experience. These standards shall constitute, in part, the basis for determining the adequacy of program and professional services delivered under contractual agreement with the department.

(5-1-04)T

03. Position Descriptions. Contract providers shall maintain written position descriptions for every job class established in the organization. In all cases, minimum qualifications for professional level staff must meet licensure and certification requirements. In all cases, the particular job titles used by the contract provider to provide counseling, therapy, direct care, and supervision of juveniles, as well as staff supervision and management must be specifically cross-referenced with the job titles in these rules. (5-1-04)T

222. POSITION DESCRIPTIONS AND QUALIFICATION CRITERIA.

- O1. Clinician, Counselor, Or Therapist. An individual who conducts a comprehensive assessment of the psychological, behavioral, social or familial deficits or dysfunctions presented by the juvenile, then establishes and implements a plan for therapeutic services. The plan must specify diagnosis and treatment problems to be addressed, an estimate of the time needed, and a schedule of the frequency and intensity of the services to be provided. The individual may also provide individual, group, or family counseling. At a minimum, the individual must have a master's degree and must be currently licensed by the state of Idaho as a Licensed Professional Counselor (LPC), Licensed Marriage and Family Counselor (LMFT), Licensed Clinical Social Worker (LCSW), or certified school psychologist.
- **O2. Juvenile Services Coordinator Or Social Worker**. An individual who is responsible for the assessment of treatment needs and the provision and monitoring of therapeutic or rehabilitative treatment services to juveniles participating in a treatment program. Individuals providing this function must possess at a minimum, a bachelor's degree from a fully accredited college or university in social work, psychology or counseling and must be licensed as a social worker in the state of Idaho. (5-1-04)T

03. Recreational Specialist. An individual who develops and implements an individualized and goal-directed recreational plan for a juvenile in connection with his overall treatment plan. The individual providing this function must possess a bachelor's degree in recreational therapy, health and physical education, or a related field or have a high school diploma and two (2) years related experience in providing recreational services to juveniles.

(5-1-04)T

- **Rehabilitation Specialist Or Case Manager**. An individual, under direct supervision, who assists the juvenile in implementing his individualized program plan; evaluating the juvenile and maintaining his case record with respect to all nonclinical matters. The rehabilitation specialist or case manager also assists in presenting the case in staffing; communicates with appropriate individuals, including community interests, regarding the juvenile; and prepares written communications, under supervision, including discharge reports. The rehabilitation specialist or case manager may also serve as the social worker if properly licensed in the state of Idaho. Individuals providing this function must possess at a minimum, a bachelor's degree from a fully accredited college or university in the social sciences or a related field.

 (5-1-04)T
- **05. Rehabilitation Technician Or Direct Care Worker**. An individual responsible for providing individual or group rehabilitative therapeutic services, supervising juveniles' day-to-day living activities and performing such duties as preparing nutritious meals, supervising and training juveniles in basic living skills, and providing some community transportation. Such individual must have a high school diploma or its equivalent.

(5-1-04)T

- **96. Special Education Teacher**. An individual who provides a modified curriculum for those students who are eligible for services under the Individuals with Disabilities Education Act. This individual must hold a valid teaching certificate, allowing him to teach students with educational disabilities, in the state where the services are being provided. (5-1-04)T
- **07. Teacher**. An individual who provides basic educational services as required by state and federal statutes. This individual must hold a valid teaching certificate in the state where the services are being provided and in the appropriate instructional field. (5-1-04)T

223. PROGRAM STAFFING REQUIREMENTS.

- **61. General Staffing Ratios.** The contract provider shall ensure that an adequate number of qualified staff are present at all times to provide rehabilitation and treatment services, supervise juveniles and provide for their health, safety and treatment needs. Staffing patterns shall ensure that professional staff are available to juveniles at times when they are in the program or facility. The contract provider staff should provide consistency and stability so that the juveniles know the roles of each staff member. Specific staffing ratios shall be determined in each contract and shall be based on the level of intervention of the program and the risk level of the juvenile population. (5-1-04)T
- **02. Emergency Staffing Ratios**. At all times at least one (1) staff member on duty per twenty (20) juveniles in residence must be currently certified to administer first aid and cardiopulmonary resuscitation (CPR). (5-1-04)T

224. GENERAL REQUIREMENTS FOR TRAINING.

- **01. Training Plan.** Training for staff and volunteers shall be conducted in accordance with a written plan approved by management and coordinated by a designated staff member. Training plan shall include: (5-1-04)T
 - **a.** Annual inservice training for all staff;

(5-1-04)T

b. Those areas requiring current certification;

(5-1-04)T

- **c.** Prior to being assigned sole responsibility for supervision of juveniles, rehabilitation technician or direct care staff shall have training in the following areas: (5-1-04)T
 - i. Principles and practices of juvenile care and supervision;

	ii.	Program goals and objectives;	(5-1-04)T
	iii.	Juvenile rights and grievance procedures;	(5-1-04)T
	iv.	Procedures and legal requirements concerning the reporting of abuse and critical incider	nts; (5-1-04)T
	v.	Handling of violent juveniles (use of force or crisis intervention);	(5-1-04)T
	vi.	Security procedures (key control, searches, contraband);	(5-1-04)T
	vii.	Medical emergency procedures, first aid, and CPR;	(5-1-04)T
	viii.	Incident reporting;	(5-1-04)T
	ix.	How to recognize and respond to suicidal behavior;	(5-1-04)T
	х.	How to access emergency health and mental health care;	(5-1-04)T
reaction	xi. ns, includ	Proper storage and dispensing of medications, as well as general signs and symptoms ing identification of the individual who will dispense medications in the facility, and;	of adverse (5-1-04)T
	xii.	Appropriate response to health-related emergencies.	(5-1-04)T
	xiii.	Training to meet the requirements of federal educational regulations; and	(5-1-04)T
	xiv.	Training on the appropriate and safe transportation of all juveniles.	(5-1-04)T
	d.	Inservice training for all first-year staff shall include:	(5-1-04)T
	i.	Program policies and procedures;	(5-1-04)T
	ii.	Job responsibilities;	(5-1-04)T
	iii.	Juvenile supervision;	(5-1-04)T
	iv.	Safety and security emergency procedures (fire, disaster, etc.);	(5-1-04)T
	v.	Confidentiality issues;	(5-1-04)T
	vi.	Juvenile rights and grievance procedures;	(5-1-04)T
	vii.	Communicable diseases, bloodborne pathogens, and universal precautions;	(5-1-04)T
	viii.	Behavioral observation, adolescent psychology and child growth and development;	(5-1-04)T
provide	ix. ers;	Juvenile Corrections Act, balanced and restorative justice, and department rules for	or contract (5-1-04)T
	х.	Basic security procedures;	(5-1-04)T
	xi.	Signs and symptoms of chemical use or dependency;	(5-1-04)T
	xii.	Drug-free workplace, and;	(5-1-04)T
	xiii.	Diversity training to include cultural awareness.	(5-1-04)T

- **02. Minimum Mandatory Staff Training Requirements**. Good professional practice in the area of juvenile treatment requires staff to be competently trained. (5-1-04)T
- **a.** During first year of employment, eighty (80) hours of training for all staff. Up to twenty-five (25) percent of this total may be provided by work with an experienced staff mentor who will verify and document basic competencies for new staff; and (5-1-04)T
 - **b.** Forty (40) hours of training per year following the first year of employment. (5-1-04)T
 - **03.** Trainer Qualifications. (5-1-04)T
- **a.** Individuals who provide instruction in areas of life, health, and safety, including but not limited to, first aid, CPR, physical intervention techniques, shall have appropriate certification which must be documented in their personnel or training file. (5-1-04)T
- **b.** Individuals who provide instruction in treatment shall have appropriate training, education, and experience which must be documented in their personnel or training file. (5-1-04)T
- **04. Documentation Of Training.** Staff training records shall be kept by a designated staff person. Separate training records shall be established for each staff member and volunteer and shall include: (5-1-04)T

a.	Name;	(5	5-1-04)T
a.	ranic,	(-	<i>)</i> 1 OT/1

- **b.** Job title; (5-1-04)T
- **c.** Employment beginning date; (5-1-04)T
- **d.** Annual training hours required; and (5-1-04)T
- e. A current chronological listing of all training completed. (5-1-04)T
- **05. Training Records**. Training records may be kept separately within the individual personnel file or in a separate training file. Copies of curriculum materials must be maintained. (5-1-04)T

225. VOLUNTEERS.

Programs serving juveniles should consider soliciting the involvement of volunteers to enhance and expand their services, however, volunteers shall be recruited to supplement and enrich a program, not to substitute for the activities and functions of facility staff. Volunteers shall not be assigned sole supervision of juveniles. (5-1-04)T

226. VOLUNTEER PLAN.

- **01. Written Plan.** Programs that utilize volunteers regularly shall have a written plan that includes stipulations for their use and training. Training provided must include all of the information necessary for the volunteers to successfully perform their roles within the program. (5-1-04)T
- **02. Recruitment**. Recruiting of volunteers is conducted by the chief administrative officer or designee. Recruitment is encouraged from all cultural and socio-economic segments of the community. (5-1-04)T

03. Volunteer Requirements.

- **a.** Volunteers must be at least twenty-one (21) years of age, of good character, and sufficiently mature to handle the responsibilities involved in the position; (5-1-04)T
- **b.** Volunteers must complete an application for the position and be suited for the position to which they are assigned; (5-1-04)T

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c. Volunteers must agree in writing to abide by all program policies;

- (5-1-04)T
- **d.** Volunteers who perform professional services must be licensed or certified as required by state law or rule; (5-1-04)T
 - **e.** Written job descriptions must be provided for each volunteer position; and

(5-1-04)T

f. Volunteers must agree to background and criminal record checks as prescribed by state law.

(5-1-04)T

- **O4. Supervision.** Volunteers will be supervised by a paid employee of the contract provider. This individual shall coordinate and direct the activities of the volunteer. Volunteer performance shall be evaluated periodically and evidence of this evaluation be made part of the personnel record of the volunteer. (5-1-04)T
- **O5. Documentation**. Contract provider shall maintain individual personnel files for each volunteer working in the program. The files shall contain all records required in Section 226. (5-1-04)T
- **06. Termination**. There will be a procedure established for the termination of volunteers when substantial reasons for doing so exist. (5-1-04)T

227. INTERNS.

Programs serving juveniles should consider involving interns to enhance and expand their services, however, interns shall be recruited to supplement and enrich a program, not to substitute for the activities and functions of facility staff. Interns shall not be assigned sole supervision of juveniles. (5-1-04)T

01. Written Plan. Programs that utilize interns regularly shall have a written plan that includes stipulations for their use and training. Training provided must include all of the information necessary for the interns to successfully perform their roles within the program. (5-1-04)T

02. Intern Requirements.

- **a.** Interns must be documented to be enrolled in an accredited school or program for the profession; must be at least twenty-one (21) years of age, of good character, and sufficiently mature to handle the responsibilities involved in the position; (5-1-04)T
- **b.** Interns must have a fully developed internship or practicum agreement which details their activities for the period and which relates these to learning objectives developed with the academic institution and program in which they are enrolled. The internship agreement must include the signatures of the intern, supervising contract provider staff and a representative of the academic institution in which the intern is enrolled. (5-1-04)T
- **c.** Interns must agree in writing to abide by all department policies and standards of conduct, and must agree to meet the ethical standards for the profession for which they are training; (5-1-04)T
- **d.** Interns who perform professional services must be licensed or certified as required by state statute law or rule or must be documented to be supervised directly by staff meeting those credentials; (5-1-04)T
 - e. Interns must agree to background and criminal record checks as prescribed by state law. (5-1-04)T
- **O3. Supervision**. Interns will be supervised by a paid employee of the contract provider who has the licenses and credentials required by state law and who has been accepted by the school as an appropriate supervisor for the discipline of instruction. This individual shall coordinate and direct the activities of the intern. Intern performance shall be evaluated periodically and evidence of this evaluation made part of the work record of the intern.

 (5-1-04)T
- **04. Documentation**. Contract provider shall maintain individual personnel files for each intern working in the program. The files shall contain all records required by Section 227. (5-1-04)T

05. Termination. There will be a procedure established for the termination of interns when substantial reasons for doing so exist. (5-1-04)T

228. CRIMINAL BACKGROUND CHECKS.

All contract providers providing services to the department shall ensure that all employees, interns, and volunteers, as required by law, have undergone a criminal background check in the manner and form required by IDAPA 16.05.06, "Rules Governing Mandatory Criminal History Checks". In addition to the crimes listed resulting in unconditional denial, any crime not specified there that requires registration on the sex offender registry in Idaho or any other state, will also result in an unconditional denial of employment for direct care or services, or where the employee would have any opportunity to have contact with juveniles in the contract provider's care. Documentation of appropriate requests and responses shall be kept in confidential employee records. (5-1-04)T

229. DRIVERS.

All drivers of vehicles transporting juveniles must possess a valid Idaho driver's license and the proper licenses required by state law for the type of motor vehicle operated. All such operators' driving records must be checked through the Department of Motor Vehicles for the preceding three (3) years and annually after date of hire. During that time the operator must not have had any felony traffic convictions or withheld judgments. Any incidents of suspended licenses during that time must be specifically reviewed by the contract provider. Personnel files must contain evidence of training to transport juveniles as well as other appropriate documentation. When parents, guardians, or others are allowed to transport juveniles for any reason, it is the responsibility of the contract provider to ensure that the individual holds a current and valid driver's license.

(5-1-04)T

230. -- 239. (RESERVED).

240. JUVENILES' RIGHTS AND RESPONSIBILITIES.

- **01. Contract Providers' Obligations**. The contract provider must observe, and not infringe upon, the rights of each juvenile in its facility or program. The contract provider shall also be responsible for understanding the rights and responsibilities of juveniles in custody, and knowing which rights have been forfeited as a result of being placed in custody.

 (5-1-04)T
- **Religious Services And Special Needs**. Each juvenile and his family will be advised in writing of the obligation of the contract provider to allow access to appropriate religious services, and to make reasonable accommodations for any disabilities, language barriers or other special needs. A signed copy of this notice shall be placed in the juvenile's file.

 (5-1-04)T
- **03. Juveniles' Program Responsibilities**. The contract provider shall inform each juvenile, upon admission to its program, of his responsibilities during the program. Additionally, each juvenile shall have an understanding of the following program expectations: (5-1-04)T
 - **a.** Requirements needed to complete program; (5-1-04)T
 - **b.** How to access medical services; (5-1-04)T
 - c. How to file a grievance; and (5-1-04)T
 - **d.** How to contact juvenile services coordinator and juvenile probation officer. (5-1-04)T

241. DISCIPLINE OF JUVENILES.

- **01. Written Policies And Procedures.** All residential providers and those nonresidential providers offering treatment services shall have comprehensive written discipline policies and procedures, which shall be explained to all juveniles, families, and staff. These policies shall include positive responses for appropriate behavior. They shall include a provision for notice to the juvenile being disciplined, a mechanism for a fair and impartial hearing by a disciplinary board and a process for appeal. (5-1-04)T
 - **O2. Problem Resolution.** Disciplinary actions are not the same as the consequences that are spelled out

as a part of an individual treatment plan for the juvenile. A contract provider shall make every effort to resolve problems with the least amount of formal disciplinary activity possible. Efforts should be made first to instruct and counsel the juvenile. Any restriction of a juvenile's participation in a program resulting from a formal disciplinary action must be reported in an incident report. (5-1-04)T

242. FORMAL DISCIPLINARY PROCESS.

- **01. Prior To And Upon Initiating A Formal Disciplinary Action**. Prior to and upon initiating a disciplinary action, careful attention should be given to the program rules to determine the seriousness of the misbehavior and the appropriate type of discipline. (5-1-04)T
- **03. Discipline**. Discipline will be administered in a way to create a learning experience for the juvenile, and never in a way that degrades or humiliates a juvenile. (5-1-04)T
- **Other Juveniles**. No juvenile shall supervise nor carry out disciplinary actions over another juvenile. (5-1-04)T
- **05. Prohibited Actions.** The contract provider is prohibited from using certain actions as disciplinary responses as listed in the child care licensing rules of the Idaho Department of Health and Welfare. (5-1-04)T

06. Denial Of Services. Denial of the following are prohibited as disciplinary responses: (5)	5-1-04)T
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a.	Educational and vocational services:	(5-1-04)T

b.	Employment:	(5-1-04)T

- c. Health or mental health services; (5-1-04)T
- **d.** Access to family, juvenile probation officer, and legal counsel; and (5-1-04)T
- e. Religious services. (5-1-04)T

243. APPEAL OF FORMAL DISCIPLINARY PENALTIES.

Each contract provider shall have a formal written process through which a juvenile can appeal a disciplinary action and receive a review of his case. The contract provider shall explain to the juvenile how to use the appeal process. The juvenile must be informed that in any event he may include his juvenile services coordinator in the disciplinary process.

(5-1-04)T

244. ROOM RESTRICTIONS.

The contract provider shall have written policies and procedures regulating the use of the juvenile's room for "room restriction". The policy shall ensure that there are procedures for recording each incident involving the use of restriction. The reason for the room restriction shall be explained to the juvenile and he shall have an opportunity to explain the behavior. Other less restrictive measures must have been applied prior to the room restrictions. Juveniles in room restriction shall have access to the bathroom. Staff shall check on a resident in room restriction a minimum of once every fifteen (15) minutes. Room restriction may only be used in an unlocked area. Room restriction shall not exceed a total of eight (8) hours within a twenty-four (24) hour period. Contract providers must ensure that juveniles with a history of depression or suicidal ideation and those who have exhibited these behaviors while in care, are checked at least every five (5) minutes in order to ensure their safety. Additionally, if any level of suicide precaution is initiated, constant observation must be maintained. All items in the area that might be used to attempt self-harm should be restricted or removed.

(5-1-04)T

245. BATTERY ON STAFF.

All instances of battery committed on staff shall be documented and, whenever appropriate, charges will be filed with appropriate authorities. Each such incident shall be reported to the department juvenile's juvenile services

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coordinator as an incident report according to Subsection 262.02.

(5-1-04)T

246. GRIEVANCE PROCEDURES.

- **01. Written Procedures.** Each program shall have a written grievance procedure for juveniles (which includes the right to appeal disciplinary actions against them if a separate disciplinary grievance procedure is not available to them). It shall be written in a clear and simple manner and shall allow juveniles to make complaints without fear of retaliation. (5-1-04)T
- **O2. Grievance Forms**. The grievance procedure shall be explained to the juvenile by a staff member who shall enter a note into the juvenile's file confirming the explanation. Grievance forms shall be in a location accessible to juveniles without having to request such a form from staff. Completed forms should be placed in a secure area until collected and processed weekly. A copy of the grievance and the resolution of that grievance must be attached to the quarterly report as specified in Subsection 200.02. (5-1-04)T

247. LETTERS.

Restrictions. Juveniles shall be allowed to send and receive letters from approved persons, which may include persons in other programs or institutions, unless specifically prohibited by the department or by court order. All other restrictions of mail must be discussed with the community treatment team, approved in writing by the juvenile services coordinator, and documented in the juvenile's individual treatment plan. There shall be no general restrictions on the number of letters written, the length of any letter, or the language in which a letter may be written. However, juveniles will be provided with sufficient stationery, envelopes and postage for all legal and official correspondence, and for at least two (2) personal letters each week. (5-1-04)T

02. Inspection Of Outgoing Letters.

(5-1-04)T

a. Outgoing letters are to be posted unsealed and inspected for contraband.

(5-1-04)T

b. Exception: Outgoing "privileged" mail may be posted, sealed and may not be opened, except with a search warrant, as long as it can be confirmed to be to an identifiable source. For purposes of this rule, "an identifiable source" means that the official or legal capacity of the addressee is listed on the envelope and that the name, official or legal capacity, and address of the addressee has been verified. Possible identifiable sources are the following:

(5-1-04)T

i. Court(s); (5-1-04)T

ii. Attorney(s); (5-1-04)T

iii. Juvenile services coordinator, or director of the Idaho Department of Juvenile Corrections;

(5-1-04)T

iv. Other state and federal departments, agencies and their officials; and (5-1-04)T

v. Members of the press. (5-1-04)T

- **c.** Upon the determination that the mail is not identifiable as privileged mail, said mail shall be opened and inspected for contraband. (5-1-04)T
- **03. Inspection Of Incoming Letters**. All incoming letters must be opened by the juvenile to whom it is addressed and may be inspected for contraband by staff and only in the juvenile's presence. (5-1-04)T
- **04. Reading Of Letters**. Routine reading of letters by staff is prohibited. The department or court may determine that reading of a juvenile's mail is in the best interest of the juvenile, and is necessary to maintain security, order or program integrity. However, such reading of mail must be documented and unless court ordered, must be specifically justified and approved by the juvenile services coordinator. Under no circumstances shall a juvenile's privileged mail be read. (5-1-04)T

248. PACKAGES.

All packages shall be inspected for contraband.

(5-1-04)T

249. PUBLICATIONS.

Books, magazines, newspapers and printed matter which may be legally sent to juveniles through the postal system shall be approved, unless deemed to constitute a threat to the security, integrity or order of the programs. Juveniles will not be allowed to enter into subscription agreements while in department custody. (5-1-04)T

250. DISTRIBUTION OF MAIL.

The collection and distribution of mail is never to be delegated to a juvenile. Staff shall deliver mail within twenty-four (24) hours, excluding weekends and holidays, to the juvenile to whom it is addressed. (5-1-04)T

251. VISITATION.

The contract provider shall develop written rules governing visiting at the facility and shall provide a copy to each juvenile, his parent or guardian, and the juvenile services coordinator. Visitation policy must include specific restrictions on those under the influence of alcohol or drugs. In all cases, the contract provider will work with the juvenile services coordinator and juvenile probation officer to identify and approve potential visitors in accordance with the contract provider's criteria. The contract provider is responsible for developing and implementing policy concerning visitation which protects the safety of visitors, staff, and juveniles. This may restrict visitation below an established age or provide for higher levels of supervision in circumstances where safety may be at risk. (5-1-04)T

252. PERSONAL SAFETY.

- **01. Responsibility**. Every juvenile has the fundamental right to feel safe. Contract providers have the responsibility to ensure that juveniles are safe while in their care. Every juvenile shall be informed of procedures whereby a professional staff person can be contacted on a twenty-four (24) hour basis if the juvenile does not feel safe.

 (5-1-04)T
- **02. Periodic Contacts.** The contract provider's managers should make periodic contact with juveniles in the program to determine if they feel safe and are comfortable when interacting with peers and staff. (5-1-04)T

253. SMOKING AND SALE OF CIGARETTES.

- **01. Purchase Or Use**. Juveniles in department custody, regardless of age, are strictly prohibited from purchasing or using tobacco products. (5-1-04)T
- **02. Written Policies**. Every contract provider shall establish written policies and procedures banning the use of cigarettes and other tobacco products by juveniles at the facility. (5-1-04)T

254. RESEARCH.

- **01. Written Policies**. Residential and nonresidential programs shall have written policies regarding the participation of juveniles in research projects. Policy shall prohibit participation in medical or pharmaceutical testing for experimental or research purposes. (5-1-04)T
- **02. Voluntary Participation**. Policy shall govern voluntary participation in nonmedical and nonpharmaceutical research programs. However, juveniles shall not participate in any research program without prior written approval from the director or designee. (5-1-04)T

255. -- 259. (RESERVED).

260. PROGRAMMING.

01. Basic Program Requirements. Contract providers offering residential and nonresidential programs for juveniles must provide opportunities and services for juveniles to improve their educational and vocational competence, to effectively address underlying behavior problems and to prepare them for responsible lives

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in the community. Programs provided must be research based, gender equitable, gender specific and culturally competent. The ultimate treatment goal for juveniles involved in these programs is the successful return of the juvenile to the community without committing further crimes. (5-1-04)T

02. General Requirements.

(5-1-04)T

- **a.** Contract providers must provide a range of program services specifically designed to address the characteristics of the target population identified in the comprehensive program description and in the admission policy. (5-1-04)T
- **b.** Programs that serve a special needs population, such as developmentally delayed or seriously emotionally disturbed juveniles, and those programs serving sexually abusive juveniles must be able to demonstrate that the program services offered are supported by research. (5-1-04)T
- **c.** Programs serving female juveniles must be able to demonstrate that the services provided include elements of a program specific to the unique situations and circumstances facing female juvenile offenders.

- **d.** Program services for individual juveniles must be designed based upon a documented assessment of strengths, as well as needs and risks and must target those behaviors or circumstances which have contributed to the juvenile's delinquency and which can reasonably be changed (criminogenic needs). (5-1-04)T
- **e.** Professional level services offered as a part of the program must be provided by staff meeting the requirements set forth in Sections 220 through 222, of these rules. (5-1-04)T
- **f.** Progress made by individual juveniles in each service area that is a portion of the individual treatment plan must be documented in at least monthly progress notes and reported in written progress reports at least every two (2) months. (5-1-04)T
 - **g.** Programs that contract with the department to serve juveniles and their families must: (5-1-04)T
 - i. Provide humane, disciplined care and supervision;

- (5-1-04)T
- ii. Provide opportunities for juveniles' development of competency and life skills;
- (5-1-04)T
- iii. Hold juveniles accountable for their delinquent behavior through means such as victim-offender mediation, restitution and community service; (5-1-04)T
- iv. Seek to involve juveniles' families in treatment, unless otherwise indicated for the safety and benefit of the juveniles or other family members; (5-1-04)T
- v. Address the principles of accountability to victims and to the community, competency development, and community protection in case planning and reporting; (5-1-04)T
- vi. Participate fully with the department and the community treatment team in developing and implementing treatment plans for juveniles they serve; (5-1-04)T
 - vii. Provide juveniles with educational services based upon their documented needs and abilities; and (5-1-04)T
- viii. To the fullest extent possible, provide balance in addressing the interests of the victim, community, and the juvenile. (5-1-04)T
- **h.** Reintegration services include all aspects of case planning and service delivery designed to facilitate successful return of the juvenile to the community. All juveniles committed to the department shall have a written reintegration plan developed as a part of their individual treatment plan. (5-1-04)T

- **O3.** Comprehensive And Current Program Description. Contract providers must provide, and keep current with the department, a program description detailing the range of services to be provided and the methods for providing these services. The current program description will be attached to the contract. At a minimum, this program description must include: (5-1-04)T
 - **a.** Target population and specific admission criteria; (5-1-04)T
 - **b.** Primary and secondary treatment modalities; (5-1-04)T
 - **c.** Outline of daily schedules for juveniles and staff; (5-1-04)T
- **d.** Plans for providing educational services, including full compliance with all applicable federal and state law and rules for special education and Title I services; (5-1-04)T
- **e.** Plans for providing emergency and routine health and mental health services, including psychotropic medication monitoring, unless this population is specifically excluded from admission to the program; (5-1-04)T
- **f.** Plans for providing religious services, recreation services and other specialized services as indicated by the needs of the identified target population; (5-1-04)T
 - g. Plans for the use of volunteers to provide for support elements of the program; (5-1-04)T
- **h.** Written criteria for successful completion of the program and written criteria for termination from the program prior to completion; (5-1-04)T
- i. A thorough description of all services offered as a part of the program including a description of the frequency of service delivery accounting for the costs of all services provided by consultants and subcontractors;
 - (5-1-04)T
 - j. A detailed description of the behavior management component of the program; and (5-1-04)T
- \mathbf{k} . A copy of any memoranda of understanding with the local educational authority for providing educational services. (5-1-04)T
- **04.** Advance Notice Of Program Or Population Changes. Contract providers shall notify the department as soon as possible but no later than thirty (30) calendar days before there is a change in the name of the organization, type of service, characteristics of juveniles being serviced, changes in the licensed capacity of the facility, closure of the facility, changes in ownership or changes in the organizational structure. (5-1-04)T

261. PROGRAM POLICY REQUIREMENTS.

- **01. Written Policies**. Programs must have, at a minimum, the following written policies concerning program operation available at the program site. (5-1-04)T
 - **a.** Program elements and implementation. (5-1-04)T
- - **c.** Criteria for assigning juveniles to different units within the program, if applicable. (5-1-04)T
- **d.** The provision of (or referral for) emergency and routine health and mental health services for the population. (5-1-04)T
- **e.** The prevention and monitoring of suicidal behavior exhibited by juveniles. The policy at a minimum shall require: (5-1-04)T

- i. A system of structured and documented observation, interview and review of behavioral, medical and mental health information, completed within no more than two (2) hours of a juvenile's admission into a facility, for the purpose of determining any immediate threat of suicide or self-harm and for determining the need to have a mental health professional complete a suicide risk assessment. (5-1-04)T
- ii. A system of structured and documented observation, interview and review of behavioral and mental health information, completed by a mental health professional for the purpose of determining the level of immediate risk of a juvenile attempting suicide. A suicide risk assessment comprises a thorough review of recent behavioral and mental health information, interviews of staff and the juvenile concerning the behavior that seems to present the threat of self-harm or suicide and the development and dissemination of a safety plan to address the risk as it is determined to exist. A suicide risk assessment typically involves an assessment of the juvenile's determination to act on his intentions of self-harm, a determination of the depth of his planning for making the attempt, the availability of the items or situations necessary for him to act on that plan and the lethality of the plan as expressed. Reassessment of suicide risk is made at a time determined by the mental health professional completing the assessment and is ideally completed by that same mental health professional. (5-1-04)T
- **f.** Behavior management within the program, including use of points and levels, restraints, separation, detention and other types of special management. (5-1-04)T
- g. Supervision of juveniles. This policy shall include managing juvenile movement within the program, including the timely transfer of behavioral information about juveniles from staff at shift change. (5-1-04)T
- **h.** Juveniles' access to the community. This policy shall include use of community schools or job sites, and individual or group activities away from the program site. For residential programs, this also includes day or home passes. (5-1-04)T
 - i. Provision of educational and vocational services. (5-1-04)T
 - j. Administrative coverage in emergency situations, after regular work hours (residential only).
 (5-1-04)T
- **k.** Documentation and reporting of critical incidents to program administrators, the department and others on the community treatment team. (5-1-04)T
- l. Treatment planning and progress reporting to the department, juvenile, family and others on the community treatment team. (5-1-04)T
- **m.** Reintegration policy. The policy shall describe criteria for successful completion of program, termination from program prior to completion, and the involvement of the department and community treatment team. (5-1-04)T

n.	Grievances.	(5-1-04)T
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- **o.** Visitation. (5-1-04)T
- **p.** Correspondence, including telephone and mail. (5-1-04)T
- **q.** Emergency procedures policy in the event of a natural disaster. (5-1-04)T
- r. Searches of staff and visitors. (5-1-04)T
- **O2. Documented Staff Training**. Documented staff training on these policies must also be available for review by the department. (5-1-04)T

262. PROGRAM OPERATIONAL REQUIREMENTS AND CASE MANAGEMENT.

01. General Requirements.

(5-1-04)T

- **a.** Programs should provide vigorous programming that minimizes periods of idle time, addresses behavioral problems of resident juveniles, and teaches and promotes healthy life choices. Programs should specifically address those factors in juveniles' lives that contribute to delinquency and that can be realistically changed. (5-1-04)T
- **b.** Programs must be open to the community by encouraging appropriate telephone and mail contact between juveniles and their families, by encouraging visitation, and by involving volunteers in support of the program. (5-1-04)T
- c. Contract providers must structure and document services offered in the program so that continuity in case planning is obvious. Health, mental health, substance abuse, social skills, educational, vocational, independent living and other special needs identified in the assessment must be clearly addressed in the individual treatment plan. Services provided to address those needs must be documented regularly. Progress on goals associated with those needs must be recorded in progress notes in a case file at least monthly and in a written progress report at least every two (2) months. Service needs remaining at the time of release from department custody or transfer must be accounted for in the reintegration plan for each juvenile. (5-1-04)T
- **d.** Without authorization from the Idaho Department of Health and Welfare and the department, a residential care contract provider shall not admit more juveniles into care than the number specified on the provider's license. Contract providers wishing to increase capacity are responsible for contacting the Idaho Department of Health and Welfare. A copy of the written confirmation to the contract provider from the Idaho Department of Health and Welfare for verbal approval to exceed the licensed capacity shall be forwarded to the department's clinical supervisor in the region and to the department's quality assurance staff. (5-1-04)T
- e. Programs may not, under any circumstances, involve juveniles in plethysmographic assessments. The use of polygraphs for juveniles adjudicated for or documented to have demonstrated sexually abusive behavior, shall only be undertaken by court order or with the specific written authorization of the department's regional clinical supervisor, and then only with the full, informed consent of the juvenile, and if he is a minor, his parent or guardian. Contract providers shall not make treatment decisions solely on the results of a polygraph. Polygraphers used in this process must be able to provide documentation of specific training in the use of polygraphy with juvenile, sexually abusive offenders.

 (5-1-04)T

02. Reporting Incidents.

- a. If any of the following events occur, the contract provider must immediately notify the juvenile's parent or guardian, juvenile services coordinator, juvenile probation officer, and the department's regional state facility by telephone (not by facsimile). A written incident report shall also be transmitted within twenty-four (24) hours to the juvenile's parent or guardian, juvenile services coordinator, and the juvenile probation officer, unless notification to the juvenile's parent or guardian would endanger the juvenile. Transmission may be electronic or by facsimile.

 (5-1-04)T
- i. Health and mental health emergencies, including but not limited to, every instance of emergency room access; (5-1-04)T
- ii. Major incidents such as death of a juvenile, suicide, attempted suicide or threat of suicide, attempted escape, sexual misconduct among juveniles or by staff, criminal activity resulting in arrest or filing a report with local law enforcement, or any relevant report made to the Idaho Department of Health and Welfare; (5-1-04)T
- iii. Any incident of restraint which involves the use of medications, chemicals or mechanical devices of any kind; (5-1-04)T
 - iv. Any use of separation or isolation for more than two (2) hours; (5-1-04)T
 - v. Incidents of alleged or suspected abuse or neglect of juveniles; and (5-1-04)T

vi. Incidents involving the disclosure of criminal behavior by juveniles.

(5-1-04)T

b. In all instances of escape, the contract provider must immediately notify the juvenile correctional center in Nampa first followed by the regional state facility, juvenile's parent or guardian, juvenile services coordinator, and juvenile probation officer by telephone (not by facsimile). A written incident report shall also be transmitted within twenty-four (24) hours to the juvenile's parent or guardian, juvenile services coordinator, and the juvenile probation officer, unless notification to the juvenile's parent or guardian would endanger the juvenile. Transmission may be electronic or by facsimile. Upon apprehension, all of the same parties must be notified immediately. (5-1-04)T

03. Incidents Not Requiring Immediate Notice.

(5-1-04)T

- **a.** Contract providers must ensure that a detailed, written incident report is completed and signed by involved staff before the end of the shift during which the incident took place. A copy of the completed incident report must be submitted to the juvenile services coordinator no later than ten (10) business days after the incident, if the incident involves a juvenile in department custody. (5-1-04)T
- **b.** A detailed incident report is required for each incident or activity which jeopardizes the safe operation of the facility. This would include but not be limited to instances of lost keys or tools, major misconduct by one (1) or more juveniles or staff, discovery of contraband such as weapons or drugs and significant property damage resulting from misconduct, negligence or from incidents such as, explosions, fires, floods, or other natural disasters.
- **c.** A detailed incident report is also required for each incident of staff or juvenile misconduct which results in any type of: (5-1-04)T

icsuits i	in any typ	C 01.	(3-1-04)1
	i.	Injury;	(5-1-04)T
	ii.	Physical restraint;	(5-1-04)T
	iii.	Suspension;	(5-1-04)T
	iv.	Termination of work;	(5-1-04)T
	v.	Program participation; or	(5-1-04)T
	vi.	Separation, isolation, or room confinement for less than two (2) hours;	(5-1-04)T

vii. Detention; or (5-1-04)T

viii. Arrest of a juvenile. (5-1-04)T

04. Incident Report Content. Contract providers may elect to use the department's standard incident report form or may use another form as long as all of the following information is included: (5-1-04)T

a. Juvenile's assigned unit; (5-1-04)T

b. Date and time of the incident; (5-1-04)T

c. Witnesses; (5-1-04)T

d. Persons notified with date and time of notice; (5-1-04)T

- **e.** Type of incident by category such as, assault on staff, assault on juvenile, injury or illness, property damage, contraband, suicide attempt or threat, escape or attempted escape, other misconduct; (5-1-04)T
 - **f.** Action taken by category such as, physical restraint, separation, isolation, or room confinement

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with times in and out, suicide precautions or escape precautions initiated;

(5-1-04)T

g. Brief narrative description of the incident;

(5-1-04)T

h. Signature of staff and reviewing supervisor; and

(5-1-04)T

i. Documentation of injury and medical attention provided.

- (5-1-04)T
- **05. Escapes.** In all instances of escape, the contract provider must immediately notify the juvenile correctional center in Nampa first followed by the regional state facility, juvenile's parent or guardian, juvenile services coordinator, and juvenile probation officer by telephone (not by facsimile). A written incident report shall also be transmitted within twenty-four (24) hours to the juvenile's parent or guardian, juvenile services coordinator, and the juvenile probation officer, unless notification to the juvenile's parent or guardian would endanger the juvenile. Transmission may be electronic or by facsimile. Upon apprehension, all of the same parties must be notified immediately. (5-1-04)T
- **a.** Clothing and other personal belongings shall be secured immediately and maintained in a secure place until returned to the department. (5-1-04)T
- b. The contract provider shall not transfer a juvenile at the time of an escape. The juvenile shall continue to be assigned to the program, although not physically present for up to forty-eight (48) hours. The program will be reimbursed for the days the juvenile was on escape status up to forty-eight (48) hours. Should the program choose to transfer the juvenile after his return, then the procedures outlined in Subsections 276.04 and 276.08, of these rules, shall apply. If the juvenile is apprehended, the contract provider should contact the juvenile services coordinator to plan for transfer of the juvenile to a regional facility for an updated assessment and for a placement decision.

 (5-1-04)T
- **Monitoring The Location Of Juveniles**. The contract provider must have and strictly follow a comprehensive policy covering the supervision of juveniles, including a plan for monitoring all movement of those juveniles both in the facility and, as appropriate, within the community. Staff at the facility must be aware of the location of every juvenile assigned to that program at all times. (5-1-04)T
- **Nonresidential Absences**. Nonresidential programs shall make reasonable efforts to ensure that the juveniles attend their program daily or as otherwise specified in the treatment plan. The nonresidential program shall inform the juvenile services coordinator of daily attendance and all attendance problems. This information must be documented in at least monthly progress notes and must be reported in written progress reports every two (2) months.

 (5-1-04)T

263. FACILITY SEARCHES.

- **O1. Periodic Searches**. In order to ensure the safety of juveniles, staff, and visitors, periodic facility searches for contraband shall be conducted. The frequency and extent of whole facility and ground searches should be consistent with program policies and can be included during other routine inspections or activities. Searches shall be conducted by staff trained in appropriate search techniques. Searches called by the facility staff do not have to include the entire facility, but can be limited to specific areas or juveniles. Juveniles' belongings shall be disturbed no more than necessary during the search. The search shall be documented in terms of who conducted the search, what areas were searched, and what type of contraband was found, if any. If a search yields contraband, the juvenile services coordinator will be notified and it shall be reported according to the requirements of the department. If necessary, the appropriate law enforcement agency should be notified. (5-1-04)T
- **O2. Policies And Procedures Governing Searches**. The program shall maintain and make public written policies and procedures for conducting searches of juveniles, all areas of the facility, staff and visitors to the program to control contraband or locate missing property. It is suggested that a sign be posted notifying visitors of the specific policy of the contract provider regarding searches.

 (5-1-04)T
- **03.** Policies And Procedures Governing Consequences. The contract provider shall also have written policy and procedures establishing the consequences for juveniles found with contraband. Juveniles should

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acknowledge, with their signature, that they were informed of what constitutes contraband and also the consequences for its possession. (5-1-04)T

04. Visitor Searches. (5-1-04)T

- **a.** Prior to visitors being allowed in the facility, they shall be given rules established by the contract provider that govern their visit and advised that they may be subject to a search. They shall sign a statement of receipt of these rules and it shall be placed in the facility's file. Visitors may be required to submit packages, handbags and briefcases for inspection by trained staff. If there is reason to believe that additional searches are necessary, admission to the facility shall be denied. (5-1-04)T
- **b.** All visitor searches shall be documented in the facility log. When contraband is found, a written report shall be completed and submitted to the juvenile services coordinator. If necessary, the appropriate law enforcement agency will be notified. (5-1-04)T

264. CONTRABAND DISPOSAL.

All contraband found in the possession of juveniles, visitors or staff shall be confiscated by staff and secured under lock and key in an area inaccessible to juveniles. Local law enforcement shall be notified in the event illegal drugs, paraphernalia, or weapons are found. It shall be the responsibility of the facility director, in consultation with the department, to dispose of all contraband not confiscated by police. Visitors who bring in items that are unauthorized, but not illegal, will have these items taken and locked in an area inaccessible to the juveniles during the visit. Visitors will get these items back upon their exit from the facility.

(5-1-04)T

265. PERSONAL ITEMS.

Routine searches of suitcases or personal items being introduced into the facility will be conducted by facility staff prior to the juvenile taking possession of his property, or when the juvenile is returning to the facility from a home pass. Search of a juvenile's belongings may be done at any time and shall be minimally intrusive. All searches shall be documented in the facility log and, if contraband is found, a written incident report must be submitted to the juvenile services coordinator. If necessary, the appropriate law enforcement agency shall be notified. (5-1-04)T

266. JUVENILE PAT DOWN SEARCHES.

- **01. Necessity.** Pat down searches of juveniles may be conducted whenever the contract provider believes it is necessary to discourage the introduction of contraband into the facility, or to promote the safety of staff, juveniles, and visitors. A pat down search may be used when a juvenile is returning from a visit, or outside appointment, or activity. (5-1-04)T
- **02. Pat Down Searches.** Pat down searches shall be conducted in the manner required by the child care licensing rules of the Idaho Department of Health and Welfare. (5-1-04)T
- **O3. Documentation**. All pat down searches shall be documented in the facility log. A written report shall be completed when contraband is found and shall be submitted to the juvenile services coordinator. If necessary, the appropriate law enforcement agency shall be notified. (5-1-04)T

267. JUVENILE STRIP SEARCHES.

- **Reasonable Suspicion.** Strip searches may be performed by facility staff, only after a pat down search, whenever there is reasonable suspicion to believe that weapons or contraband may be found through additional searches. Strip searches shall be authorized by the facility director or designee and conducted strictly in the manner required by the child care licensing rules of the Idaho Department of Health and Welfare. (5-1-04)T
- **O2. Documentation**. All strip searches shall be documented in the facility log. A written report shall be completed when contraband is found and shall be submitted to the juvenile services coordinator. If necessary, the appropriate law enforcement agency shall be notified. (5-1-04)T

268. DRUG SCREENS OF JUVENILES.

Drug screens may be done randomly or on an as needed basis at the contract provider's expense with the approval of

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the contract provider's director. A record shall be kept of all drug screens and results. A positive drug screen shall immediately be reported to the juvenile services coordinator supervising the case. (5-1-04)T

269. USE OF FORCE OR PHYSICAL RESTRAINTS.

Contract providers must ensure that all terms of the child care licensing rules of the Idaho Department of Health and Welfare are strictly followed, as appropriate. Additionally, contract providers must ensure that: (5-1-04)T

- **01. Minimal Use**. Only the minimum level of force necessary to control a juvenile's destructive behavior shall be used. (5-1-04)T
- **O2. Physical Force**. Physical force, at any level, may only be used to prevent injury to the juvenile or to others and to prevent serious damage to property or escape. Physical force shall never be used as punishment.
- **03. Reporting Requirement.** All instances of inappropriate use of force must be documented in an incident report and submitted to the juvenile services coordinator. These incidents must be reported to the Idaho Department of Health and Welfare, or law enforcement as required by law. (5-1-04)T

270. DISPOSITION OF REFERRALS FROM THE DEPARTMENT.

A juvenile's admission into a program shall be based on an assessment of the juvenile's strengths, problems, risks and needs and on the anticipated ability of the program to reasonably address those issues. A contract provider shall not accept any juvenile for placement whose needs cannot be adequately met by the contract provider's program. Contract providers shall ensure that the juvenile and parent or guardian are provided an opportunity to participate in the admission process and related decisions. (5-1-04)T

- **O1.** Accepting Referral. Upon receipt of a complete referral packet from the department, the contract provider has two (2) business days in which to decide whether to accept or decline the referral. Upon acceptance, the Referral Acceptance/Denial Form, attached to the referral packet, must be completed and signed. By accepting the referral, the contract provider agrees to address the identified treatment goals and the anticipated length of stay. Once the acceptance has occurred, the juvenile's transportation will be made. (5-1-04)T
- **O2. Declining Referral.** Contract providers shall not, without just cause, deny admission to any juvenile who meets the specific admission criteria set forth in the program description. If a contract provider denies a referral, the specific reason for denial must be documented on the department's Referral Acceptance/Denial Form and which form must be returned to the regional referral coordinator. The contract provider shall then shred the referral packet.

 (5-1-04)T
- **O3.** Change In Admission Criteria. Any change in the contract provider's admission criteria must be reflected in the admission policy and requires a written amendment to the contract with the department. Temporary exceptions are covered under Section 101, of these rules. (5-1-04)T

271. ONGOING TREATMENT AND CASE MANAGEMENT.

01. Individual Treatment Plan. Within thirty (30) calendar days of the juvenile's admission into the program, a written individual treatment plan must be developed. The individual treatment plan must relate services to be provided for each juvenile to the risks, needs and competencies identified in the observation and assessment report provided by the department for that juvenile. The individual treatment plan should, at a minimum, address the following areas as indicated by need:

(5-1-04)T

a.	Health;	(5-1-04)T
b.	Mental health;	(5-1-04)T
c.	Substance abuse;	(5-1-04)T
	0.1117	(5.1.04)TI

d. Social skills; (5-1-04)T

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e.	Education;	(5-1-04)T
f.	Vocations;	(5-1-04)T
g.	Independent living;	(5-1-04)T
h.	Other special needs; and	(5-1-04)T
i.	Progress notes from the initial period of placement in the program.	(5-1-04)T

02. Family Involvement. Each juvenile and, to the fullest extent possible, the family should be involved in developing the individual treatment plan and in adjusting that plan throughout the course of treatment.

- Department Assessments. Assessments provided by the department shall not be repeated by the 03. contract provider at the time of admission into the program without specific justification provided to the regional clinical supervisor. (5-1-04)T
- Individual Treatment Plan Adjustments. The individual treatment plan should be adjusted throughout placement with the concurrence of the juvenile services coordinator following communication with the community treatment team. Specifically, the individual treatment plan should be adjusted as new needs are identified, as treatment goals are achieved, and as plans for reintegration are finalized.
- **Progress Notes.** Monthly progress notes must be filed recording each juvenile's progress toward (5-1-04)Tcompleting the individual treatment plan.
- Education Plan. A copy of the juvenile's education plan shall be a component of the individual treatment plan. This education plan shall include the juvenile's course of study (GED, secondary, post-secondary, etc.), long-term educational goals and short-term objectives, and shall comply with all state and federal laws. If the juvenile has been identified as eligible to receive services under Section 504 of the federal Rehabilitation Act of 1973 (504) or the federal Individuals with Disabilities Education Act (IDEA), a copy of the Individualized Educational Plan (IEP) and supporting documentation shall be available for review by the department and the Idaho Department of Education. The education plan shall be submitted yearly to the juvenile correctional center in Nampa while the education progress reports shall be submitted every other month.
- Progress Report. The progress report should focus on areas of positive change in behavior and attitudes, as well as on the factors required for a successful program completion (progress in community protection, competency development, and accountability). Areas of need that were included in the individual treatment plan and identified in Subsection 271.01 should also be referenced in the progress report. Each progress report should also note any changes or further development of the reintegration plan and should detail the level of involvement of the parent or guardian in treatment. A written progress report must be submitted to the juvenile services coordinator at least every two (2) months. (5-1-04)T
- Report Distribution. Copies of the progress report shall be distributed by the contract provider to the juvenile, juvenile services coordinator, and the juvenile's probation officer. The juvenile services coordinator will review and forward the progress report to the appropriate court. (5-1-04)T
- Copies of the progress report should also be distributed to the parent or guardian, unless the juvenile's family has been excluded from treatment by the juvenile services coordinator, and the respective clinical supervisor, for some well documented reason. (5-1-04)T
- The juvenile must always be aware of the status of his progress within the program and what remains to be done to complete the program.
- Programs must provide an educational program that is tailored to each juvenile's educational level, abilities, problems, and special needs, and improves educational performance and vocational skills while in care.

- d. Each juvenile should have a written individual learning plan for education based upon assessed academic, emotional, developmental and behavioral needs and competencies. Juveniles determined to be eligible for special education must be provided these services. The provision of these services and the progress made academically must be documented regularly in a separate educational file. Juveniles qualifying for special education must have a valid IEP available for review by the department and the Idaho Department of Education. A copy of the IEP and all supporting documentation must be sent to the department's education records manager within ten (10) business days or less of its completion for inclusion in the student's permanent school records that are maintained at the juvenile correctional center in Nampa. (5-1-04)T
- e. Contract providers must assure that the basic norms and expectations of the program are clearly presented to juveniles and that they are understood. Any points, levels or phases that are a fundamental part of a program must be clearly understood by juveniles in the program. Each juvenile's progress, or lack of progress, through these levels must be clearly documented and must be related to documented behavior. Recommendations for release from department custody or transfer should be substantiated by a documented pattern of behavioral change over a period of time. Recommendations for transfer to a higher level of custody must be substantiated by a documented lack of progress over time or by a serious or violent incident which threatens the safety of others or the stability of the overall program. (5-1-04)T

272. PASSES.

Prior to granting a day pass or a home pass to a juvenile, the contract provider shall contact the juvenile probation officer and the juvenile services coordinator to ensure that neither the court nor the department has placed restrictions on the juvenile's pass privileges. All requests for passes must be approved by the juvenile services coordinator. Any pass involving an overnight stay away from the facility or which involve special circumstances, such as a sexual victim in the home, require a written plan detailing supervision and safety measures to be taken, an itinerary for the visit, and must be approved in writing five (5) business days in advance by the juvenile services coordinator.

(5-1-04)T

O1. Potential Risk To Public Safety. All passes for juveniles assigned to residential facilities should be considered as an integral part of the treatment plan. However, in all cases, the potential risk to public safety and adequacy of home supervision shall be considered prior to allowing a juvenile to return home. It is also important that passes not interfere with the ongoing treatment and supervision needed by juveniles. Contract providers must provide parents or guardians with clearly written guidelines for approved passes, which must be signed by parents or guardians indicating their understanding and willingness to comply with those guidelines. The department's Off-Campus Pass form may be used for this purpose. If the department's form is not used, the form signed and agreed to by the individual assuming responsibility for supervising the pass must contain at least the following information:

(5-1-04)T

a. The juvenile's name and date of birth;

- (5-1-04)T
- **b.** The name, address and telephone number of the individual assuming responsibility;
- (5-1-04)T
- **c.** Authorized days, dates and times for the pass including the specific date and time of departure and of return; (5-1-04)T
- **d.** A complete listing of the anticipated locations and activities in which the juvenile is expected to be involved; (5-1-04)T
 - **e.** Specific plans for supervision and telephone checks to verify compliance with the pass conditions; (5-1-04)T
 - **f.** A complete listing of the activities required during the pass; (5-1-04)T
- g. Specific stipulations prohibiting the use of alcohol, tobacco, drugs and involvement in any illegal activity, prohibiting association with others who may be involved in, or may have been involved in, illegal behavior, participation in sexual relations of any kind, possession of any kind of firearm or weapon, and any violation of the terms of probation; and

 (5-1-04)T

- **h.** Specific stipulations about search and drug testing upon return and the possible consequences for violation of any of the terms of the pass agreement. (5-1-04)T
- **02. Eligibility**. A juvenile must be in placement a minimum of thirty (30) calendar days before he is eligible for any pass. Any exceptions due to extenuating circumstances must be approved by the juvenile services coordinator. (5-1-04)T
- **03. Frequency**. Frequency of passes shall be consistent with the terms of the juvenile's individual treatment plan and contract provider's contract with the department. (5-1-04)T
- **04. Documentation**. Documentation of the exact date and time of the juvenile's leaving the program for a pass and his return must be maintained along with complete information about the individual assuming physical custody and supervision during the pass. (5-1-04)T

273. GROUP ACTIVITIES OFF FACILITY GROUNDS.

An activity plan and itinerary covering activities to be engaged in, when and where the group is going, how they will travel, how long they will stay and why the activity is being planned must be submitted to the juvenile services coordinator at least five (5) business days prior to the activity. The activity plan submitted to the juvenile services coordinator must identify the specific risk elements associated with the planned activity and provide a plan for safety related to each of those risk elements. Routine, low risk activities within the local community adjacent to the facility do not require prior notice and are to be conducted at the discretion of and under the responsibility of the contract provider.

(5-1-04)T

Recreational Activities. A pass authorizing the participation of juveniles in outdoor recreational or work activities with an increased risk, such as overnight trips, water activities other than swimming, etc., must be signed by the juvenile services coordinator and juvenile probation officer prior to the activity. Any proposed activity that involves rafting, boating, rappelling, rock climbing, or higher risk activity must also have the prior approval, in writing, of the clinical services administrator. (5-1-04)T

02. Staff Requirements.

- (5-1-04)T
- **a.** A basic first aid kit and current Red Cross First Aid Manual will be taken with the group. At least one (1) person certified in first aid and CPR shall accompany the group. (5-1-04)T
- **b.** Swimming, boating, or rafting will only be allowed when a staff in attendance has certification in basic rescue and water safety, water safety instruction or Red Cross life saving. All juveniles involved in boating, or rafting activities must wear an approved personal flotation device. (5-1-04)T
- **c.** A staff to juvenile ratio of one (1) to six (6) will be adhered to as a minimum unless there is a reason to require more staff. The risk level of the activity as well as any physical disabilities, high client irresponsibility, mental deficiencies, or inclusion of groups of juveniles below age twelve (12) are some reasons to consider additional staff. (5-1-04)T
- **d.** All participants will be recorded in the activity plan and identified as program clients, staff, or volunteers. The individual staff or volunteer satisfying the above first aid and CPR requirements must be identified in the plan. (5-1-04)T
- **03. Consent Forms**. Recreational activities identified as presenting a higher risk require prior written approval in accordance with Subsection 273.01. Each juvenile must have prior written consent from a parent or guardian, if available, and the clinical services administrator. Consent shall include: (5-1-04)T
 - **a.** Permission for the juvenile's participation;

(5-1-04)T

b. Acknowledgement of planned activities; and

(5-1-04)T

c. Permission for the contract provider to seek or administer necessary medical attention in an

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emergency. (5-1-04)T

04. Consumption. There will be no consumption of alcoholic beverages or illicit drugs by staff or juveniles or volunteers while engaged in any agency-sponsored trip or activity. (5-1-04)T

274. ACTIVITY REPORTS.

At the conclusion of each pass or group activity the contract provider shall determine whether any problems occurred or other significant positive or negative events transpired while the juvenile was on pass. This information shall be documented in the juvenile's file. Any unusual occurrences shall be reported to the juvenile services coordinator and documented on an incident report. A drug screening urinalysis may be conducted on each returning juvenile, at the expense of the contract provider, and the results of that exam reported to the juvenile services coordinator. (5-1-04)T

275. OUT-OF-STATE TRAVEL.

When a contract provider is planning an out-of-state trip for any of its juveniles, the facility administrator shall obtain prior written authorization from the regional clinical supervisor or designee. The necessary sequence of action and approval is as follows:

(5-1-04)T

- **01. Notification.** The contract provider shall notify the juvenile services coordinator in writing two (2) weeks in advance of the scheduled trip, providing the dates of the scheduled trip, the location of the trip, purpose of the trip, transportation arrangements, where the juvenile will be staying if overnight accommodations are required (address and phone number), and who is going, such as juvenile and name and position of staff. (5-1-04)T
 - **O2. Prior Approval**. The administrator shall obtain all necessary approvals prior to authorizing travel. (5-1-04)T

276. PLANNING FOR REINTEGRATION.

- **01. Programs**. Programs must promote continuity in programming and services for juveniles after they leave the program by assuring that essential information is forwarded to agencies continuing to provide services to the juveniles and by working closely with department staff throughout placement to plan for reintegration. (5-1-04)T
- **02. Approval**. Reintegration, by release from department custody or transfer, shall not take place without the involvement of the department's assigned juvenile services coordinator and the approval in writing of the regional clinical supervisor and regional superintendent. (5-1-04)T
- **O3. Department Concurrence.** Preparation for reintegration of a juvenile begins with the initial development of an individual treatment plan and is an ongoing process throughout the juvenile's program. Criteria for the juvenile's release from department custody or transfer shall be explained to him as soon after admission to a program as possible. (5-1-04)T
- **04. Reintegration Plan**. Within the first thirty (30) calendar days after a juvenile is admitted to a program, a written reintegration plan shall be formulated as one (1) part of the overall individual treatment plan. The reintegration plan should include: (5-1-04)T
 - **a.** The juvenile's anticipated length of stay; (5-1-04)T
 - **b.** Specific program goals to be achieved while in the program; (5-1-04)T
 - **c.** Living arrangements upon release from department custody or transfer; (5-1-04)T
 - **d.** Resources necessary for the juvenile to continue to meet treatment goals in the community;

- **e.** Resources necessary for the juvenile to continue an appropriate education; and (5-1-04)T
- **f.** Terms of continued probation to the extent that they are known and addressed in progress reports. (5-1-04)T

- **05. Written Recommendation**. Contract providers shall provide to the juvenile services coordinator a written recommendation for release from department custody or transfer at least thirty (30) calendar days prior to the juvenile's anticipated completion of the program. This recommendation shall include: (5-1-04)T
 - **a.** A current summary of the juvenile's progress;

(5-1-04)T

b. A summary of the efforts to reach the juvenile's goals and objectives, including education;

(5-1-04)T

c. Any unresolved goals or objectives;

(5-1-04)T

d. Reinforcement goals and objectives for parents, guardians, or reintegration workers;

(5-1-04)T

e. Recommendation for continuing services, including education, in the home community; (5-1-04)T

f. The prognosis; and

(5-1-04)T

g. The current address of the recommended custodian.

(5-1-04)T

- **06. Reintegration Staffing**. The juvenile services coordinator shall convene a reintegration staffing which will include the juvenile's probation officer, the contract provider, the juvenile's parent or guardian, an education representative, and the juvenile. Based upon the results of that staffing, the department will make the final decision regarding transfer or release from department custody. At a minimum, the reintegration staffing must consider and, to the extent possible, solidify plans to address any ongoing health, mental health, substance abuse, social skills, education, vocation, and independent living, and other special needs. (5-1-04)T
- **O7. Check-Out Procedures**. Prior to the release from department custody or transfer, the contract provider must have completed a Contract Provider Juvenile Check-out Form supplied by the department. The form shall be dated, signed by the juvenile, and forwarded to the juvenile services coordinator on the actual date that the juvenile leaves the program. (5-1-04)T
- **a.** The contract provider shall immediately provide the juvenile's medication, prescriptions and Medicaid card, if applicable, to the individual or agency authorized to transport the juvenile. (5-1-04)T
- **b.** Within two (2) business days after a juvenile leaves the facility or program, the contract provider shall send any available dental or medical records to the privacy officer at the nearest department regional facility. All school records available from school(s) the juvenile attended while in the program shall be sent to the juvenile correctional center in Nampa. (5-1-04)T
- c. Within two (2) business days after a juvenile leaves the facility or program, the contract provider shall send a report showing the juvenile's total hours, credits and associated grades directly to the juvenile correctional center in Nampa. The contract provider shall maintain adequate documentation to support the submitted education reports. Timely receipt of these records is critical to assist the transition of the juvenile to another educational facility. (5-1-04)T

08. Termination Prior To Completion.

(5-1-04)T

- **a.** The contract provider may initiate the transfer of a juvenile from its program prior to the juvenile's completion. The contract provider can initiate transfer of a juvenile in the following circumstances: (5-1-04)T
 - i. A pattern of documented behavior clearly indicating a lack of progress; or

- ii. Commission of one (1) or more serious or violent incidents that jeopardize the safety and security of individuals or the program. (5-1-04)T
 - **b.** When a contract provider believes a juvenile is at risk for transfer prior to program completion, the

juvenile services coordinator must be notified as far in advance of the probable transfer as possible so that a staffing, involving the regional clinical supervisor and, if necessary, the clinical services administrator, may be held. The purpose of this staffing is to consider the circumstances which may require the transfer and to make every effort with the contract provider to address the concerns and avoid the necessity of making another placement. The contract provider must document these efforts at problem solving. The department will make a decision about transfer based upon the results of this staffing and any subsequent work agreed upon with the contract provider. (5-1-04)T

- c. A comprehensive summary shall include, at a minimum, a report on progress or lack of progress on all treatment plan areas, and recommendations for follow-up. The summary shall be forwarded to the juvenile services coordinator within twenty-four (24) hours of release from department custody or transfer prior to program completion.

 (5-1-04)T
- **d.** In cases of all releases from department custody and transfers, the contract provider shall send any available dental or medical records to the privacy officer at the nearest department regional facility. All school records available from school(s) the juvenile attended while in the program shall be sent to the juvenile correctional center in Nampa. (5-1-04)T
- **e.** The summary shall be forwarded to the department within five (5) business days of the date of transfer or release from department custody, if the juvenile has completed the program. (5-1-04)T

277. RESERVATION OF PROGRAM SLOTS.

When a program slot is to be reserved, the department shall contact the contract provider and request that the slot be reserved. Unless the clinical services administrator or designee gives specific approval, the maximum time for which a program slot may be reserved and the contract provider continue to receive payment is forty-eight (48) consecutive hours.

(5-1-04)T

278. GUIDELINES FOR SPECIFIC SERVICES.

01. Counseling Services.

(5-1-04)T

- **a.** All counseling services provided to juveniles, whether individual, group or family, must be performed by a clinician, counselor, or therapist as defined in these rules. (5-1-04)T
 - **b.** Counseling should be planned and goal directed.

- **c.** Notes must be written for each service provided. The notes must be dated, clearly labeled either individual, group or family counseling, and each entry must be signed by the clinician, counselor, or therapist performing the service. (5-1-04)T
- **d.** The methods and techniques applied in counseling and the frequency and intensity of the sessions should be determined by assessment. (5-1-04)T
- **e.** Counseling should be reality oriented and directed toward helping juveniles understand and solve specific problems, to discontinue inappropriate, damaging, destructive or dangerous behaviors, and to fulfill individual needs. (5-1-04)T
- **f.** The minimum standard for the frequency of counseling services shall be specified in the comprehensive program description attached to the contract with the department. (5-1-04)T
- **g.** There should be a mechanism developed to monitor and record incremental progress toward the desired outcome of counseling services. (5-1-04)T
- **h.** Programs should be able to demonstrate that counseling interventions are shared in general with other program service providers and that there is broad mutual support for the goals of counseling in all service areas of the program. (5-1-04)T
 - i. Programs must provide for crisis intervention counseling if the assessment indicates this need and

as circumstances for each juvenile warrant during the course of treatment.

- **j.** The contract provider must furnish adequate space for conducting private interviews and counseling sessions at the facility. (5-1-04)T
- **k.** Family counseling services must be available as a part of the juvenile's individual treatment plan, to the extent that this is supported by the assessment. If the assessment indicates a need for these services, family counseling should specifically address issues that directly or indirectly resulted in the juvenile's removal from his home and the issue of his eventual reintegration back into the family unit. A statement of goals to be achieved or worked toward by the juvenile and his family should be part of the individual treatment plan. (5-1-04)T
- **O2. Substance Abuse Treatment Services.** As a minimum standard, programs must provide substance abuse education for all juveniles and substance abuse treatment services as determined by assessment and indicated in the individual treatment plan. Substance abuse treatment services must have direct oversight by a certified alcohol and drug counselor, or master's level clinician with three (3) years experience in the substance abuse field. Juveniles receiving substance abuse treatment services shall have access to in-house or community Alcoholics Anonymous and Narcotics Anonymous meetings, or an orientation to the twelve-step program at the appropriate point in his treatment or an introduction to a community intervention program if a twelve-step program is not appropriate for him. Notes documenting the service provided must be dated, clearly labeled "substance abuse treatment services", and each entry must be signed by the counselor performing the service. (5-1-04)T
- **03. Suicide Prevention And Risk Management**. In addition to the policy required in Paragraph 261.01.e., contract providers must be able to demonstrate that they: (5-1-04)T
- **a.** Train staff regularly to identify, document and appropriately respond to behavior that may indicate a risk of suicide; (5-1-04)T
- **b.** Utilize medical or other staff trained by a mental health professional to review history, interview and observe juveniles new to the program in order to complete suicide risk screening within two (2) hours of admission; (5-1-04)T
- **c.** Utilize a mental health professional to complete a suicide risk assessment on a juvenile who has been identified by staff as presenting a risk of suicide; (5-1-04)T
- **d.** Utilize mental health professionals to help develop a safety plan for each juvenile identified as presenting a risk for suicide, and to determine when that risk is reduced enough to reduce or terminate suicide precautions; and (5-1-04)T
- **e.** Prohibit the use of separation and isolation of juveniles identified as presenting a suicide risk, unless constant one-on-one staff supervision is provided and that all juveniles in separation or isolation are closely monitored to reduce the risk of suicidal behaviors. (5-1-04)T
- **04. Social Skills Training Including Relapse Prevention Skills.** Programs must assess each juvenile's social skills and document specific services provided to improve functioning in this area. Additionally, every juvenile must have developed a written relapse prevention plan prior to successfully completing the program.
 (5-1-04)T
- **05. Health Services**. Programs must be able to demonstrate compliance with the required policy concerning access to routine and emergency health and mental health care and, in addition, should provide a basic health curriculum for all juveniles. Contract providers must provide and document a health and suicide risk screening of each juvenile within two (2) hours of admission into the program. (5-1-04)T
- **06. Vocational And Prevocational Services.** Programs must be able to demonstrate that each juvenile's vocational interests and needs have been assessed and an appropriate level of services has been provided. These services may range from a specific vocational skills curriculum, offered on site or in the community, to a prevocational skills component which at a minimum involves juveniles in assessing their vocational interests and strengths. (5-1-04)T

07. Basic Life Skills And Independent Living. Programs must be able to demonstrate that juveniles are taught basic life skills and that age-appropriate juveniles are involved in independent living skills consistent with their age and needs. This program should include, at a minimum, instruction in: (5-1-04)T

a.	Hygiene and grooming skills;	(5-1-04)T
b.	Laundry and maintenance of clothing;	(5-1-04)T
c.	Appropriate social skills;	(5-1-04)T
d.	Housekeeping;	(5-1-04)T
e.	Use of recreation and leisure time;	(5-1-04)T
f.	Use of community resources;	(5-1-04)T
g.	Money management;	(5-1-04)T
h.	Use of public transportation, where available;	(5-1-04)T
i.	Budgeting and shopping;	(5-1-04)T
j.	Cooking;	(5-1-04)T
k.	Punctuality, attendance and other employment-related matters; and	(5-1-04)T
l.	Vocational planning and job finding skills.	(5-1-04)T

- **08. Recreation Services.** Programs should have a written plan for providing recreational services based on individual needs, interests, and functional levels of the population served. (5-1-04)T
- a. The recreational program should include indoor and outdoor activities. Activities should minimize television and make use of a full array of table games and other activities that encourage both solitary entertainment and small group interaction. An appropriately furnished area should be designated inside the facility for leisure activities.

 (5-1-04)T
- **b.** Programs should have staff educated and experienced in recreational programs to ensure good planning, organizing, supervision, and use of facility and community activities. Recreational activities considered part of the treatment plan must be funded by the contract provider. The use of community recreational resources should be maximized, as long as community safety is assured. The contract provider must arrange for the transportation and must provide the supervision required for any usage of community recreational resources. No juvenile shall be required to pay to participate in recreational activities made available through the program.

(5-1-04)T

279. EMPLOYMENT OF JUVENILES.

O1. Employment. If juvenile employment away from the program site is a part of the program, written policy and procedure must provide that program resources and staff time are devoted to helping employable juveniles locate employment. Programs must ensure that each employment opportunity meets all legal and regulatory requirements for juvenile employment. The contract provider shall make periodic checks on the job-site to ensure the juvenile is working under acceptable conditions. The juvenile's employer shall be consulted regularly by the contract provider concerning the juvenile's work abilities and performance on the job-site. Under no circumstances should staff or the families of staff benefit financially or otherwise from work done by juveniles in the program. Contract providers must make every reasonable effort to assure that each juvenile's transportation to and from a job-site is safe.

O2. Employment Opportunities. Every reasonable effort shall be made to select employment opportunities that are consistent with the individual interests of the juvenile to be employed. Preference will be given to jobs that are related to prior training, work experience, or institutional training and that may be suitable for continuing post-release employment. Reasonable effort must be made to provide juveniles with the highest paying job possible. Income earned by a juvenile shall be handled consistent with Subsection 212.04, of these rules.

(5-1-04)T

280. RELIGIOUS SERVICES.

Programs must ensure that attendance at religious services is voluntary. No juvenile shall be required to attend religious services and no juvenile shall be penalized for not attending nor given privileges for certain attendance.

(5-1-04)T

- **01. Voluntary Practice**. All juveniles must be provided the opportunity to voluntarily practice their respective religions in a manner and to the extent that will not compromise the safety, security, emotional or physical well-being of the juveniles in the facility. (5-1-04)T
- **02. Attendance**. Juveniles may be permitted to attend religious services of their choice in the community as long as community safety is ensured. (5-1-04)T
- **03. Transportation**. Programs must, when reasonably possible, arrange transportation for those juveniles who desire to take part in religious activities of their choice in the community. (5-1-04)T
- **04. Risk To Community.** If the juvenile cannot attend religious services in the community because staff has reason to believe he would attempt to escape, or otherwise present a risk to the safety of the community, the contract provider must make every reasonable effort to ensure that he has the opportunity to participate in religious services of his choice at the facility. (5-1-04)T
 - **Visits**. Juveniles shall be permitted to receive visits from representatives of their respective faiths. (5-1-04)T
- **Minor Juveniles.** When the juvenile is a minor, the contract provider shall make reasonable effort to comply with the wishes of the legally responsible person with regard to religious observances. A program's staff schedule shall not encourage or discourage participation in general or specific religious service or activity. (5-1-04)T

281. -- 299. (RESERVED).

300. EDUCATION SERVICES.

- **O1.** Appropriate Services. The contract provider shall ensure that each juvenile is given appropriate educational and vocational services that are consistent with the juvenile's abilities and needs, taking into consideration age, level of functioning, and any educational requirements specified by state or federal law. Contract providers must assure that educational services provided as a part of an overall program play an integral part in the process of reclaiming juvenile offenders to responsible roles in society. Educational services must strive to facilitate positive behavior change by helping juveniles to develop abilities in academic, workplace, and technological areas; to restructure harmful or limiting cognitive patterns; and, to adopt appropriate social interactions skills. Educational services provided by contract providers must use whatever combination of approaches and motivations that will best facilitate the learning process in conjunction with the individual treatment plan. All educational services provided must meet all mandates of the No Child Left Behind Act (NCLB), the Individuals with Disabilities Education Act (IDEA), the Family Educational Rights and Privacy Act (FERPA), and Section 504 Rehabilitation Act of 1973 (504).
- **Mandatory Enrollment**. Contract providers must ensure that all juveniles involved in their programs who are of mandatory school age, or who have not yet obtained a GED or high school diploma, are enrolled in a school system or in a program approved and certified by the Idaho Department of Education to provide both special education and other services. For those who have obtained a GED, or high school diploma, an appropriate educational and vocational service shall be provided in accordance with the individual treatment plans. (5-1-04)T

- **03. Cooperative Relationships**. Contract providers may provide educational services through a cooperative agreement with the local education agency (LEA) or through an in-house educational program administered by the contract provider. If an LEA provides the services, it is expected that the contract provider will enter into a written agreement with a local education agency that clearly defines the services to be provided. The written agreement must include, at a minimum, all of the following: (5-1-04)T
 - **a.** Level of participation in reintegration planning for each juvenile;

(5-1-04)T

- **b.** That grades will be submitted, as required in Subsection 300.09, within twenty-four (24) hours of transfer or release from department custody; (5-1-04)T
 - **c.** Curriculum for special education services, if appropriate;

(5-1-04)T

d. A plan for the provision of state required testing; and

- **e.** Types of services that will be provided beyond the established limits of the regular school year for that school district. (5-1-04)T
- **O4. Costs Of Educational Services.** If an LEA agreement is developed, the Idaho Department of Education will flow education funds to the LEA in a manner consistent with current legislative funding mandates. A copy of the memorandum of understanding between the contract provider and the LEA must be provided to the department, and the source of funds to cover the costs for educational services clearly accounted for in the budget attached to the program description. If the contract provider elects to provide the services in-house, the cost of educational services will be included in the daily contract rate. The contract provider will not be eligible to receive educational funding through both of these sources.
- **05. Accreditation Requirements**. Each contract provider serving juveniles who have been committed to the department will have or contract with an education program that will meet the accreditation standards of the Northwest Association of Schools and of Colleges and Universities or the Idaho Department of Education. (5-1-04)T
- **O6. Educational Assessment**. Federal and state laws mandate that juveniles be provided with an appropriate education. Contract providers are responsible for providing an educational track which will best serve the needs of each juvenile, as determined by the assessment provided by the department through the observation and assessment process, or as determined by an assessment completed by a local school district. A copy of the relevant assessment and related current and valid educational plan, as well as all supporting documentation for each juvenile, must be maintained in a separate file and must be available to the department and to the Idaho Department of Education. A copy of the IEP and all supporting documentation must be sent to the department's education records manager within ten (10) business days or less of its completion for inclusion in the student's permanent school records that are maintained at the juvenile correctional center in Nampa. (5-1-04)T
- **a.** Contract providers are responsible for ongoing, yearly reassessment of each juvenile's progress within the education program as well as documenting and reporting that progress. This responsibility extends to completing a reassessment just prior to release from department custody or transfer, and reporting academic gain both for individual juveniles as well as composite data for the education program overall. (5-1-04)T
- **b.** Consistent with statewide educational standards, contract providers are responsible for assuring that each juvenile is tested twice annually using the Idaho Standards Achievement Test (ISAT). Contract providers must also administer the Direct Math and Writing Assessments or other tests mandated by the administrative rules of the Idaho Board of Education. Any fees associated with the testing services will be the responsibility of the contract provider. (5-1-04)T
- **67. GED And HSE Eligibility.** Contract providers must assure that General Educational Development tests (GED) will be administered to students meeting the criteria established in the administrative rules of the Idaho Board of Education for school districts. Contract providers must assist students who successfully complete GED testing with a minimum standard average score of four hundred fifty (450) and earn a credit in United States Government to apply for an Idaho High School Equivalency Certificate (HSE) from the Idaho Department of Education. All GED testing and HSE application fees will be paid by the contract provider. (5-1-04)T

08. Special Education Services.

(5-1-04)T

- a. The contract provider shall ensure that the special educational needs of juveniles are addressed. The contract provider's in-house program or cooperating LEA program must comply with the federal 504 and the IDEA, as well as any other applicable state or federal laws. Under no circumstances shall the contract provider or its teaching staff make modifications in the juvenile's 504 or IDEA educational program without conducting a Child Study Team meeting in consultation with the department's educational coordinator or designee. (5-1-04)T
- **b.** Contract providers must make every reasonable effort and thoroughly document all efforts to contact parents or guardians of juveniles identified as eligible for special education. If it is not possible to involve the natural parents or guardians, a surrogate parent must be appointed by the agency providing special educational services. This surrogate cannot be the director or other employee of an agency, an institution, or community-based residential facility who is involved in providing care or education to a juvenile or an employee of a state agency or agency volunteer, such as caseworker, social worker, or court-appointed special advocate, who has been appointed by the state to provide for the welfare of the student. A surrogate parent is used only for special educational requirements and has no other legal authority. (5-1-04)T
- **O9. Standards For Instructional Time.** Contract providers must assure that the school day is consistent with at least the minimum standard established for high schools by the Northwest Association of Schools and of Colleges and Universities. The length of the school day will further meet all requirements established by state and federal laws, regulations, and accreditation standards. Contract providers must provide an appropriate educational or vocational program for each juvenile for twelve (12) months of the year. At a minimum, this involves four (4) hours per day, five (5) days per week throughout the full calendar year. Juveniles involved in any disciplinary process shall not be denied their right to education and other related services. If security or other related concerns are present that may prohibit a juvenile's participation in educational programming, an educational plan review will be completed and documented in an incident report. If the juvenile is eligible for services under IDEA or 504, a Child Study Team will meet to make a determination as to whether or not the behavior is a result of the juvenile's handicap. All due process procedures will be followed according to the administrative rules for Special Education. (5-1-04)T

10. Educational Records And Confidentiality.

(5-1-04)T

a. Educational records shall be maintained by the contract provider at all times in accordance with FERPA. At a minimum, the following information shall be included in the record: (5-1-04)T

	0.11	(F 1 0 1) FD
1	Subjects taken:	(5-1-04)T
1.	Bublects taken,	(5 1 0 7) 1

ii. Grades by subject and explanation of the grading system; (5-1-04)T

iii. Units of credit with explanation; (5-1-04)T

iv. Attendance records; and (5-1-04)T

v. Any standardized test scores. (5-1-04)T

- **b.** Reports of the juvenile's educational progress shall be provided in the manner and within the time periods specified in these rules. At a minimum, this requires the documentation of monthly progress notes and a written progress report every second month. (5-1-04)T
- **c.** Contract providers must ensure that juvenile educational files are consistently maintained to ensure compliance with FERPA. (5-1-04)T
- **d.** When a juvenile is released from department custody or transferred, the permanent education file shall be updated by the department's education records technician. The contract provider will provide final withdrawal grades and credits within twenty-four (24) hours or next working day after the juvenile is released from department custody or transferred. Working educational files shall be returned to the juvenile correctional center in Nampa within ten (10) business days of the juvenile's release from department custody or transfer. (5-1-04)T

301. -- 319. (RESERVED).

320. PRIVACY OF MEDICAL RECORDS AND INFORMATION.

Confidentiality of personal health information of each juvenile shall be maintained in accordance with the Privacy Regulations promulgated under HIPAA of 1996, or, if more stringent, the laws of the state of Idaho. Compliance with these regulations is the responsibility of the contract provider. Staff shall be provided information about a juvenile's medical condition only when that knowledge is necessary for the performance of their job duties. (5-1-04)T

- **01. Privacy Officer**. The contract provider shall appoint a privacy officer to oversee that the control and maintenance of all juvenile health and medical records is in compliance with the federal Privacy Regulations, 45 Code of Federal Regulations Sections 160 and 164. (5-1-04)T
- **O2. Separate Records**. All juvenile medical and health records shall be kept in files that are physically separated from other juvenile files and information, and under a system of security against unauthorized access.

(5-1-04)T

321. PROVISION OF MEDICAL SERVICES.

- **01. Medical Care.** Each juvenile shall be provided with medical, dental, optical, mental health, emergency or any other related health services while in the contract provider's care. Each contract provider shall have access, on a twenty-four (24) hour basis, to a licensed general hospital, clinic or physician, psychiatrist, and dentist to provide juveniles with professional and qualified physical or mental health services, including medications. Health, mental health, and suicide risk screening must be provided within two (2) hours of a juvenile's admission to a program. Comprehensive and professional health and mental health assessments must be provided by the contract provider within thirty (30) calendar days of admission, unless these are provided by the department. (5-1-04)T
- **02. Medical Consent**. As part of the admission process, the contract provider must have a copy of the department's Release of Information and Consent form signed by a juvenile's parent, guardian, or committing authority. The consent form shall be filed in the juvenile's medical and case files maintained by the contract provider.

 (5-1-04)T
- **O3. Emergency Medical Treatment**. In cases of emergency medical treatment requiring signed authorization for juveniles in the custody of the department, reasonable efforts must be made to obtain the consent of the parent or guardian. The signature of only one (1) parent or guardian is sufficient to form consent or authorization. Should the parent or guardian not be available or refuses to sign, the authorization may be signed by the department's regional R.N. or designee. This does not restrict the contract provider from taking action in life and death situations.

 (5-1-04)T
- **Q4. Reimbursement Sources**. The contract provider shall utilize private insurance or Medicaid, if available, for funding medical, dental, optical, mental health, or related services, and pharmaceutical products for any juvenile. The contract provider shall not seek reimbursement from private insurance or Medicaid for health services that are the fiscal responsibility of the contract provider pursuant to its contract with the department. Any health services not listed in these rules, other than emergency treatment, which was not approved in advance by the department's regional R.N. or designee, will be at the expense of the contract provider. (5-1-04)T

322. ADMISSION AND ANNUAL HEALTH SERVICES AND TREATMENT RECORDS.

- **01. Compliance With Child Care Licensing Rules**. Admission and annual health services shall be provided to juveniles in accordance with the child care licensing rules of the Idaho Department of Health and Welfare, unless otherwise provided in these rules. (5-1-04)T
- **02. Prior Approval**. No prior approval or review from the department's regional R.N. is required for admission and annual health services. Examples of admission and annual health services for which no prior approval or review is required are: (5-1-04)T
 - a. Admission physical exams, including STD exams and treatment, as well as PAP smears; (5-1-04)T

h	Admission	dental evam	e including	v_rave (no	Panorey)	and cleanings (no sealants).	$(5_{-}1_{-}0.4)T$

c. Admission eye exams and glasses, if needed; (5-1-04)T

d. Annual physical exams, including STD exams and treatment, PAP smears; (5-1-04)T

e. Annual dental exams with x-rays (no Panorex), and cleaning; and (5-1-04)T

f. Annual eye exams, if needed, and new glasses only if needed. (5-1-04)T

03. Medical Records. Any time a juvenile receives treatment under Section 322 or for any similar service, the contract provider shall retain the original medical record regarding treatment and send a copy to the department's regional R.N. immediately to ensure that accurate and current health records are maintained for each juvenile. (5-1-04)T

323. Notification Of Critical Health Incidents.

The contract provider shall immediately report critical incidents according to Subsection 262.02, of these rules. (5-1-04)T

324. COMMUNICABLE DISEASES.

01. Policies. (5-1-04)T

- a. The contract provider shall establish policies and procedures for serving juveniles with infectious diseases such as tuberculosis, hepatitis, and HIV or AIDS. These policies and procedures should address the management of communicable diseases and provide an orientation for new staff and juveniles concerning the diseases and ongoing education for staff and juveniles regarding these diseases. Policies and procedures should be updated as new information becomes available. Individual health information or counseling will be made available for juveniles diagnosed with a communicable disease by a qualified health professional. (5-1-04)T
- **b.** The contract provider shall comply with the child care licensing rules of the Idaho Department of Health and Welfare regarding universal precautions. (5-1-04)T
- **O2. HIV Testing.** In accordance with law, a juvenile over age fourteen (14) may request that he be tested for the presence of HIV. Any such juvenile requesting to be tested should be taken to a public health facility or, if available, a facility which accepts Medicaid reimbursement for administration of the test. (5-1-04)T
- **O3. Examinations**. Examinations shall be performed on any juvenile by medical professionals for all symptomatic cases of communicable diseases such as tuberculosis, ova and parasites, infectious hepatitis, and sexually transmitted diseases. Juveniles will be tested and, if indicated, treated. (5-1-04)T
 - **04. Confidentiality**. Confidentiality shall be maintained.

(5-1-04)T

325. PREGNANCY.

- **01. Individual Treatment Plan.** Within the individual treatment plan, specific goals and objectives will be developed when a pregnancy has been diagnosed. The plan shall be based on the orders of the juvenile's community obstetric physician and shall include special care, location for delivery, regular medical check-ups, and special dietary and recreational needs. A copy of the individual treatment plan will be sent to the department's regional R.N. (5-1-04)T
- **O2. Parenting Classes.** Parenting classes shall be an integral part of the individual treatment plan for all pregnant juvenile females. This service should also be offered as a priority to juvenile males in care who are already fathers or whose spouse or girlfriend is expecting a child. (5-1-04)T
 - **O3.** Medicaid Reimbursement. Medical services relating to pregnancy shall be provided by a

physician and hospital accepting Medicaid reimbursement, unless medical expenses are paid by the juvenile's family.

(5-1-04)T

04. Infant Care. When an infant is delivered and the mother continues in department custody, the infant shall be placed with an appropriate family member or in the temporary care of the Family and Children Services Division of the Idaho Department of Health and Welfare, subject to any necessary court approval. At no time shall the infant remain in the contract provider's facility. (5-1-04)T

326. REFUSAL OF TREATMENT.

- **01. Refusal Of Recommended Treatment By Physician**. If a juvenile chooses to refuse treatment or medication recommended by a physician, the juvenile must sign a detailed statement refusing this care. A contract provider staff member must witness the juvenile's signature. This refusal form will be filed in the juvenile's medical record.

 (5-1-04)T
- **02. Where Refusal Poses Significant Risk**. If a juvenile refuses a treatment or medication for a condition which poses a significant risk of death or permanent physical impairment, the contract provider shall issue its approval for the immediate administration of the medical treatment or medication in accordance with standard practice. If danger to the juvenile is not imminent, the contract provider shall contact the clinical services administrator and notify the department's regional R.N. of the juvenile's refusal. (5-1-04)T

327. USE OF MEDICATIONS.

A program shall have written policies and procedures governing the use and administration of medication to juveniles. Policies shall conform to all applicable laws and regulations including, but not limited to, those of the Idaho Department of Health and Welfare. If initiating or modifying any medication, the department's regional R.N. must be notified.

(5-1-04)T

- **01. Psychotropic Medication.** When psychotropic medication has been prescribed to a juvenile by a licensed physician, nurse practitioner, or physician's assistant, the contract provider shall notify the department's regional R.N., the juvenile's parent or guardian, the juvenile services coordinator, and the juvenile probation officer within three (3) business days. The notice shall include: (5-1-04)T
 - **a.** The name of the prescribed medication; and

(5-1-04)T

- **b.** The name and phone number of the doctor, nurse practitioner, or physician's assistant, who can explain the reason the medication was prescribed and any possible side effects. (5-1-04)T
- **02. Reason For Administering Medication**. The contract provider shall have staff available to explain to a parent or guardian, the juvenile services coordinator, and the department's regional R.N., the reason for making a referral to a physician who has prescribed psychotropic medication. The contract provider shall assure that any physician prescribing psychotropic medication is willing to discuss with a parent or guardian and department staff the reason the psychotropic medication was prescribed and the potential side effects of the medication.

(5-1-04)T

328. SUICIDE PRECAUTIONS.

All contract providers must have a written plan for responding to juveniles who present a risk of suicide. The procedure shall, at a minimum, include a process for determination or assessment of suicidal behavior and risk, a procedure for contacting appropriate health authorities and the department, and a plan of direct supervision of a juvenile until a suicide crisis has ended. A suicide risk screening must be completed on every juvenile within two (2) hours of admission.

(5-1-04)T

329. FIRST AID KITS.

Each contract provider shall maintain first aid kits in the manner required by the child care licensing rules of the Idaho Department of Health and Welfare. The first aid kits shall be kept locked and shall be placed in areas of the facility readily accessible to staff.

(5-1-04)T

330. -- 999. (RESERVED).

IDAPA 07 - DIVISION OF BUILDING SAFETY

07.01.06 - RULES GOVERNING THE USE OF NATIONAL ELECTRICAL CODE DOCKET NO. 07-0106-0401

NOTICE OF RULEMAKING - TEMPORARY RULE

EFFECTIVE DATE: The effective date of the temporary rule is November 6, 2003.

AUTHORITY: In compliance with Sections 67-5226, Idaho Code, notice is hereby given that this agency has adopted a temporary rule. The action is authorized pursuant to Section 54-1006, Idaho Code.

DESCRIPTIVE SUMMARY: The following is the required finding and concise statement of the supporting reasons for adopting the temporary rule:

The temporary rulemaking incorporates a new subsection into IDAPA 07.01.06.011.01, the rule providing exemptions to the 2002 National Electrical Code for disconnects on light poles. The electrical board believes the current practice of mounting an electrical service disconnect switch onto a luminaire pole poses a safety hazard by leaving the disconnect exposed to vandalism and damage by lawn mowers. Fuse holders mounted within the poles would be more suitable for the prevailing conditions.

TEMPORARY RULE JUSTIFICATION: Pursuant to Section 67-5226(1)(a), Idaho Code, the Governor has found that temporary adoption of the rule is appropriate for the following reasons:

Adoption of the temporary rule is necessary to protect the public's health, safety and welfare.

ASSISTANCE ON TECHNICAL QUESTIONS: For assistance on technical questions concerning the temporary rule, contact Gary Malmen, Electrical Bureau Chief, at (208) 332-7147.

DATED this 7th day of January, 2004.

Dave Munroe Administrator Division of Building Safety 1090 E. Watertower St. Meridian, Idaho 83642 (208) 332-7100 (208) 855-2164

THE FOLLOWING IS THE TEXT OF DOCKET NO. 07-0106-0401

011. NATIONAL ELECTRICAL CODE, 2002 EDITION.

- **01. Documents.** Under the provisions of Section 54-1001, Idaho Code, the National Electrical Code, 2002 Edition, is hereby adopted for the state of Idaho and shall be in full force and effect on and after July 1, 2002, with the exception of Article 80 and the following: (5-3-03)
- **a.** Compliance with Article 675.8(B) will include the additional requirement that a disconnecting means always be provided at the point of service from the utility no matter where the disconnecting means for the machine is located. (5-3-03)

- **b.** Compliance with Article 550.32(B) shall limit installation of a service on a manufactured home to those homes manufactured after January 1, 1992. (5-3-03)
 - **c.** Compliance with Article 210.12(B) shall not apply to the fire/smoke alarm branch circuit outlet. (5-3-03)
- d. A pole that is no more than forty (40) feet in nominal height that supports no more than four (4) luminaires that are operating at a nominal voltage of three hundred (300) volts or less, shall not be considered to constitute a structure as that term is defined by the National Electrical Code (NEC) and no disconnecting means shall be required. Overcurrent protection for wiring within the pole and luminaires mounted to the pole shall be provided by Bussman KTK fast-acting (200KAIC) or equivalent mounted in separable (break-a-way) fuse holders equivalent to the Bussman HEB series with a six hundred (600) volt rating. (Note: for two hundred, eight (208) or two hundred, forty (240) volt installations, the fuse holders require Bussman HEY Series, double-pole or equivalent.) The fuse holder shall be located within the pole itself, and accessible from the hand hole. Any poles supporting or incorporating utilization equipment other than luminaires, and other poles supporting luminaires shall be considered structures, and an appropriate service disconnecting means shall be required (per the NEC). All luminaire-supporting poles shall be appropriately grounded (and bonded per the NEC). All poles supporting luminaires, shall indicate by a permanent warning label to read: Wiring to pole is un-fused, service entrance conductors enclosed within.(11-6-03)T
- **O2. Availability**. This document is available at the office of the Division of Building Safety, Electrical Bureau 1090 E. Watertower St., Meridian, Idaho. (5-3-03)

IDAPA 08 - IDAHO STATE BOARD OF EDUCATION

08.02.02 - RULES GOVERNING UNIFORMITY DOCKET NO. 08-0202-0401

NOTICE OF RULEMAKING - TEMPORARY RULE

EFFECTIVE DATE: The effective date of the temporary rule is November 5, 2003.

AUTHORITY: In compliance with Section 67-5226, Idaho Code, notice is hereby given that this agency has adopted a temporary rule. The action is authorized pursuant to Article IX, Section 2 of the Idaho Constitution and under 33-107, 33-116, 33-1612, Title 33, Chapter 12, Idaho Code.

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking: A section is being added that creates a consistent alternative route to teacher certification for individuals who have already completed college degrees.

TEMPORARY RULE JUSTIFICATION: Pursuant to Section(s) 67-5226(1)(b), Idaho Code, the Governor has found that the temporary adoption of the rule is appropriate for the following reason:

It is necessary to ensure state compliance with the federal No Child Left Behind Act.

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 associated with this rule change.

ASSISTANCE ON TECHNICAL QUESTIONS: For assistance on technical questions concerning this temporary rule, contact Karen Gustafson at 334-2270.

DATED this 4th day of November, 2003.

Karen Gustafson State Board of Education 650 W. State St. PO Box 83720. Boise, ID 83720-0037 Phone: 208-334-2270

1 Holle. 200 334 2270

THE FOLLOWING IS THE TEXT OF DOCKET NO. 08-0202-0401

041. -- 0494. (RESERVED).

045. ALTERNATIVE ROUTE PREPARATION PROGRAM - ON-LINE PREPARATION.

- Meet With Academic Advisor. The candidate must meet with an academic advisor or complete an assessment to determine the preparation needed to meet the Idaho Standards for Initial Certification of Professional School Personnel.
 (11-5-03)T
- <u>O2.</u> <u>Complete Preparation Materials.</u> The candidate must complete identified on-line or in-class preparation materials. (11-5-03)T
- <u>03.</u> <u>Qualifying Score</u>. Prior to entering the classroom the candidate shall meet or exceed the qualifying score on a test of content knowledge and pedagogy as approved by the State Board of Education. (11-5-03)T

IDAPA 15 - OFFICE OF THE GOVERNOR DIVISION OF HUMAN RESOURCES AND PERSONNEL COMMISSION

15.04.01 - RULES OF THE DIVISION OF HUMAN RESOURCES AND PERSONNEL COMMISSION DOCKET NO. 15-0401-0301

NOTICE OF CORRECTION TO PENDING RULE

CORRECTION: This notice corrects a transcription error that occurred during the publication of the pending rule. The pending rule was published in the January 7, 2004 Administrative Bulletin, Volume No. 04-1 on pages 43 through 59. This correction is being done in conjunction with the Office of the Administrative Rules Coordinator.

EFFECTIVE DATE: This rule is now pending review by the 2004 Idaho State Legislature for final adoption. The pending rule becomes final and effective upon adjournment of the legislative, unless the rule is approved, rejected, amended or modified by concurrent resolution in accordance with Section 67-5224 and 67-5291, Idaho Code. If the pending rule is approved, amended or modified by concurrent resolution, the rule becomes final and effective upon adoption of the concurrent resolution or upon the date specified in the concurrent resolution.

AUTHORITY: In compliance with Section 67-5228, Idaho Code, notice is hereby given that the Office of the Administrative Rules Coordinator is correcting a transcription error made to the pending rule. The action is authorized pursuant to Sections 67-5203 and 67-5228, Idaho Code.

DESCRIPTIVE SUMMARY: The following is a concise explanatory statement of the nature of the correction being made to the pending rule.

In Section 010 - Definitions, Subsection 010.08 defines "Original or Initial Appointment". In the amended definition the words "full-time position" were inadvertently added. This language was not part of the proposed rule and was not included as part of the amended pending rule. This language is being removed through this correction notice.

The text of the proposed rule published in the October 1, 2003 Administrative Bulletin, Volume 03-10 on pages 177 through 222. The pending rule published in the January 7, 2004 Administrative Bulletin, Volume 04-1 on pages 43 through 59.

ASSISTANCE ON TECHNICAL QUESTIONS: For assistance on technical questions concerning the pending rule, contact Dennis Stevenson, Administrative Rules Coordinator, at 332-1820.

DATED this 7th day of January, 2004.

Dennis R. Stevenson Administrative Rules Coordinator Office of the Administrative Rules Coordinator Department of Administration 650 West State Street P.O. Box 83720 Boise, ID 83720-0306 (208)332-1820 (208)332-1896 (fax)

IDAPA 16 - DEPARTMENT OF HEALTH AND WELFARE

16.03.04 - RULES GOVERNING THE FOOD STAMP PROGRAM IN IDAHO DOCKET NO. 16-0304-0401

NOTICE OF RULEMAKING - TEMPORARY RULE

EFFECTIVE DATES: The effective dates of the temporary rule are October 1, 2003, and November 1, 2003.

AUTHORITY: In compliance with Section 67-5226, Idaho Code, notice is hereby given this agency has adopted a temporary rule. The action is authorized pursuant to Sections 39-106(1)(a), 56-202, 56-203, and 56-1004, Idaho Code.

DESCRIPTIVE SUMMARY: The following is the required finding and concise statement of the supporting reasons for the temporary rulemaking:

This temporary rulemaking makes changes to the Food Stamps program rules in order to:

- 1) Implement options present in the Farm Security and Rural Investment Act of 2002 (reauthorizing the Food Stamp Program) that allow the state to simplify household reporting requirements thereby reducing staff workload and improve accuracy of Food Stamp casework. It also allows three (3) types of utility standard deductions and a homeless shelter deduction;
- 2) Make certification periods be based on a household's circumstances and the reporting group to which it is assigned at application or recertification in accordance with options present in the Farm Security and Rural Investment Act of 2002;
- 3) Eliminate the need for annual amendment due to cost-of-living and other similar annual changes required by law; and
 - 4) Clarify program requirements.

TEMPORARY RULE JUSTIFICATION: Pursuant to Section 67-5226(l)(b) and (c), Idaho Code, the Governor has found that temporary adoption of the rule is appropriate in order to comply with deadlines in amendments to governing law or federal programs and to confer a benefit.

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the temporary rule, contact Phil Gordon at (208) 334-5818.

DATED this 5th day of January, 2004.

Sherri Kovach, Program Supervisor DHW – Administrative Procedures Section 450 West State Street, 10th Floor P.O. Box 83720 Boise, Idaho 83720-0036 (208) 334-5564 phone (208) 332-7347 fax kovachs@idhw.state.id.us e-mail

THE FOLLOWING IS THE TEXT OF DOCKET NO. 16-0304-0401

002. **DEFINITIONS.**

For the Food Stamp Program, the following definitions apply:

(6-1-94)

- **01. Administrative Error Claim.** A claim resulting from an overissuance caused by the Department's action or failure to act. (6-1-94)
 - **02. Applicant**. A person applying for Food Stamps.

(6-1-94)

- **03. Application For Participation**. The application form filed by the head of the household or authorized representative. (6-1-94)
- **O4.** Authorized Representative. A person designated by the household to act on behalf of the household to apply for or get and use Food Stamps. Authorized representatives include private nonprofit organizations or institutions conducting a drug addiction or alcoholic treatment and rehabilitation center acting for center residents. Authorized representatives include group living arrangement centers acting for center residents. Authorized representatives include battered women's and children's shelters acting for the shelters' residents. Homeless meal providers may not be authorized representatives for homeless Food Stamp recipients. (6-1-94)
- **05. Battered Women And Children's Shelter**. A shelter for battered women and children which is a public or private nonprofit residential facility. If the facility serves others, a portion of the facility must be set aside on a long-term basis to serve only battered women and children. (6-1-94)
- **06. Boarder**. Any person or group to whom a household, other than a commercial boarding house, furnishes meals and lodging in exchange for an amount equal to or greater than the thrifty food plan. Children, parents and spouses in a household must not be treated as boarders. (6-1-94)
- **07. Boarding House**. A licensed commercial enterprise offering meals and lodging for payment to make a profit. (6-1-94)
- **08.** Categorical Eligibility. If all household members are authorized to get TAFI, AABD and/or SSI, the household is categorically eligible. Categorically eligible households are exempt from resource, gross and net income eligibility standards. (7-1-98)
- **09. Certification Determination**. Actions necessary to determine household eligibility including interviews, verification, approval, denial, field investigation, analysis and corrective action necessary to insure prompt, efficient and correct certifications. (6-1-94)
- **10. Claim Determination**. The action taken by the Department establishing the household's liability for repayment when an overissuance of Food Stamps occurs. (6-1-94)
 - 11. Change Reporting Household (CR). Household that meets one (1) of the following conditions: (11-1-03)T
 - a. No countable income: (11-1-03)T
 - **b.** Contains any able bodied adult without dependents (ABAWD), regardless of income; (11-1-03)T
 - c. Migrant and seasonal farmworker household; or (11-1-03)T
 - **d.** Income cannot reasonably be prospected. (11-1-03)T
 - 142. Client. A person entitled to or receiving Food Stamps. (6-1-94)
- 123. Coupon. Any coupon, stamp, access device, or certificate issued $\frac{pursuant to}{(7.1-98)(11-1-03)T}$

- **134. Coupon Allotment**. The total dollar amount of Food Stamps allowed the household during the full or prorated month. (6-1-94)
 - **145. Department.** The Idaho Department of Health and Welfare. (6-1-94)
- **156. Disqualified Household Members.** Individuals required to be excluded from participation in the Food Stamp program are Disqualified Household Members. These include: (6-1-94)
- **a.** Ineligible legal non-citizen who do not meet the citizenship or eligible legal non-citizen requirements. (7-1-98)
 - **b.** Individuals awaiting proof of citizenship when citizenship is questionable. (6-1-94)
 - c. Individuals disqualified for failure or refusal to provide a Social Security Number (SSN). (6-1-94)
 - **d.** Individuals disqualified for Intentional Program Violation (IPV). (6-1-94)
- **e.** Individuals disqualified for receiving three (3) months of Food Stamps in a three (3) year period in which they did not meet the work requirement for able-bodied adults without dependent children. (7-1-98)
 - **f.** Individuals disqualified as a fugitive felon or probation or parole violator. (7-1-98)
- **g.** Individuals disqualified for a voluntary quit or reduction of hours of work to less than thirty (30) hours per week. (7-1-98)
- **h.** Individuals disqualified for failure to cooperate in establishing paternity and obtaining support for a child under eighteen (18). (7-1-98)
- **i.** Individuals convicted under federal or state law of any offense classified as a felony involving the possession, use, or distribution of a controlled substance when they do not comply with the terms of a withheld judgment, probation, or parole. The felony must have occurred after August 22, 1996. (3-30-01)
- **167. Documentation**. The method used to record information establishing eligibility. The information must sufficiently explain the action taken and the proof and how it was used. (6-1-94)
- 178. Drug Addiction Or Alcoholic Treatment Program. Any drug addiction or alcoholic treatment rehabilitation program conducted by a private nonprofit organization or institution or a publicly operated community mental health center under Part B of Title XXIX of the Public Health Service Act (42 USC 300x, et seq.). Indian reservation based centers may qualify if FCS requirements are met and the program is funded by the National Institute on Alcohol Abuse under Public Law 91-616 or was transferred to Indian Health Service funding.

(7 1 98)(10-1-03)T

- **182. EBT Handbook**. Idaho Department of Health and Welfare Rules, IDAPA 16.03.20, "Rules Governing Electronic Benefit Transfer (EBT) of Public Assistance, Food Stamps, and Child Support". (7-1-98)
 - 4920. Electronic Benefit Transfer. A method of issuing Food Stamps to an eligible household. (7-1-98)
- **201. Eligible Foods**. Any food or food product for human consumption excluding alcohol, tobacco, and hot foods and hot food products ready for immediate consumption. Eligible foods include: (6-1-94)
 - **a.** Garden seeds and plants to grow food for human consumption. (6-1-94)
 - **b.** Meals prepared for the elderly at a communal dining facility. (6-1-94)
 - **c.** Meals prepared and delivered by an authorized meal delivery service. (6-1-94)
 - **d.** Meals served to a narcotics addict or alcoholic who participate and reside in a rehabilitation center

program. (6-1-94)

- **e.** Meals prepared and served by an authorized group living center to blind or disabled residents who receive benefits under Titles I, II or X, XIV, XVI of the Social Security Act. (6-1-94)
 - **f.** Meals prepared and served at a shelter for battered women and children to eligible residents. (6-1-94)
- **g.** Meals prepared and served by an authorized public or private nonprofit establishment to homeless Food Stamp participants. (6-1-94)
- **242. Eligible Household**. A household living in a project area and meeting the eligibility criteria in these rules. (6-1-94)
- **223. Emancipated Minor**. A person, age fourteen (14) but under age eighteen (18), who has been married or whose circumstances show the parent and child relationship has been renounced such as a child in the military service. (6-1-94)
- **234. Enumeration**. The requirement that each household member provide the Department either their Social Security Number (SSN) or proof that they have applied. (6-1-94)
- **245. Exempt.** A household member who is not required to register for or participate in the JSAP program is exempt. A household member who is not required to register for work is exempt. (6-1-94)
- **26.** Extended Certification Household (EC). Simplified reporting household in which all adult members are elderly or disabled, with stable income. (11-1-03)T
 - **27.** Farm Bill. Public Law 107-171, "Farm Security and Rural Investment Act of 2002". (11-1-03)T
 - **258. Federal Fiscal Year**. The Federal fiscal year (FFY) is from October 1 to September 30. (6-1-94)
 - **29. Field Office**. A Department of Health and Welfare service delivery site. (10-1-03)T
 - **2630.** Food Assistance. The Department's Food Stamp Program or Food Distribution Program. (6-1-94)
- **2731. General Assistance**. Cash or other aid, excluding in-kind assistance, financed by Federal, state or local government and provided to cover living expenses or other basic needs. This cash or other aid is intended to promote the health and well-being of recipients. (6-1-94)
- 2832. Group Living Arrangement. A public or private nonprofit residential setting serving no more than sixteen (16) residents. The residents are blind or disabled and receiving benefits under Title II or XVI of the Social Security Act, certified by the Department under regulations issued under Section 1616(e) of the Social Security Act, or under standards determined by the Secretary of USDA to be comparable to Section 1616(e) of the Social Security Act. (6-1-94)

2933. Homeless Person. A person:

(6-1-94)

a. Who has no fixed or regular nighttime residence.

- (6-1-94)
- **b.** Whose primary nighttime residence is a temporary accommodation for not more than ninety (90) days in the home of another individual or household. (7-1-98)
- **c.** Whose primary nighttime residence is a temporary residence in a supervised public or private shelter providing temporary residence for homeless persons. (6-1-94)
- **d.** Whose primary nighttime residence is a temporary residence in an institution which provides temporary residence for people who are being transferred to another institution. (6-1-94)

- **e.** Whose primary nighttime residence is a temporary residence in a public or private place which is not designed or customarily used as sleeping quarters for people. (6-1-94)
- **304. Homeless Meal Provider.** A public or private nonprofit establishment or a profit making restaurant which provides meals to homeless people. The establishment or restaurant must be approved by the Department and authorized as a retail food store by FCS. (7-1-98)
 - **345. Identification Card.** The card identifying the bearer as eligible to get and use Food Stamps. (6-1-94)
- **326. Inadvertent Household Error Claim (IHE)**. A claim resulting from an overissuance, caused by the household's misunderstanding or unintended error. A household error claim pending an intentional program violation decision. (6-1-94)
- **337. Income And Eligibility Verification System (IEVS).** A system of information acquisition and exchange for income and eligibility verification which meets Section 1137 of the Social Security Act requirements. (6-1-94)
- **348. Indian General Assistance**. The general assistance program administered by the Bureau of Indian Affairs. (6-1-94)
- **359. Institution Of Higher Education**. Any institution which normally requires a high school diploma or equivalency certificate for enrollment. These institutions include colleges, universities, and business, vocational, technical, or trade schools at the post-high school level. (7-1-97)
- **3640. Institution Of Post Secondary**. Educational institutions normally requiring a high school diploma or equivalency certificate for enrollment, or admits persons beyond the age of compulsory school attendance. The institution must be legally authorized by the state and provide a program of training to prepare students for gainful employment. (6-1-94)
 - **41. Legal Noncitizen.** A qualified alien under 8 USC Section 1641(b).

(10-1-03)T

- **3742. Nonexempt.** A household member who must register for and participate in the JSAP program. A household member who must register for work. (6-1-94)
- **3843. Nonprofit Meal Delivery Service.** A political subdivision or a private nonprofit organization, which prepares and delivers meals, authorized to accept Food Stamps. (6-1-94)
- **3944. Overissuance**. The amount Food Stamps issued exceeds the Food Stamps a household was eligible to receive. (6-1-94)
- **405. Parental Control.** Parental control means that an adult household member has a minor in the household. *The minor* who is dependent financially or otherwise on the adult. Minors, emancipated through marriage, are not under parental control. Minors living with children of their own are not under parental control.

(7-1-98)(10-1-03)T

- **4<u>46</u>. Participation**. Participation means a person or household was certified for the Food Stamp Program and is getting Food Stamps. (6-1-94)
- **427. Program**. The Food Stamp Program created under the Food Stamp Act and administered in Idaho by the Department. (6-1-94)
- **438. Project Area**. The state of Idaho has been approved as one (1) project area by the Department of (6-1-94)
 - **442.** Public Assistance. Public assistance means Old-Age Assistance (OAA), Temporary Assistance for

	T OF HEALTH AND WELFARE ing the Food Stamp Program in Idaho	Docket No. 16-0304-0401 Temporary Rulemaking
Families in Idah	to (TAFI), Aid to the Blind (AB) and Aid to the Disabled (AD).	(7-1-98)
45 <u>0</u> .	Retail Food Store. A retail food store, for Food Stamp purposes mea	ins: (6-1-94)
a. route, whose for consumption.	An establishment, or recognized department of an establishment, or pool sales volume is more than fifty percent (50%) staple food item	
b.	Public or private communal dining facilities and meal delivery service	es. (6-1-94)
c.	Private nonprofit drug addict or alcohol treatment and rehabilitation p	programs. (6-1-94)
d.	Public or private nonprofit group living arrangements.	(6-1-94)
e.	Public or private nonprofit shelters for battered women and children.	(6-1-94)
f. food prior to the	Private nonprofit cooperative food purchasing ventures, including the receipt of the food.	hose whose members pay for (6-1-94)
g.	A farmers' market.	(6-1-94)
h. establishment m	An approved public or private nonprofit establishment which fourt be approved by FCS.	eeds homeless persons. The (7-1-98)
51. regardless of the	Simplified Reporting Household (SR). Household with countable amount and doesn't contain an ABAWD or Migrant/Seasonal farmwo	
<u>462</u> .	Spouse. Persons who are:	(6-1-94)
a.	Ceremonially married under applicable state law; or	(6-1-94)
b.	Living together, free to marry and holding themselves out as man and	l wife. (6-1-94)
47<u>53</u>. Mariana Islands	State . Any of the fifty (50) States, the District of Columbia, Puer and the Virgin Islands of the United States.	to Rico, Guam, the Northern (6-1-94)
48 <u>54</u> .	State Agency. The Idaho Department of Health and Welfare.	(6-1-94)
49 <u>55</u> . fit, and enrolled	Student . An individual between the ages of eighteen (18) and fifty at least half-time in an institution of higher education.	(50), physically and mentally (6-1-94)
5 <u>06</u> . Security Act. Pa	Supplemental Security Income (SSI) . Monthly cash payments unayments include state or Federally administered supplements, such as A	
5 47. eligibility.	Verification. The proof obtained to establish the accuracy of info	rmation and the household's (6-1-94)
	EVIATIONS. s of the Food Stamp Program, the following abbreviations are used.	(6-1-94)
01.	AABD. Aid to the Aged, Blind and Disabled.	(9-1-94)

02.

03.

ABAWD. Able bodied adults without dependents.

AE. Administrative Error.

(7-1-98)

(3-15-02)

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	04.	AFA. Application for Assistance.	(7-1-98)	
	05.	ASVI. Alien Status Verification Index.	(6-1-94)	
	06.	A/R. The applicant or recipient.	(6-1-94)	
	07.	BEER. Beneficiary Earnings Exchange Report.	(6-1-94)	
	08.	BENDEX. Beneficiary Data Exchange.	(6-1-94)	
	09.	BIA. Bureau of Indian Affairs.	(6-1-94)	
	10.	BIA GA. Bureau of Indian Affairs-general assistance.	(6-1-94)	
(CSA).	11.	CIP. The Crisis Intervention Program administered by the Commu	unity Services Administration (6-1-94)	
	12.	COLA. Cost of Living Allowance. (COLA) data received comes from	m SSA. (6-1-94) (10-1-03)T	
Develop	13. ment.	CSA. The Community Services Administration of the U.S. Depar	tment of Housing and Urban (6-1-94)	
	14.	CSS. Bureau of Child Support Services.	(7-1-98)	
	15.	DHW . The Department of Health and Welfare in Idaho.	(6-1-94)	
	16.	DOL. Department of Labor of the State of Idaho.	(7-1-98)	
	17.	EBT. Electronic Benefit Transfer.	(7-1-98)	
	18.	EE. Eligibility Examiner.	(6-1-94)	
	19.	EFNEP . Expanded Food and Nutrition Education Program.	(6-1-94)	
	<u>20.</u>	EWS. Enhanced Work Services.	(10-1-03)T	
entity tha	20<u>1</u>. at admii	F <i>E</i> <u>N</u> S . The Food and Nutrition Service of the U.S. Department of Anisters the Food Stamp program.	Agriculture. This is the federal (7-1-98)(10-1-03)T	
	2 <u>12</u> .	FFY. Federal fiscal year.	(6-1-94)	
	2 <u>23</u> .	FmHA. Farm Home Administration.	(8-1-94)	
	2 <u>34</u> .	FMV. Fair market value.	(6-1-94)	
	24 <u>5</u> .	FQC. Federal Quality Control.	(6-1-94)	
	2 <u>56</u> .	GA. General assistance.	(6-1-94)	
	2 <u>67</u> .	HUD . The U.S. Department of Housing and Urban Development.	(6-1-94)	
	2 <u>78</u> .	IEVS. Income and Eligibility Verification Systems.	(6-1-94)	
	2 <u>89</u> .	IHE. Inadvertent household error.	(6-1-94)	
	29 30.	INS. Immigration and Naturalization Service	(6-1-94)	

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<u>31.</u>	INA. Immigration and Nationality Act.	(10-1-03)T
3 0 2.	IPV. Intentional program violation.	(6-1-94)
3 <u>43</u> .	IRS. Internal Revenue Service.	(6-1-94)
3 <u>24</u> .	JSAP. Job Search Assistance Program.	(6-1-94)
	LUA . Limited utility allowance. Household has a cost for more than all for purposes other than heating or cooling, water, sewage, well are phone, and garbage or trash collection.	
<u>36.</u>	MUA. Minimum utility allowance. Household has a cost for one (1)	<u>utility.</u> (10-1-03)T
3 3 7.	PA. Public Assistance.	(6-1-94)
34 <u>8</u> .	RSDI. Retirement, Survivors, Disability Insurance received from SS.	A. (6-1-94)
3 5 9.	SAVE . Systematic Alien Verification for Entitlements.	(6-1-94)
36 40.	SAW. Special Agricultural Worker.	(6-1-94)
37 41.	SDX. State Data Exchange.	(6-1-94)
<u>3842</u> .	SQC. State Quality Control.	(6-1-94)
39 43.	SRS. Self Reliance Specialist.	(7-1-98)
4 <u>04</u> .	SUA. Standard utility allowance. Household has a cost for heating or	cooling. (6-1-94)(10-1-03)T
4 <u>+5</u> .	SSA. Social Security Administration.	(6-1-94)
4 <u>26</u> .	SSI. The Federal Supplemental Security Income Program for the age	d, blind or disabled. (6-1-94)
4 3 7.	SSN. Social Security number.	(6-1-94)
4 <u>48</u> .	SWICA. State Wage Information Collection Agency.	(6-1-94)
4 <u>59</u> .	TAFI. Temporary Assistance for Families in Idaho.	(7-1-98)
46 <u>50</u> .	TOP. Treasury Offset Program.	(3-15-02)
<i>47<u>51</u>.</i>	TPQY. Third Party Query.	(6-1-94)
48 <u>52</u> .	UI. Unemployment Insurance.	(6-1-94)
49 <u>53</u> .	USDA. United States Department of Agriculture.	(6-1-94)
5 0 4.	VA. The Veterans Administration.	(6-1-94)
5 <u>45</u> .	WIA. The Workforce Investment Act.	(3-15-02)
5 <u>26</u> .	WIC. The special supplemental Food Program for Women, Infants, a	and Children. (6-1-94)

120. HOUSEHOLD INTERVIEWS.

Households must have an face to face interview before certification and recertification, unless the interview is waived. A new interview is not necessary if the household had a face-to-face interview at initial certification and at least once every twelve (12) months thereafter. Interviews must be conducted face-to-face or via telephone, based on hardship criteria evident in the case record. A household member or an authorized representative can be interviewed. The applicant may bring any other person to the interview. The Department does not require households to report for an in-office interview during their certification period, but they may be requested to do so. No adverse action can be taken if the household fails to respond to a request for an in-office interview during their certification period.

(3-15-02)(11-1-03)T

121. WAIVER OF OFFICE FACE-TO-FACE INTERVIEW.

An office face-to-face interview may be waived replaced with a telephone interview if one (1) or more conditions in Subsections 121.01 through 121.05 of this rule are met. The reason for the waiver of the office face-to-face interview must be documented in the case record.

(3 15 02)(11-1-03)T

01. No Representative And Age Sixty Or Older Or Handicapped. All adult household members cannot come for an interview have no earned income and they are age sixty (60) or older or have a mental or physical illness or disability. The household does not have another person to appoint as an authorized representative.

(9-1-94)(11-1-03)T

- 02. Mentally Or Physically Handicapped. All adult household members are mentally or physically handicapped. The household does not have another person to appoint as an authorized representative. (9-1-94)
- **032. Transportation Problems Difficulties**. The adult household members have transportation **problems** difficulties including reliability, availability, distance from the field office, and cost of fuel. **The household does not have another person to appoint as an authorized representative.** (9.1.94)(11-1-03)T
- **043.** Lives Over Thirty Miles From Field Office Residence In A Rural Area. The adult household members do not live within is located more than thirty (30) miles of from a Ffield Ooffice. The household does not have another person to appoint as an authorized representative.

 (9-1-94)(11-1-03)T
- 05. Other Hardships. The adult household members have hardships warranting a waiver of office interview. Other Hhardships include illness, care of a household member, prolonged severe weather, and work or training hours—preventing an in-office interview. The household does not have another person to appoint as an authorized representative.

 (3 15 02)(11-1-03)T

122. INTERVIEW DUTIES.

The Department will explain rights, responsibilities, procedures and reporting requirements. The Department will explain basic program procedures and reporting requirements, such as actual versus standard utility deductions. The Department will resolve unclear or incomplete information. The Department will protect the applicant's privacy during the interview.

(6 1 94)(11-1-03)T

(BREAK IN CONTINUITY OF SECTIONS)

135. SOURCES OF VERIFICATION.

The following sources of verification must be considered:

(6-1-94)

- **01. Written Confirmation**. The primary source of proof is written confirmation of circumstances. Written proof includes driver's licenses, work or school identification, birth certificates, wage stubs, award letters, court orders, divorce decrees, separation agreements, insurance policies, rent receipts and utility bills. Acceptable proof is not limited to a single document. Proof can be obtained from the household or other sources. Secondary sources of proof must be used to verify a household's circumstances if the primary source cannot be obtained or does not prove eligibility or benefit level. (7-1-97)
- **02. Collateral Contacts.** A collateral contact is an oral confirmation of a household's circumstances by a person outside of the household. The collateral contact may be made either in person or over the telephone.

Acceptable collateral contacts include employers, landlords, migrant service agencies, friends, neighbors and relatives not living in the household. The collateral contact must accurately confirm the household's statement. The Department is responsible for getting proof from the collateral contact. The household usually names the collateral contact. The household may request help in selecting a collateral contact. (6-1-94)

- <u>Verified Upon Receipt</u>. Information verified upon receipt is data from BENDEX and SDX issued by the SSA, data from SAVE issued by INS, and data regarding Unemployment Compensation issued by DOL. Quarterly wage match data, new hire matches, and unearned income matches from the SSA are not considered verified upon receipt.
 (11-1-03)T
- **034. Automated System Records.** System records include <u>BENDEX, SDX ICCP and ICSES system information</u>, quarterly wage match data, new hire matches, unearned income matches from the SSA, and DOL and <u>INS</u> records. The Department has routine access to automated system records. (3-15-02)(11-1-03)T
- **045. Home Visits.** Home visits may be used to get proof needed for Food Stamp eligibility only when the proof cannot be obtained otherwise. Home visits will be used on a case-by-case basis only when proof supplied by the household is not sufficient. Home visits must be scheduled in advance with the client. (3-15-02)

136. REQUIRED PROOF.

The Department must *have* receive proof for items listed below. The Department will *tell* inform the household what proof is required in accordance with 7 CFR Part 273. (6-1-94)(11-1-03)T

- **101. Idaho Residencey**. *Proof of residence is required.* Proof of Idaho residency includes *lease agreements*, rent *receipts showing the address and utility bills* and mortgage payments, utility expenses and documents used to establish identity as described in Subsection 136.02 of this rule. Proof of Idaho residencey is not required for unusual cases such as homeless households, migrant farmworkers or new arrivals to a *project* service delivery area.

 (6-1-94)(11-1-03)T
- **02. Identity**. *Proof of identity is required for the applicant and representative.* Proof includes a driver's license, school identification or a birth certificate. The Department can accept other proof of identity.

 (6-1-94)(11-1-03)T
- **O3. SSN**. SSNs are verified by submitting the SSNs reported by the households to the SSA. *An automated interface in EPICS is completed.* Certification cannot be delayed to an otherwise eligible household solely to verify an SSN. *An SSN is also considered verified by another program participating in IEVS.* If a person is unable to provide an SSN or does not have an SSN, the Department must require proof of application for an SSN prior to certifying the person. A newborn may participate when the household cannot provide proof of application for an SSN for the newborn. Proof of application for an SSN for that child must be provided at the next recertification or six (6) months after the month the child was born, whichever is later. (7-1-98)(11-1-03)T
- **04.** Immigration Status. *Proof of immigration status is required for all eligible legal non-citizen household members.* Proof includes legal non-citizen registration cards, passports, and information from Systematic Alien Verification for Entitlements (SAVE) from the Alien Status Verification Index (ASVI). (7-1-98)(11-1-03)T
- **05. Resources**. *Proof of resources is required.* Proof includes bank books, bank statements or documents verifying the resource value. (6-1-94)(11-1-03)T
- **Vehicles**. *If questionable, proof of vehicle value is required.* Proof includes NADA values and statements from car dealers. (6-1-94)(11-1-03)T
- **07. Loans**. *Proof of loans is required.* A statement signed by both parties is proof of a loan. A legally binding agreement is not required. The provider of the loan must sign a statement that loan payments received on a regular basis are being made or will be made under a fixed schedule.

 (6.1.94)(11-1-03)T
- **08. Income**. *Proof of income is required.* Proof includes wage stubs, statements from employers, income interfaces and award letters. (6.1-94)(11-1-03)T

- **O9.** Shelter Costs. Proof of shelter costs is required. The household must be told informed that benefits will be computed, without a deduction for the shelter costs, if proof is not provided. Shelter costs include homes shelter expenses. Shelter costs include homes unoccupied because of employment, training away from the home or illness. Shelter costs include homes abandoned due to a natural disaster or casualty loss. Shelter cost proof is required once, unless the household has moved or reports a change in shelter costs. Proof of shelter costs includes mortgage statements, home equity loans, rent receipts, space rent receipts, lease agreements, tax notices (including irrigation), and insurance premium notices.

 (6-1-94)(11-1-03)T
- **10. Homeless Deduction**. Homeless households will receive a standard homeless shelter deduction. Proof of shelter costs is not required to obtain the homeless shelter deduction. (10-1-03)T
- 101. Heating Or Cooling Costs For Standard Utility Allowance (SUA). Proof of separate heating or cooling costs is required for the SUA. Proof of costs is required once, unless the household moves or the utilities change. The SUA must include an expense for heating or cooling. The Department will inform the household that benefits will be computed without a deduction for the utility costs if proof is not provided. Proof includes utility bills, statements from utility companies, receipts from the purchase of wood, and landlords.

 (6-1-94)(10-1-03)T
- 11. Utility Costs. Proof of actual utility costs is required if the household chooses actual costs. If proof of actual utility costs is not received before thirty (30) days, the SUA will be used if the household is eligible for the SUA. Proof of actual utility costs is required if the home is not occupied.

 (6-1-94)
- 12. Limited Utility Allowance (LUA). The Department will inform the household that benefits will be computed without a deduction for the utility costs if proof is not provided. Proof of two (2) or more utility costs is required. Proof includes utility bills, statements from utility companies and landlords. Water, sewer, and trash are considered one (1) utility cost regardless of how they are billed.

 (10-1-03)T
- 13. Minimum Utility Allowance. The Department will inform the household that benefits will be computed without a deduction for the utility costs if proof is not provided. Proof of one (1) utility cost is required. Proof includes utility bills, statements from utility companies and landlords. Water, sewer, and trash are considered one (1) utility cost regardless of how they are billed.

 (10-1-03)T
- 124. Dependent Care Costs. Proof of dependent care costs is required. Proof of costs is required once, unless the dependent care provider changes or the cost changes. The Department will inform the household that benefits will be computed without a deduction for the dependent care costs if proof is not provided. Proof includes child care bills or statements and ICCP payment information.

 (6.1-94)(11-1-03)T
- 135. Medical Costs. Proof of incurred medical expenses is required for households claiming a medical deduction. Proof includes medical bills, #Medicare reimbursement statements, and prescription receipts. Proof of anticipated medical expenses is not required provided the elient participant has informed the Department of the expense and the expense is not questionable. Verification of other factors, including but not limited to the following, such as those listed in Subsections 136.15.a. through 136.15.c. of this rule are required if the expense is questionable:

 (6-1-94)(11-1-03)T
 - a. The allowability of the medical services provided-: (6-1-94)
 - **b.** The provider qualifications.; (6-1-94)
 - **c.** The individual's eligibility to claim a deduction. (6-1-94)
- 146. Disability. Proof of disability is required. Proof includes SSA verification, VA verification and statements from doctors includes receipt of permanent or temporary disability benefits, or a statement from a physician or a licensed or certified psychologist.

 (6-1-94)(11-1-03)T
- 157. Child Support Deduction. Proof of child support payments the noncustodial parent makes is required. The Department will inform the household that benefits will be computed without a deduction for the Child Support costs if proof is not provided. The parent must be legally obligated to make the child support payments. The child support payments must be made to or for a nonhousehold member. Both the legal obligation to pay child

support and the actual amount paid must be verified. Proof of the legal obligation includes: <u>a</u> <u>C</u>court order, divorce decree, administrative order, or legally enforceable separation agreement. Proof of child support paid includes: CSS records, cancelled checks, wage withholding statements, UI withholding statements, <u>or</u> statements from the custodial parent. Proof of legally obligated health insurance coverage on behalf of a <u>nonhousehold</u> child is required. Proof includes: <u>Finsurance policy</u>, insurance company statement, <u>or</u> employer statement. If the household fails or refuses to submit required proof, <u>determine</u> the household's eligibility and <u>coupon</u> <u>food stamp</u> allotment <u>must be determined</u> without the child support <u>deduction</u> <u>expense</u>. If there is a discrepancy between information provided by the household and CSS, the household must be given an opportunity to resolve the discrepancy. Proof of child support payment is required at each certification. Proof of changes in the amount of legally obligated child support ordered or the amount of child support paid must be obtained at recertification. <u>If the amount of legally obligated child support ordered or the amount of child support the household pays has not changed, require proof at recertification only if the <u>information is questionable</u>.

(7-1-98)(11-1-03)T</u>

137. PROOF FOR QUESTIONABLE INFORMATION.

Prior to the certification or recertification of the household, Fithe Department will must verify all questionable information when it is questionable regarding eligibility and benefit level. Proof is required when details are not consistent with statements made. Proof is required when details are not consistent with information on the application or past applications. Proof is required when details are not consistent with information received by the Department. Proof may be obtained either verbally or in writing.

(6-1-94)(11-1-03)T

(BREAK IN CONTINUITY OF SECTIONS)

205. WRITTEN DECLARATION OF CITIZENSHIP OR IMMIGRATION STATUS.

To get Food Stamps, a person must be a citizen, national of the United States, or have satisfactory immigration status. The person must declare citizenship or legal non citizen status in writing, one (1) adult household member must certify by signing a statement, under penalty of perjury, regarding the citizenship and immigration status of household members applying for benefits. The person signing the statement only has to sign once.

(7 1 98)(10-1-03)T

- 01. Citizen/ship Or Legal Non-Citizen Status At Application. One (1) adult household member must sign a written declaration attesting to the citizenship or legal non citizen status of all household members. An adult household member must sign his own name for a child under eighteen (18) years of age. If there are no adult household members, the applicant must sign for himself and for all other non-adult household members. When a new household member enters the household, the new member or an adult household member must sign a declaration of citizenship or legal non-citizen status before being added to the Food Stamp household.

 (7-1-98)(10-1-03)T
- <u>02.</u> The Declaration Must Be Maintained On File. The Department must maintain the written declaration attesting to the citizenship or legal non-citizen status of all household members in the case file.

(10-1-03)T

O23. Sanctions For Failure To Sign Citizen/Legal Non-Citizen Status. If the applicant fails to sign the written declaration, the household is not eligible for Food Stamps. When all household members are under the age of eighteen (18) one (1) household member must sign for all household members. (4-5-00)

206. PROOF OF PROPER IMMIGRATION STATUS.

Immigration status is proved by INS. INS will compare the evidence to their Alien Status Verification Index (ASVI)

Households are required to submit documents to verify the immigration status of the legal non-citizen applicants. An alien number, by itself, is not considered proof of immigration status.

(7-1-98)(10-1-03)T

- 01. Proof Of Immigration Status. Legal non-citizens must present proof of immigration status for each legal non-citizen member.
- **021. Time Limits For Providing Legal Non-Citizen Documents.** Allow legal non-citizens ten (10) days to provide legal non-citizen status documents. The ten (10) day period starts the date legal non-citizen status documents are requested. If the ten (10) day period ends before the thirtieth day after application, do not certify the household until it provides the documents. If the ten (10) day period ends beyond the thirtieth day after application,

do not delay benefits for the remaining household members, if the household is otherwise eligible. Provide benefits no later than the thirtieth day. If the legal non-citizen status documents are not provided by the end of ten (10) days, the legal non-citizen member must be classified as an ineligible legal non-citizen. (7-1-98)

- **032. Failure To Provide Legal Non-Citizen Documents**. If a household says it is unable or unwilling to provide legal non-citizen status documents for a legal non-citizen household member, the legal non-citizen member must be classified as an ineligible legal non-citizen. (7-1-98)
- **043. Proof Verification Of Immigration Status**. The documents provided by the household for members identified as legal non-citizens are submitted to INS for *proof* <u>verification</u>. The *proof* <u>validity of the documents</u> is *completed by use of* <u>verified through</u> SAVE. Primary and secondary methods of proof are described below:

 (7-1-98)(10-1-03)T
- **a.** Primary proof. Primary proof is telephone access to the INS files. This method uses the Alien Status Verification Index (ASVI). The Alien indicator (A) plus the seven (7) or eight (8) numbers shown on the original document is used to access the ASVI file. If primary proof fails to verify legal non-citizen status, the secondary proof procedure must be completed before the Department denies Food Stamps based solely on legal non-citizen status.

 (6-1-94)(10-1-03)T
- **b.** Secondary proof. Secondary proof is sending photo copies of the original immigration documents and a Document Verification Request Form (G-845) to INS for proof. Notify the participant before getting secondary proof. Secondary proof is used if *any of the conditions in Subsections 206.04.b.i. through 206.04.b.v. apply:* primary proof fails to verify legal non-citizen status. (3 15 02)(10-1-03)T
 - i. Primary proof instructs the Department to "Institute Secondary Verification". (7-1-99)
 - ii. No record is found through the primary proof system. (7-1-99)
- iii. The Department has accepted non INS documents determined to be reasonable evidence of legal non-citizen immigration status.

 (7-1-99)
 - iv. The Department has determined documents presented by the legal non-citizen are questionable.

 (7-1-99)
- v. An Alien (A) Number is not on an INS document. Information in the record is not consistent and more proof is needed. (7-1-99)
- **e04.** Participation In Another Program. The Department must accept participation in another program as proof of citizenship or non-citizen national status, if verified for that program.

 (3-15-02)(10-1-03)T
- **third Party Statement.** If the household cannot get proof of citizenship or non-citizen national status, and has a reasonable explanation why proof is not available, *accept* a signed statement <u>may be accepted</u>, under penalty of perjury, from a third party. The statement must give a reasonable basis for personal knowledge that the member is a U.S. citizen or non-citizen national. The signed statement must contain a warning of the penalties for helping someone commit fraud.

 (3-15-02)(10-1-03)T
- **05.** Secondary Proof Requirement. If primary proof fails to verify legal non citizen status, the secondary proof procedure must be completed before the Department denies Food Stamps based solely on legal non-citizen status.

 (7-1-99)
- 06. Legal Non-Citizen Status Not Proved. A legal non-citizen whose status is not proved by INS or a third party statement of U.S. citizenship or non-citizen national status, must be considered an ineligible legal non-citizen.

 (3-15-02)
- 07. Documentation Provided Late. If the legal non-citizen later provides documentation of legal non-citizen status, and other household members get Food Stamps, act on the information by submitting it to INS for proof. Once the eligible legal non-citizen status is verified add the legal non-citizen. Add the legal non-citizen the

month after the participant provides documentation of legal non-citizen status to the Department, not the month after INS verifies the status. If the Food Stamp case is not open, the legal non-citizen must re-apply. (7-1-99)

207. INELIGIBLE NON-CITIZEN STATUS.

If legal non-citizen status cannot be proved or ineligible non-citizen status is proved, the non-citizen is not eligible for Food Stamps. Ineligible non-citizens include, but are not limited to, non-citizens entering the country illegally to seek employment, non-citizen visitors, tourists, diplomats, and persons temporarily attending school in the United States with no intention of abandoning their foreign residence. A non-citizen is ineligible, until he provides acceptable proof, unless meeting a condition in Subsections 207.01 through 207.03.

(3-15-02)(10-1-03)T

207. NON-CITIZEN ELIGIBILITY PENDING VERIFICATION.

A non-citizen is considered eligible for Food Stamps if verification of eligibility is pending under the following circumstances: (10-1-03)T

- **01. Status Submitted To INS For Verification**. If the Department <u>has</u> submit<u>sted</u> a copy of a document, provided by the household, to INS for verification, the Department cannot delay, deny, reduce, or end the person's eligibility for Food Stamps based on immigration status.

 (3 15 02)(10-1-03)T
- **Request Submitted To SSA For Number Of Quarters Of Work Credited.** If Fthe applicant or the Department has submitted a request to SSA for data on the number of quarters of work credited to the person. SSA responds that the person has fewer than forty (40) quarters. The person provides proof that SSA is conducting research to see if it can credit more quarters. If and the SSA says states that the number of credited qualifying quarters is under investigation, the Department must certify the person applying as eligible for Food Stamps pending the results. The certification can last up to six (6) months from the date of the original determination of insufficient quarters.

 (3-15-02)(10-1-03)T
- **O3.** Request Submitted To Federal Agency For Proof Of Eligible Alien Status. The applicant or the Department <u>has</u> submitted a request to a <u>Ff</u>ederal agency for proof of eligible alien status: <u>Ff</u>the Department must certify the person <u>applying as eligible for Food Stamps</u> pending the results of the investigation. The certification can last up to six (6) months from the date of the original request for proof. (3-15-02)(10-1-03)T

208. <u>DEPARTMENT REQUIREMENT FOR REPORTING LEGAL NON-CITIZENS WITH DEPORTATION ORDER</u> TO INS.

Report legal non-citizens with a final deportation order filed against them for violation of the Immigration and Nationality Act. An order of deportation is final when one (1) of the conditions in Section 208 is met. Inform the local INS office within one (1) day of verifying a Food Stamp household member meets a condition below: The Department must inform the local INS office of any Food Stamp household member present in the United States in violation of the INA in accordance with 7 CFR 273.4.

- 01. Appeal Period Elapsed. The order is not subject to appeal because the statutory appeal period of ten (10) days has elapsed. (6.1.94)
 - 02. No Grounds For Appeal. There are no lawful grounds upon which to appeal the order. (6-1-94)
- 03. Appeals Exhausted. Administrative and judicial appeals have been exhausted, and the order is not subject to reopening for reconsideration.

 (6-1-94)

(BREAK IN CONTINUITY OF SECTIONS)

221. WHEN TO COUNT FOOD STAMP DETERMINATION OF HOUSEHOLD MEMBERS COMPOSITION FOR CHANGE REPORTING HOUSEHOLDS.

Members of the Food Stamp hHousehold composition must be determined before Food Stamps can be issued at application, recertification, and when changes are reported. Count household members using guidelines below:

(6-1-94)(11-1-03)T

01. New Household. Determine household composition for a new household as of the application

month. (6-1-94)

- 02. Household Gains An Eligible Member. If the Food Stamp household gains an eligible member, add the member the month after the month the household reports and verifies the new member. Provide a supplemental issuance if necessary. If the new member has income and Food Stamp benefits must be reduced, advance notice is required. If advance notice is required, add the member two (2) months after the month the household reports and verifies the new member.
- 03. Household Loses A Member. If the household loses a member, remove the member as soon as possible following proper notice. Food Stamps based on the lost member must end not later than two (2) months after the month the member left the household.

 (6-1-94)
- 04. Moves From One Food Stamp Household To Another Food Stamp Household. If a person moves from one (1) Food Stamp household to another Food Stamp household remove the person from the old household with proper notice. Add the person to the new household. The person cannot get Food Stamps in both households in the same month.

 (6-1-94)

<u>222.</u> <u>DETERMINATION OF HOUSEHOLD COMPOSITION FOR SIMPLIFIED REPORTING HOUSEHOLDS.</u>

Household composition must be determined at application and recertification.

(11-1-03)T

2223. -- 225. (RESERVED).

(BREAK IN CONTINUITY OF SECTIONS)

- **257.** EXEMPTIONS FROM THE PERSONS NOT CONSIDERED ABAWD-WORK REQUIREMENT.

 Persons meeting a condition in Subsections 257.01 through 257.054 of this rule are exempt from the not considered ABAWD-work requirement.

 (5.3-03)(11-1-03)T
 - **01.** Age. Persons under eighteen (18) and fifty (50) years of age or older. (3-15-02)
- **O2. Disability**. Persons medically certified as physically or mentally unfit for employment. Proof of the disability is required. A person is medically certified as physically or mentally unfit for employment if: (3-15-02)
 - **a.** Receiving temporary or permanent disability benefits issued by a government or private source. (3-15-02)
 - **b.** Obviously mentally or physically unfit for employment, as determined by the Department. (3-15-02)
- **c.** The person has a statement from a physician, physician's assistant, nurse, nurse practitioner, designated representative of the physician's office, licensed or certified psychologist, a social worker, or any other medical personnel the Department determines appropriate, verifying physical or mental unfitness for employment.

 (3-15-02)
- **03. Residing In A Household Where A Member Is Under Age Eighteen**. All persons residing in a household where a household member is under eighteen (18) years old. (3-15-02)
 - **04. Pregnancy**. Pregnant persons. (7-1-98)
 - **95.** ISAP Exempt. Persons exempt from ISAP are also exempt from the ABAWD work requirement.

 (7-1-99)

(BREAK IN CONTINUITY OF SECTIONS)

501. INITIAL CHANGES IN FOOD STAMP CASE.

Act on changes in household circumstances found during the application or the initial interview.

(6-1-94)

- **01. Anticipated Changes**. A household can be eligible in the application month, but not eligible the month after the application month because of expected changes in circumstances. The household may not be eligible for the application month, but eligible for the next month. The same application form is used for the denial and the next month's eligibility determination. (6-1-94)
- **O2. Food Stamps For The Application Month.** The household's Food Stamp issuance for the application month may differ from its issuance in later months. (6-1-94)
- **O3. Food Stamp Issuance Changes**. The household's Food Stamp issuance may vary month to month, within the certification period, to reflect expected changes. (6-1-94)
- **04. Change Before Certification**. If a household reports a change in household circumstances before certification and the Department can act on the change, include the reported information in determining Food Stamp eligibility and amount. (6-1-94)
- **O5.** Change After Certification. If a household reports a change after the eertification and too late to be included in the budget for the next month, make the change as soon as possible initial Food Stamp benefit has been paid, the Department must act on the change if it was required to be reported or would increase the household's Food Stamp benefits under these rules. The eChanges must be made no later than the second month after it is reported in the household's expenses will not be acted upon until recertification. Notice of the change must be given to the Food Stamp household.

 (6-1-94)(11-1-03)T

(BREAK IN CONTINUITY OF SECTIONS)

532. GROSS INCOME LIMIT.

Households exceeding the gross income limit for the household size are not eligible, unless they are categorically eligible or have an elderly or disabled member. Categorically eligible households are exempt from gross and net income limits. All members of categorically eligible households must be approved for TAFI, AABD, or SSI. Households with elderly or disabled household members are exempt from the gross income limit. The gross income limit is raised each federal fiscal year by FNS, based on the federal cost of living (COLA) adjustment. Gross income limits are listed in Table 532 under http://www.fns.usda.gov/fsp/government/cola.htm.

TABLE 532 - GROSS INCOME LIMIT			
Household Size	Gross Income Limit		
4	\$960		
2	\$1,294		
3	\$1,628		
4	\$1,961		
5	\$2,295		
6	\$2,629		
7	\$2,962		
8	\$3,296		
Each Added Person	Add \$334		

 $\frac{(10-1-02)T}{(10-1-03)T}$

533. INCOME DEDUCTIONS HOUSEHOLD ELIGIBILITY AND BENEFIT LEVEL.

A household's is entitled to a deduction when it gets a bill or, if there is no bill, when the payment is due. Only the deductions listed below must be taken from household's gross income: eligibility and benefit level will be calculated in accordance with 7 CFR 273.10, except as indicated below in Subsections 533.01 through 533.07. of this rule.

(6-1-94)(11-1-03)T

- **01. Standard Deductions**. The standard deductions are controlled by Federal law. The monthly amounts are specified in Title 7 United States Code Section 2014. Current deductions may be found <u>at: under http://www.fns.usda.gov/fsp/rules/Memo/02/FY02_Allot_Deductgovernment/cola.htm. (10-1-02)T(10-1-03)T</u>
- **O2. Earned Income Deduction**. The earned income deduction is twenty percent (20%) of gross earned income. (6-1-94)
- (\$143). Homeless Shelter Deduction. The homeless shelter deduction is one hundred forty-three dollars (10-1-03)T
- **034.** Excess Medical *Deduction* Expense. *The e*Excess medical *deduction* expense is nonreimbursed medical expenses of more than thirty-five dollars (\$35) per household per month. The household member must be either age sixty (60) or older or disabled to get this expense deduction. Special diets are not deductible.

(6-1-94)(11-1-03)T

- **045. Dependent Care <u>Peduction Expense.</u>** The dependent care <u>expense</u> deduction <u>each month</u> is <u>for monthly</u> dependent care expenses up to a maximum of two hundred dollars (\$200) per dependent child under age two (2) and one hundred seventy-five dollars (\$175) for any other dependent. The care must be needed for a household member to accept, continue, or seek employment, or attend school or training for employment. (9 1 94)(11-1-03)T
- **056.** Child Support <u>Deduction</u> Expense. The child support <u>expense</u> deduction is the legally obligated child support amount the household pays, or expects to pay, on behalf of a non-household member.

(7-1-97)(11-1-03)T

1067. Excess Shelter Costs Expense. Excess shelter expense is T_1 the monthly shelter cost over fifty percent (50%) of the household's income after all other deductions is the excess shelter cost. The excess shelter expense is not deducted if the household has received the homeless shelter deduction. (10-1-02) T_1 (11-1-03) T_2

534. AVERAGING PERIODIC DEDUCTIONS EXPENSES.

Infrequent, changing, or one time only <u>deductions</u> <u>expenses</u> for medical, child support, shelter or child care are averaged. Averaging deductible expenses and procedures are listed below: (7 1-97)(11-1-03)T

- **01. Averaging Infrequent Expenses**. Households can have infrequent expenses averaged forward over the interval between scheduled billings. If there is no scheduled interval, expenses are averaged over the intended coverage period. (6-1-94)
- **02. Averaging Fluctuating Expenses**. Households can have fluctuating expenses averaged over the certification period in which they are billed. (6-1-94)
- **O3.** Averaging One Time Only Expenses. One time only expenses can be averaged over the certification period in which they are billed. One time only expenses can be used as a one time deduction for one month. One time only expenses can be averaged over the remaining months in the certification period. Expenses averaged over the remaining certification period begin the month the change will become effective. (6-1-94)
- **04. Predicting Future Expenses**. Predicted expenses must be based on the most recent month's bills, unless changes are expected to occur. (6-1-94)
- **05. Converting Expenses To Monthly Figures**. Whenever an expense is billed on other than a monthly basis convert the expense to a monthly amount. The method used to compute monthly expenses must be documented.

 (6-1-94)(11-1-03)T

- Multiply weekly amounts by four point three (4.3).
 Multiply bi-weekly amounts by two point one five (2.15).
 Multiply semi-monthly amounts by two (2).
 Use a monthly figure if it can be predicted for each month of the certification period.
 The method used to compute monthly expenses must be documented.
 (6-1-94)
 (6-1-94)
- **06.** Averaging One-Time Medical Expenses For Households Certified For Twenty-Four Months. Households with one-time medical expenses, and certified for twenty-four (24) months, have the option of: (3-15-02)
 - **a.** Deducting the expense for one (1) month. (3-15-02)
- **b.** Averaging the expense over the remainder of the first twelve (12) months of the certification period. (3-15-02)
- **c.** Averaging the expense over the remaining months in the twenty-four (24) month certification period. (3-15-02)

535. MEDICAL DEDUCTIONS EXPENSES.

Medical <u>costs</u> expenses over thirty-five dollars (\$35), for elderly or disabled household members, must be deducted from the household income. <u>Allowable Mmedical expense</u> deductions are listed below. If an agreement, <u>either oral or written</u>, is made between the medical provider and the client to pay a bill in monthly amounts, <u>count</u> the monthly agreement amount <u>specified is considered the medical expense</u>. <u>The agreement may be oral or written</u>. The agreement must be made before the initial bill becomes due. The agreement must indicate a specific amount due each month. <u>The specified amount is the monthly expense</u>. If there is no agreement, amounts from past billing periods are not deductible. The amounts are not deductible, even if the past debt is in the current bill and actually paid by the household.

- **01. Medical And Dental Services**. Services must be performed by licensed practitioners, physicians, dentists, podiatrists, or other qualified health professionals. Other qualified health professionals include registered nurses, nurse practitioners, licensed physical therapists and licensed chiropractors. (6-1-94)
- **02. Psychotherapy And Rehabilitation Services.** Services must be performed by licensed psychiatrists, licensed clinical psychologists, licensed practitioners, physicians or other qualified health professionals. (6-1-94)
- **O3. Hospital Or Outpatient Treatment**. Hospital or outpatient treatment includes *costs* expenses for hospital, nursing care, State licensed nursing home care, and care to a person immediately before entering a hospital or nursing home.

 (6-1-94)(11-1-03)T
- **04. Prescription Drugs**. Prescription drugs and prescribed over-the-counter medication including insulin. (6-1-94)
- **05. Medical Supplies And Sickroom Equipment**. Medical supplies and sickroom equipment including rental or other equipment. (6-1-94)
- **96. Health Insurance**. Health and hospitalization insurance premiums. These do not include health and accident policies payable in a lump sum for death or dismemberment. These do not include income maintenance policies to make mortgage or loan payments while a beneficiary is disabled. (6-1-94)
- **07. Medicare Premiums**. Medicare premiums related to coverage under Title XVIII of the Social Security Act. (6-1-94)

- **08.** Cost-Sharing Or Spend-Down Expenses. Cost-sharing or spend-down expenses incurred by Medicaid recipients. (6-1-94)
 - **09. Artificial Devices.** Dentures, hearing aids, and prostheses.

(6-1-94)

- **10. Guide Dog**. *Costs for* Expenses incurred buying and caring for any animal trained and routinely used to help a disabled person. *Deductions* Expenses include costs for dog food, training, and veterinarian services.

 (6.1-94)(11-1-03)T
 - 11. Eyeglasses. Costs Expenses for eye examinations and prescribed eyeglasses. (6-1-94)(11-1-03)T
- 12. Transportation And Lodging. Reasonable transportation and lodging $\frac{costs}{(6-1-94)(11-1-03)T}$ get medical services.
- **13. Attendant Care**. Attendant care costs necessary due to age, disability, or illness. If attendant care costs qualify for both the <u>excess</u> medical and dependent care <u>expense</u> deductions, <u>treat</u> the cost <u>is treated</u> as a medical expense. (6-1-94)(11-1-03)T
- **14. Attendant Meals**. *Deduct o*One hundred nineteen dollars (\$119) per month are deducted if the household provides most of the attendant's meals. (\$17.197)(11-1-03)T

536. DEPENDENT CARE DEDUCTIONS EXPENSES.

A household can get a deduction for the costs of dependent care. The care of a dependent must be necessary for job search, employment, or training. The maximum deductible amount each month is two hundred dollars (\$200) per dependent child under age two (2) and one hundred seventy-five dollars (\$175) for any other dependent. If a child in the household reaches his second birthday during the certification period, adjust the dependent care expense deduction the month after the child turns age two (2). The dependent care eosts expenses must be deducted from income. The dependent care must meet the criteria listed below:

(3-15-02)(11-1-03)T

O1. Employment. To accept employment or continue employment.

- (6-1-94)
- **02. Job Search**. To look for work. Person does not need to be subject to job search requirements.

(6-1-94)

03. Training Or Education. To attend training or to pursue education. The training or education must be preparation for employment. (6-1-94)

(BREAK IN CONTINUITY OF SECTIONS)

538. CHILD SUPPORT DEDUCTIONS EXPENSES.

Effective October 1, 1995, a child support deduction is allowed expense may be deducted for a household paying or expecting to pay legally obligated child support to or for a person living outside the household. The child support deduction expense deducted must reflect the child support the household pays or expects to pay during the certification period, rather than the obligated amount. The deduction for child support deduction expense applies to child support payments outlined in Subsections 538.01 through 538.04.

(7-1-98)(11-1-03)T

- **01. Monthly Child Support**. Monthly legally obligated child support payments or portions of monthly legally obligated child support payments made to or for a person living outside the household. (7-1-98)
- **02. Health Insurance**. Health insurance payments the *noncustodial parent* household is legally obligated to make to obtain coverage for a nonhousehold child.

 (7-1-97)(11-1-03)T
- **03. Payments Representing Child Support.** Payments *representing* <u>for</u> child support to or for a person living outside the household. The <u>child support</u> payments must be legally obligated as ordered by a court or administrative authority. (7.1-98)(11-1-03)T

04. Arrearages. <u>Unpaid</u> Child support <u>payments made for</u> amounts that were due in prior months are arrearages. <u>Monthly cC</u>hild support arrearage payments made to or for a person living outside the household are allowed as a deduction in the month they are paid. <u>Monthly child support payments are counted for the month of payment, not for arrearages, unless the household can prove otherwise. (7-1-98)(11-1-03)T</u>

539. CALCULATION DETERMINATION OF CHILD SUPPORT DEDUCTION EXPENSE.

The household's child support payment history is used to determine the <u>deduction for the</u> child support <u>payment allowed expense</u>. *Use Subsections 539.01 and 539.02 to calculate the child support payment deduction.* The child support deduction is based on what the household expects to pay, after reviewing household income and expenses with the household. If no child support payments can be made, a child support deduction will not be allowed.

(7 1 98)(10-1-03)T

- Payments Made In Each Of The Three Most Recent Months. If legally obligated child support or child support arrearage payments have been made in each of the three (3) most recent months and no income reduction is expected, average the child support or child support arrears amounts for the three (3) months. If the household has paid the monthly obligated child support or arrears for the current month, include the current month in the three (3) month period. Otherwise, average the three (3) prior months' child support. Do not include arrearages collected by tax intercept in the average. Anticipate changes in the legal obligation or other changes that would affect the payment. If obligated child support or arrearage payments have been made in the most recent three (3) months, and a change in income occurs, determine whether reduced child support is expected. Base the child support deduction on what the household expects to pay, after reviewing household income and expenses with the household. If no child support payments can be made, do not allow a child support deduction.
- Payments Not Made In Each Of The Last Three Months. If child support or child support arrearage payments have not been made in each of the last three (3) months, anticipate future payments based on household circumstances. Base the child support deduction on what the household expects to pay, after reviewing the household's income and expenses with the household. If no child support or arrears payments can be made, do not allow a child support deduction. If at the last certification the child support deduction was based on the amount the household expected to pay and no child support was paid, do not allow a child support deduction for the new certification unless there is a change in income that would enable the household to make child support payments. Base the child support deduction on what the household expects to pay, after reviewing income and expenses with the household.

540. -- 541. (RESERVED).

542. COSTS ALLOWED FOR SHELTER DEDUCTION.

Shelter costs are current charges for the shelter occupied by the household. Shelter costs include costs for the home temporarily not occupied because of employment or training away from home or illness. The costs allowed for the shelter deduction are listed below:

(6-1-94)

- **O1.** House Payments. Mortgages, second mortgages, mortgage fees, home equity loans, and land payments. (6-1-94)(11-1-03)T
 - **02. Rent**. Rent and space rent.

(6-1-94)

- **93.** Homeless Shelter Deduction. The homeless shelter deduction is one hundred forty-three dollars (\$143). This deduction must not be used in combination with other costs allowed for shelter deduction. (10-1-03)T
- **034. Condominium Fees**. The entire condominium fee, including fees for maintenance of the structure and the grounds. (3-30-01)
 - **045. Loan Payments.** Loan repayments for the purchase of a mobile or motor home, including interest. (6-1-94)
 - **056. Taxes And Insurance**. Property taxes, state, and local assessments, and insurance on the structure. (6.1-94)(11-1-03)T

- **067. Utilities.** Only one (1) utility allowance (SUA, LUA, or MUA) may be used for a household. The Ecosts of used to determine the utility allowance are: heating, cooling, cooking fuel, electricity, the basic service fee for one (1) telephone (including wire maintenance fees, subscriber line charges, relay center surcharges, and 911 fees, and basic service for a cellular phone), water, sewer, garbage and trash collection, well installation and maintenance, septic tank system installation and maintenance, and fees for initial utility installation. One-time deposits cannot be included.

 (3-15-02)(10-1-03)T
 - **078. Vehicle Payments.** Payments for vehicles used as the primary residence for the household. (6-1-94)
- **089. Costs For Home Repairs**. Nonreimbursable costs to repair a home damaged or destroyed by a natural disaster such as a fire or flood or earthquake. (6-1-94)
- **6910. Home Temporarily Not Occupied.** Shelter costs for the home temporarily not occupied because of employment, σ training away from home, σ illness, or abandonment caused by a natural disaster or casualty loss. This shelter cost may be in addition to the shelter cost for the home the household currently occupies. Shelter costs for the home temporarily not occupied because of abandonment caused by a natural disaster or casualty loss. This shelter cost may be in addition to the shelter cost for the home the household currently occupies. For To receive the shelter deduction for a vacated home:
 (6-1-94)(11-1-03)T
 - **a.** The household must intend to return-;

(6-1-94)(11-1-03)T

b. Current occupants must not be claiming Food Stamp shelter costs-; and

(6 1 94)(11-1-03)T

c. The home must not be leased or rented.

(6-1-94)

543. STANDARD UTILITY ALLOWANCES (SUA).

The shelter deduction is computed using the SUA or actual one (1) of three (3) utility costs. The allowances: Standard Utility Allowance (SUA) can be used instead of actual costs of heating, cooling, cooking fuel, electricity, the basic service fee for one (1) telephone, water, sewer and garbage collection. The SUA is two hundred forty four dollars (\$244). The household must be told if actual utility costs exceed the SUA, the actual costs can be used if the household proves these costs. To qualify for the SUA, households must receive direct or indirect energy assistance payments made under the Low Income Home Energy Assistance Act of 1981 (LIHEAP); or meet the conditions in Subsections 543.01 through 543.06 of this rule. Limited Utility Allowance (LUA), or the Minimum Utility Allowance (MUA). Utility allowances are not prorated.

01. Standard Utility Allowance (SUA).

(10-1-03)T

Ost to qualify for the SUA. A primary heating system is a central heating system, or space heating stove, used to heat the living quarters of the home. A cooling system is a central air conditioning system or a room air conditioner. The household must have out of pocket heating or cooling costs billed on a regular or irregular basis. The heating or cooling costs must be separate from rent or mortgage payments. This includes households in private rental housing, billed by their landlords for individual usage or charged a flat rate, separately from rent. If not billed regularly for heating or cooling costs, the household must be otherwise Food Stamp eligible between billing periods.

(3-15-02)(10-1-03)T

- **02b.** Cooling costs. If the household claims cooling costs, the household must have either an air conditioning system or a room air conditioner to qualify for the SUA. (3-15-02)
- Heating costs. If the household claims heating costs, the household must have expenses for a primary source of heat. Households buying wood for their primary source of heat may get the SUA. Cutting their own wood for the primary source of heat does not qualify a household for the SUA. Supplemental heat sources like, such as pace heaters, electric blankets, cook stoves and a secondary heat source like such as a fireplace do not qualify households for the SUA.

 (3-15-02)(10-1-03)T
 - **64d.** Energy Assistance Excluded From Income. If the household gets direct or indirect energy

assistance that is excluded from income, the household gets the SUA if the amount of the expense exceeds the amount of the assistance. (3-15-02)

65c. Energy Assistance Not Excluded From Income. If a household gets energy assistance that is not excluded from income, the household must also have out-of-pocket heating or cooling costs to get the SUA.

(3-15-02)

- **066. Occupied And Unoccupied Home.** A household with both an occupied home and an unoccupied home, is limited to one (1) SUA. (3-15-02)
- <u>02.</u> <u>Limited Utility Allowance (LUA)</u>. The household must be billed for more than one (1) utility that is not for heating or cooling. Water, sewer, and trash are considered one (1) utility cost regardless of how they are billed. If the household is billed for rural trash pickup, this can be counted as a separate utility. (10-1-03)T
- <u>03.</u> <u>Minimum Utility Allowance (MUA)</u>. The household must be billed for one (1) utility that is not for heating or cooling. (10-1-03)T

544. ACTUAL UTILITY COSTS.

The shelter deduction is computed using the SUA or actual utility costs. Actual utility costs are described below:

(6.1.94)

- 01. Actual Utility Costs. If a household is not entitled to claim the SUA or does not wish to claim the SUA, the household can claim actual utility expenses for excess utility costs or utility costs it pays separately, including secondary heat sources. Charges for heating and cooling costs, except the costs of cutting their own wood, may be claimed as actual expenses by the household.

 (6-1-94)
- **02.** Not Claiming SUA. For households not claiming the SUA, the Department can predict utility costs based on last year's bills from the same period, updated by overall price increases. If only the most recent bill is available, utility increases or decreases can be based on utility company estimates for the household's dwelling and utilities. An average of past expenses from the last several months must not be used to predict utility costs. Costs of heating, cooking fuel, electricity, the basic service fee for one telephone, water, sewer, and garbage and trash collection are allowed.

545. SWITCHING BETWEEN ACTUAL AND SUA.

Households must be told they can switch between actual utilities and the SUA. Households can switch at recertification. Households can switch between standard and actual utilities when the household moves from one (1) residence to another. Households can switch between standard and actual utilities when their type of utilities change.

(7 1 98)

544. -- 545. (RESERVED).

546. SHARED UTILITY EXPENSES.

The SUA must be utility allowance is not prorated among some households sharing utility costs as listed in Subsections 546.01 through 546.02 of this rule.

(3 15 02)(10-1-03)T

- **01.** Utility Expenses Shared With Persons Not In The Food Stamp Household. *Prorate the SUA*, iIf the Food Stamp household lives with and shares heating and cooling expenses with another individual, another household, or both, the utility allowance is not prorated and the household can receive the full utility allowance. *Use the actual utility costs paid by households or household members if the prorated share cannot be determined. The actual utility costs must not exceed the total utility costs of the residence.* (3 15 02)(10-1-03)T
- **02. Utility Expenses Shared With Ineligible Persons**. *Do not prorate the SUA*, *i*If all persons sharing utility expenses with the Food Stamp household are excluded from the household only because they are Food Stamp ineligible, the utility allowance is not prorated and the household can receive the full utility allowance. *Allow the Food Stamp household the entire SUA*. (3-15-02)(10-1-03)T

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(BREAK IN CONTINUITY OF SECTIONS)

549. NET INCOME LIMIT TEST.

Categorically eligible households do not have a net income limit. For all other households, including those with an elderly or disabled household member, compare the net income to the net income eligibility limit for that size household. This comparison must be completed for initial eligibility and when income changes. When the household income changes to a different income eligibility limit, apply the different limit. In the net income of the household exceeds the net income limit, the household is not eligible for Food Stamps, unless categorically eligible. Net income limits are established each federal fiscal year by FNS and listed in Table 549 under http://www.fns.usda.gov/fsp/government/cola.htm.

TABLE 549 NET INCOME LIMITS			
Household Size	Net Income Limit		
4	\$739		
2	\$995		
3	\$1,252		
4	\$1,509		
5	\$1,765		
6	\$2,022		
7	\$2,279		
8	\$2,535		
Each Added Person Add	\$257		

 $\frac{(10-1-02)T}{(10-1-03)T}$

550. STEPS TO COMPUTE DETERMINATION OF FOOD STAMP PAYMENT BENEFIT.

Use the steps in Subsections 550.01 through 550.38 of this rule to compute fThe Food Stamp issuance benefit is computed in accordance with 7 CFR 273.9 and 273.10. Do not round figures or calculations of income and deductions in determining gross or net income.

(10 1-02)T(10-1-03)T

income.	01.	Step 1. List projected wages and salaries for the household for the month. Do not count	excluded (6-1-94)
loss.	02.	Step 2. Compute and list net self-employment income. If a farmer, list any self-employment	profit or (6-1-94)
	03.	Step 3. Add results of Step 1 and Step 2. THIS IS GROSS EARNED INCOME.	(6-1-94)
	04.	Step 4. Compute and list prorated monthly non-excluded educational income.	(6-1-94)
	05.	Step 5 . Compute and list prorated monthly tuition, mandatory fees, and allowed expenses.	(6 1 94)
	06.	Step 6. Subtract amount in Step 5 from the amount in Step 4.	(6-1-94)
	07.	Step 7. List other unearned income for household.	(6-1-94)
	08.	Step 8. Add results of Step 6 and Step 7. THIS IS TOTAL UNEARNED INCOME.	(6 1 94)
	09.	Step 9. Add results of Step 3 and Step 8.	(6-1-94)

INCOM	10.	Step 10. Subtract any loss not used up in Step 2 from Step 9. THIS IS GROSS M	
		rd the gross monthly income. Check to see if gross income exceeds the limit for fa igible households are exempt from the gross income test. Households with an elderly or	
househe	old memb	er are exempt from the gross income test.	(6 1 94)
	11.	Step 11. Multiply amount in Step 3 times twenty percent (20%).	(6-1-94)
	12.	Step 12. Subtract amount in Step 11 from amount in Step 3.	(6-1-94)
	13.	Step 13. Add amount in Step 12 to amount in Step 8.	(6 1 94)
	14.	Step 14. List the standard deduction.	(4-5-00)
	15.	Step 15. Subtract amount in Step 14 from amount in Step 13.	(6-1-94)
disabled	16. d member	Step 16. List converted medical costs over thirty five dollars (\$35) for household with .	elderly or (6-1-94)
	17.	Step 17. Subtract amount in Step 16 from amount in Step 15.	(6 1 94)
depende	18. ent under	Step 18. List converted dependent care costs (not to exceed two hundred dollars (; age two (2) and one hundred seventy five dollars (\$175) for any other dependent).	\$2 00) per (10-1-94)
	19.	Step 19. Subtract amount in Step 18 from amount in Step 17.	(7-1-97)
	20.	Step 20. List child support paid or expected to be paid by the household.	(7-1-97)
DEDU(21. CTIONS,	Step 21. Subtract amount in Step 20 from amount in Step 19. THIS IS INCOME EXCEPT SHELTER DEDUCTION.	7. AFTER (7-1-97)
THE AL	22. OJUSTEI	Step 22. Divide amount in Step 21 by two (2) (this is used to weigh shelter costs). THIS INCOME.	'IS HALF (7-1-97)
	23.	Step 23. List rent or mortgage payment.	(7 1 97)
	24.	Step 24. List property taxes (averaged over twelve (12) months).	(7-1-97)
	25.	Step 25. List homeowners insurance on structure (averaged over twelve (12) months).	(7-1-97)
	26.	Step 26. Add amount in Step 23 and amount in Step 24 and amount in Step 25.	(7 1 97)
26.	27.	Step 27. If client chooses the standard utility allowance (SUA), add the SUA to the amount	int in Step (4-5-00)
	28.	Step 28. If client has chosen to use actual utility expenses, list and add the following expenses.	enses: 10-1-02)T
	a.	Basic rate for telephone.	(6-1-94)
	b.	Electric bill.	(6-1-94)
	e.	Gas bill.	(6 1 94)
	d.	Heating oil.	(6-1-94)
	e .	Wood costs (only if purchased for heat).	(6-1-94)

DEPARTMENT OF HEALTH AND WELFARE
Rules Governing the Food Stamp Program in Idaho

Water and sewer bill.

£

Docket No. 16-0304-0401 Temporary Rulemaking

(6.1.94)

J		(' ' ' ' '
g.	Garbage and trash collection.	(6-1-94)
h.	Installation costs for utilities.	(6-1-94)
i.	Other allowed utility costs.	(6 1 94)
29.	Step 29. If client has chosen to use actual utility expenses, add amount in Step :	26 and amount in

- Step 28. (7.1.97)
- 30. Step 30. Use amount from Step 27 (using standard utility allowance) or amount from Step 29 (using actual utility costs) as total shelter cost. (7.1.97)
- 31. Step 31. Subtract half adjusted income (Step 22) from amount in Step 30. THIS IS THE EXCESS SHELTER DEDUCTION. If any member of the household is age sixty (60) or disabled, use the full excess shelter allowance. For all other households use the excess shelter deduction up to the maximum specified in Title 7 United States Code Section 2014. Current deductions may be found at: http://www.fns.usda.gov/fsp/rules/Memo/02/FY02_Allot_Deduct.htm.
 - 32. Step 32. Subtract amount in Step 31 from amount in Step 21. THIS IS THE NET INCOME.
 - 33. Step 33. List maximum net income limit based on household size. (7-1-97)
- 34. Step 34. If amount in Step 32 is less than or equal to amount in Step 33, or if all household members are categorically eligible, compute the Food Stamp amount. If the amount in Step 32 is greater than the amount in Step 33, net income exceeds allowed limits.

 (7 1 97)
 - 35. Step 35. List maximum Food Stamp amount for number of eligible household members. (7-1-97)
 - 36. Step 36. Multiply amount in Step 32 times three-tenths (0.3) (thirty percent (30%)). (7-1-97)
 - 37. Step 37. Subtract amount in Step 36 from the amount in Step 35. (7-1-97)
- 38. Step 38. Round the amount in Step 37 to the next lower dollar. THIS IS THE FOOD STAMP ISSUANCE AMOUNT. (7-1-97)

(BREAK IN CONTINUITY OF SECTIONS)

576. CERTIFICATION PERIODS.

A certification period must be assigned for each household. Households must be assigned the longest a certification period possible based on expected household circumstances at the time of application approval or recertification in accordance with 7 CFR 273.10(f) and 273.12, and the Farm Bill under Title IV, Subtitle A - Food Stamp Programs, Section 4109, regarding the state option to reduce reporting requirements. Households can change certification periods and reporting type only at the time of application approval or recertification. At the end of each certification period, entitlement to Food Stamps ends. Further eligibility starts only upon recertification based upon a newly completed application, an interview, and verification. The certification period cannot be lengthened nor can Benefits cannot be continued beyond the end of a certification period without a new determination of eligibility.

(6-1-94)(11-1-03)T

- 01. First Month Of Certification. The first month the household is eligible is the first month in the certification period for initial applicants. Upon recertification, a new certification period begins. (6-1-94)
 - 02. Elderly Or Disabled Households. Households in which all adult members are elderly or disabled,

with stable income, must be certified for up to twenty-four (24) months.

(3-15-02)

- 03. Farmworker Households. Annual certification periods will be assigned to farmworkers who receive their annual salaries on a scheduled monthly basis. The income must not change as the amount of work changes.

 (6-1-94)
- 04. Self-Employed For At Least One Year. Self-employed households, working as self-employed for at least one (1) year, will be certified up to twelve (12) months. Income must be readily predictable and household circumstances must not be likely to change.

 (6-1-94)
- 05. Self-Employed For Less Than One Year. Households, self-employed less than one (1) year, will be certified up to six (6) months. Households self-employed for less than one (1) year are assigned a certification period to bring the household into the annual cycle.

 (6-1-94)
- **Pinancial And Medical Assistance Households.** Households in which all adult members receive AABD, AABD-related Medicaid, or SSI will be assigned certification periods coinciding with the other program's review. To align the Food Stamp certification with the redetermination date for the AABD, AABD related Medicaid or SSI program, the household's Food Stamp certification can be shortened or extended when the AABD, AABD-related Medicaid, or SSI application is initially approved. The Food Stamp certification period for these households may be extended up to twenty four (24) months. The household must be notified of changes in the length of the certification period.

 (3-15-02)
- 07. Households Eligible For A Child Support Deduction. Households eligible for a child support deduction with no record of regular child support or arrearage payments will be certified up to three (3) months. Households eligible for a child support deduction with a record of regular child support or arrearage payments will be certified for at least six (6) months, but no more than twelve (12) months. These requirements do not apply to households assigned certification periods under Subsections 576.02, 576.04, 576.05, and 576.06.
- 08. Households Granted Separate Household Status. Households consisting of a parent and that parent's children who have been granted separate household status will be assigned a certification period up to six (6) months. Financial and medical assistance households granted separate household status must be assigned certification periods up to six (6) months.
- 69. Stable Households. Households with stable income or work records, except self-employed and farmworker households, are certified for at least six (6) months, but no more than twelve (12) months. The household should expect no major changes in income, deductions, or household composition.

 (3-15-02)
- 10. Stable Homeless Households. Households in which all members are homeless, whose living arrangements reflect a stable living situation must be certified for at least six (6) months, but no more than twelve (12) months. Stable living situations include living with another household. Living in transitional housing is not a stable living situation.
- 11. Unstable Households. Households will be certified for one (1) or two (2) months, when the household has an ABAWB member, cannot predict its future circumstances, or when frequent changes in income or household status is expected. Households must be certified for the period the household can predict its circumstances, household status, and household income. Migrant and seasonal farmworkers, whose income is subject to large fluctuations during the work season will be certified for one (1) to two (2) months. The income fluctuation may be due to uncertainty of continuous employment, or due to bad weather, or other circumstances. (3-15-02)
- 12. Residents Of Aleohol And Drug Abuse Centers. Residents of alcohol and drug abuse centers may be certified for periods of one (1) to six (6) months depending on the length of the treatment or rehabilitation program.

 (6-1-94)
- 13. Certifications After The Fifteenth Of The Month. Households eligible for a certification period of three (3) or fewer months must have their certification period increased by one (1) month if the application is approved after the fifteenth (15th) day of the application month and the household's circumstances warrant the

longer period. (6-1-94)

577. LENGTHENING THE CERTIFICATION PERIOD.

The certification period can<u>not</u> be lengthened, after the household is certified. The total certification period cannot exceed twenty four (24) months for a household of elderly or disabled members, and twelve (12) months for other households. Send the household notice of the new certification period ending date.

(3-15-02)(10-1-03)T

578. -- 580. (RESERVED).

581. MAXIMUM FOOD STAMPS BY HOUSEHOLD SIZE.

The maximum Food Stamp amount by household size is <u>established each federal fiscal year by FNS and is</u> listed *in Table 581* <u>under http://www.fns.usda.gov/fsp/government/cola.htm.</u>

TABLE 581 MAXIMUM FOOD STAMPS BY HOUSEHOLD SIZE				
Household Size	Maximum Food Stamps			
4	\$139			
2	\$256			
3	\$366			
4	\$465			
5	\$553			
6	\$663			
7	\$733			
8	\$838			
Each Added Person	Add \$105			

(10-1-02)T(10-1-03)T

(BREAK IN CONTINUITY OF SECTIONS)

601. REPORTING REQUIREMENTS AND RESPONSIBILITIES.

Changes in a household's circumstances, during the certification period, must be used to redetermine eligibility and benefit level. The household must report and verify changes in circumstances within time limits based on the requirements for the reporting group to which the household is assigned. Changes may be reported by phone, by mail or directly to the Department. The Department must act on household changes that affect eligibility and/or benefit level. Households must report as follows:

(6-1-94)(11-1-03)T

<u>01.</u>	Change Reporting Households (CR). Change Reporting Households must report the	following: (11-1-03)T
<u>a.</u>	Unearned income changes of more than fifty dollars (\$50);	(11-1-03)T
<u>b.</u>	Earned income changes of more than one hundred dollars (\$100);	(11-1-03)T
<u>c.</u>	Decrease in ABAWD hours to less than eighty (80) hours per month;	(11-1-03)T
<u>d.</u>	Address changes;	(11-1-03)T
<u>e.</u>	Changes in household composition; and	(11-1-03)T

<u>**f.**</u> When resources exceed the resource limit.

(11-1-03)T

O2. Simplified Reporting (SR) And Extended Certification (EC) Households. Simplified reporting and extended certification households must report changes when their total gross income exceeds one hundred thirty percent (130%) of the Federal Poverty Guideline (FPG) for the household size and any change of address.

(11-1-03)T

602. HOUSEHOLD MUST PROVIDE PROOF.

The household must furnish proof <u>of changes required to be reported or changes that would increase their benefits</u> to support its statements and resolve inconsistent information. Proof can be provided in person, by mail, or by an authorized representative. Reasonable proof includes information to verify reported changes. If the household finds it difficult or impossible to get the proof, the Department must offer help to get the proof.

(6-1-94)(11-1-03)T

603. PERSON OUTSIDE HOUSEHOLD FAILS TO PROVIDE PROOF -- CHANGES.

Food Stamps cannot be closed solely because a person outside the household fails to provide requested proof. The Department will attempt to get another source of proof if a person outside the household <u>did does</u> not provide requested proof. Disqualified household members are not persons outside the household. (6-1-94)(11-1-03)T

604. -- 610. (RESERVED).

611. REPORTING PROCEDURES.

Households must report changes in circumstances within ten (10) days of the date the change becomes known to as required by the household's reporting group. At the initial interview and at recertification, inform the household to report changes. Inform the household of change reporting requirements. Give the household a written explanation of change report information. Explain to the household reporting forms and how to complete them. Explain verification requirements. Tell the household the toll free number to call to get help to complete the report. Provide help to households completing or filing change report forms if adult members are mentally or physically handicapped or lacking in reading or writing skills. Except for income changes, households must report changes within ten (10) days of the date the change becomes known to the household. For income changes, the household must report the change within ten (10) days of receiving the income that changed. If changes occur after the certification interview, but before the Notice of Decision is sent, the household must report changes within ten (10) days of the Notice of Decision date. Changes are counted as reported the day the client has personal or telephone contact with the Field Office. (7-1-99)(11-1-03)T

- **01. Must Not Impose Added Reporting Requirements**. The Department must not require additional household reporting not listed in these rules. (6-1-94)
- **02. Report Form.** The Department must give households a Change Report Form at certification, at recertification, when the household reports a change, and when the household requests the form. (7-1-99)(11-1-03)T
- **03. Reporting Methods**. Changes can be reported by telephone, personal contact, or mail. Changes can be reported by a household member or authorized representative. (6-1-94)
- **04. Failure To Report.** If Food Stamps are overissued because a household fails to report required changes, a Claim Determination must be prepared. A person can be disqualified for failure to report a change if he commits an Intentional Program Violation. (7-1-99)

612. HOUSEHOLD MUST REPORT CHANGES (RESERVED).

Households must report any changes listed below:

(6 1 94)

- 01. Household Composition. Households must report when a person enters or leaves the Food Stamp household. (7-1-97)
 - 02. Residence: Households must report residence changes and resulting shelter cost changes. (6-1-94)
 - 03. Subsidized Rent. Households must report any change in subsidized rent. (7-1-99)

- 04. Unearned Income. Households must report changes in an unearned income source. Households must report changes in unearned gross monthly income of twenty-five dollars (\$25) or more, except changes in TAFI or AABD grants. This includes vendor payments and reimbursements.

 (7-1-98)
- **05.** Earned Income. Households must report a change in an earned income source. Households must report a change in hourly rate or salary. Households must report a change from part-time to full-time work or full-time to part time work. Work of less than thirty (30) hours weekly is part-time work. Thirty (30) or more hours weekly is full-time work.

 (7-1-94)
 - 06. Vehicles. Households must report any change in the number or type of licensed vehicles. (6-1-94)
- 07. Resources. Households must report changes in cash on hand, stocks, bonds, savings, and bank accounts combining to reach or exceed two thousand dollars (\$2,000).

 (6-1-94)
- 08. Child Support. Households must report changes in legal obligations. Legal obligations include but are not limited to changes in the child support amount or the child reaches an age at which child support is no longer legally obligated.

 (7-1-98)
- **09.** ABAWDs Work Hours. If total work or work program hours drop below eighty (80) hours per month, ABAWDs must report the change to the Department, within ten (10) days of the date of change. (3-15-02)
- 613. <u>CHANGES ON WHICH THE</u> DEPARTMENT MUST <u>TAKE ACTION ON CHANGES</u> <u>ACT</u>.

 The Department must act when changes are reported or become known to the Department. (6-1-94)
- <u>O1.</u> <u>General Changes On Which Department Must Act</u>. Regardless of whether the Food Stamp Benefit will increase or decrease, the Department must act when: (11-1-03)T
 - a. The TAFI or AABD grant amount changes; (11-1-03)T
 - **b.** An individual is sanctioned or disqualified; (11-1-03)T
 - c. The household requests closure; and (11-1-03)T
 - <u>d.</u> <u>Information is received from sources considered verified upon receipt. (11-1-03)T</u>
- **O2.** Changes Based On The Household's Reporting Group. The Department must also act on changes as appropriate based on the household's reporting group:

 (11-1-03)T
- **a.** For change reporting (CR) households, the Department must act when a change that is required to be reported is received. (11-1-03)T
 - **b.** For simplified reporting (SR) households, the Department must act when: (11-1-03)T
- <u>i.</u> The income exceeds one hundred thirty percent (130%) of the Federal Poverty Guideline (FPG) for the household size; (11-1-03)T
 - ii. The Food Stamp Benefit will increase and the change is not a change in expenses; and (11-1-03)T
 - iii. There is a change of address. (11-1-03)T
- **043. Documentation**. Changes must be documented in the case record, even if there is no change in the Food Stamp amount. (6-1-94)
- **024. Change Report Form.** A new Change Report Form (HW 0594 or HW 0586) must be given or sent to the household when a change is reported. (6-1-94)

- **035. Receipt Of Report Notice**. The Department must notify the household when the report is received. A Notice of Decision meets this requirement, when notifying the household of a benefit determination. (6-1-94)
- **046. Proof.** Give the household a written request for proof. The household must be told failure to provide the proof will result in decreased or stopped benefits. The Department must document how the request for proof was made. (3-15-02)
- **057. Unclear Information**. If unable to readily determine the effect of a change on the household's benefit amount, issue a written request clearly advising the household of proof it must provide or actions it must take, to clarify its circumstances. Allow ten (10) days for the household to respond, either by telephone or correspondence. (3-15-02)

614. CHANGES IN INCOME. HOUSEHOLD COMPOSITION, OR ASSETS (RESERVED).

If a client reports a change in income, household composition, or assets resulting in excess resources, request proof of the change. If the household provides the proof by the requested date, provide notice and end or adjust benefits. If the household does not provide proof, send a closure notice. If the household then provides proof before the first day of the month the case would close, benefits must be continued, adjusted, or ended. The Department must give adequate notice to adjust or end benefits.

(6-1-94)

615. CHANGES IN SHELTER, DEPENDENT CARE, CHILD SUPPORT OR MEDICAL EXPENSES.

If a client Regardless of the reporting group to which it belongs, a household reportsing a change in shelter, dependent care, child support or questionable medical expenses, the Department must request will be not required to provide proof of the change until recertification or the twelve (12) month contact. If the household provides the proof by the requested date, notice must be sent and benefits adjusted. If the household does not provide the proof and the change would result in decreased benefits, no deduction is allowed. If the change would result in an increase in benefits, but the household does not provide proof, the deduction is not increased. The deduction remains at the amount verified before the change. Proof of anticipated medical expenses is not required provided the client has informed the Department of the expense and the expense is not questionable. Act on a medical change learned from a source other than the household only if the change can be made without contact with the household for further information or proof. Do not act on a medical change learned from a source other than the household if not verified upon receipt or if contact with the household for proof is necessary.

(7-1-97)(11-1-03)T

(BREAK IN CONTINUITY OF SECTIONS)

617. INCREASES IN FOOD STAMPS.

If a change results in an increase in Food Stamps, the Department must allow the household ten (10) days to provide proof. The increase must be handled as follows:

(6-1-94)

- **O1. Proof Provided Within Ten Days.** If the household provides proof within ten (10) days of reporting the change, the Department must act on the change the month after the change was reported, not from the date proof was provided. Make the change effective the next regular Food Stamp issuance. For changes reported after the 20th of the month, issue a supplement is issued for the next month. Issue the supplement no later than the 10th of the next month. If the change is reported and verified after the EPICS cut off date, the change must be made by the second monthly Food Stamp issuance after the change is reported.

 (7-1-97)(11-1-03)T
- **No Proof Of Eligibility Change.** If the household fails to provide proof of a change affecting eligibility requiring the Department to act under Section 613 of these rules, Food Stamps must be closed. Changes in income or household composition are changes affecting eligibility. Changes in assets causing resources to exceed the limits are changes affecting eligibility. If the household then provides proof before the first day of the month the case would close, benefits must be continued, adjusted, or ended as appropriate. The Department must give adequate notice to adjust or end benefits.

 (6-1-94)(11-1-03)T
- 03. No Proof Of Benefit Level Change. If the household fails to provide proof of a change increasing the benefit level, the change is not allowed. The <u>deduction Food Stamp benefit</u> remains at the amount already verified. <u>Changes in shelter costs, dependent care costs, or medical costs affect benefit level</u>. If the household fails to show proof within ten (10) days of reporting the change, but shows the proof later, benefits will be increased the

month after the month proof is provided.

(6-1-94)(11-1-03)T

Proof Provided After Ten Days. If the household fails to show proof within ten (10) days of reporting the change, but shows the proof later, increase benefits the month after the month proof is provided.

(6.1.94)

FOOD STAMP INCREASE DUE TO ADDITION OF HOUSEHOLD MEMBER. 618.

If a change results in a Food Stamp increase due to an added household member, the increase must be made the month following the month the change is reported, if proof is provided within ten (10) days of the Department's request. Make the change effective the next regular Food Stamp issuance. For changes reported after the 20th of the month, issue a supplement for the next month. Issue the supplement no later than the 10th of the next month.

619. FOOD STAMP INCREASE DUE TO DECREASED INCOME.

If a change results in a Food Stamp increase, due to a fifty dollar (\$50) or more decrease in the household's gross income, the increase must be made the month following the month the change is reported, if proof is provided within ten (10) days of the Department's request. Make the change effective the next regular Food Stamp issuance. For changes reported after the 20th of the month, issue a supplement for the next month. Issue the supplement no later than the 10th of the next month.

620. REFUSAL TO COOPERATE.

If the Department determines a household refused to cooperate in establishing eligibility, the household's eligibility must end. Refusal to cooperate includes, but is not limited to, a refusal to act without good cause or in a timely manner. Refusal to cooperate includes willful misrepresentation. Notify the household of refusal to cooperate with a Notice of Decision. If the household fails to cooperate, as opposed to refuses to cooperate, do not deny the household. Assist the household in obtaining necessary proof of eligibility. (3 15 02)

618. -- 620. (RESERVED).

TAFI OR AABD HOUSEHOLD REPORTING CHANGES. **621.**

If a change requires a reduction or ending of TAFI or AABD and Food Stamp benefits, and the Department can determine Food Stamp benefits, the Department will issue a Notice of Decision for both AABD and Food Stamps or TAFI and Food Stamps. If the household makes a timely requests for a fair hearing and continued benefits, Food Stamps benefits continue pending the hearing. The household must reapply if certification expires before the hearing is complete. If Food Stamps increase due to lowering or ending TAFI or AABD, issue the TAFI or AABD notice of adverse action, but do not increase Food Stamps until the household decides if it will appeal the action. If the household appeals and TAFI or AABD is continued, continue Food Stamp benefits at the old level. If the household does not appeal, change Food Stamps after notice. The time limit to act on changes increasing Food Stamps must be calculated from the date the TAFI or AABD Notice of Decision expires. If a change in the AABD or TAFI grant results in a change in the household's Food Stamp benefits, the Department must change the Food Stamp benefits, regardless of whether the Food Stamps increase or decrease. The Department must not make the change that caused the TAFI or AABD benefit to change, unless that change is also one requiring the Department to take action.

(7-1-98)(11-1-03)T

622. CHANGE ENDS TAFI OR AABD INCOME.

A change ending a household's income from a TAFI or AABD grant during the certification period may affect Food Stamp eligibility. Do not close a A household's Food Stamp benefits must not be closed just because of a TAFI or AABD closure. Close Food Stamps benefits will be closed only if the household fails to satisfy the eligibility requirements for change requires the Department to take action under Section 613 of these rules and the action would close Food Stamps. If the household appeals and TAFI or AABD is continued, continue Food Stamps at the same level. If a TAFI or AABD notice is not required or the household does not appeal, the Department must send a notice explaining that the household's benefits will end due to changes which may affect eligibility and/or benefit level. A notice must be sent to the household when Food Stamp benefits change because of a TAFI or AABD change. If TAFI or AABD ends and they household remains Food Stamp eligible, the Department must advise the household of the work registration requirements. When the certification is shortened to reflect changes, the certification period must not end earlier than the month after the notice is issued, allowing adequate time to send a notice and for the household to timely reapply. $\frac{(3-15-02)}{(11-1-03)T}$

(BREAK IN CONTINUITY OF SECTIONS)

645. RECERTIFICATION PROCESS.

The Department must follow the Recertification procedures are listed below: described in 7 CFR 273.14.

(6-1-94)(11-1-03)T

- 01. Notice Of Recertification. The Department must give households a notice of recertification and a recertification form before the certification period ends.

 (3-15-02)
- **a.** Households certified two (2) months or longer must get a notice of recertification and a recertification form during the calendar month before the last month of certification.

 (3-15-02)
- **b.** If certification is not completed until the second month of a two (2) month certification, the Department must give a notice of recertification and a recertification form at the time certification is completed.

 (3-15-02)
- e. If the household is certified for one (1) month, the Department must give a notice of recertification and a recertification form at the time certification is completed.

 (3-15-02)

02. Recertification Interview. The Department must:

(6-1-94)

- **a.** Conduct a complete interview with a household member or authorized representative at least once every twelve (12) months.

 (3-15-02)
- **b.** Schedule the interview so households have at least ten (10) days after the interview to provide proof before the certification period expires.

 (3-15-02)
- e. Permit the household member or authorized representative to complete the recertification form before or during the interview.

 (6-1-94)
 - d. The household must submit the recertification form no later than the interview date. (6-1-94)
- 03. Recertification Time Limits. If the reapplication is timely, the Department must recertify eligible households effective the month after the current certification ends.

 (9-1-94)

04. Initial Month Or Beginning Month Benefits.

(6 1 94)

- **a.** A household applies for recertification before the end of certification. There is no break in benefits. The first month of new eligibility is not an initial month. The household gets a full month's Food Stamp issuance. Benefits are not pro-rated for the first month.

 (6-1-94)
- **b.** A household applies for recertification before the certification ends. The household is not eligible the month after certification ends. The first month of eligibility, after at least one (1) month without benefits, is counted as an initial month. Benefits are prorated from the date of application.

 (6-1-94)
- 95. Delayed Recertification Processing. The Department handles delayed processing of recertifications as described in Subsections 645.05.a. through 645.05.d. (3-15-02)
- **a.** If an eligible household files an application before the end of the certification period but, through the fault of the Department, recertification cannot be completed within thirty (30) days, the department shall:

 (3-15-02)
 - i. Continue to process the case.

(3-15-02)

ii. Provide a full allotment, back to the date the certification period should have begun, had the

DEPARTMENT OF HEALTH AND WELFARE Rules Governing the Food Stamp Program in Idaho

Docket No. 16-0304-0401 Temporary Rulemaking

Department not caused the delay.

(3-15-02)

- **b.** If an eligible household files an application before the end of the certification period, but fails to take a required action, the Department may deny the case at the end of the certification period. The household still has thirty (30) days, after the end of the certification period, to take the required action.

 (3-15-02)
- i. If the household takes the required action before the end of the certification period, the Department shall reopen the case and provide a full allotment for the first month of the new certification period. (3-15-02)
- ii. If the household takes the required action after the end of the certification period, but within thirty (30) days after the end of the certification period, the Department shall reopen the case, and provide Food Stamps back to the date the household took the required action.

 (3-15-02)
- e. If an eligible household files an application within thirty (30) days after the end of the certification period, the Department shall treat the case as a recertification, and prorate the first month's allotment from the date the household filed the application.

 (3-15-02)
- d. The Department shall provide restored benefits if, through the fault of the Department, an eligible household files an application beyond the first of the month, of what should have been its new certification period. The Department shall restore benefits back to the date the certification period should have begun, had the Department not caused the delay in application.

 (3-15-02)

646. NOTICE OF DECISION FOR RECERTIFICATION.

A Notice of Decision must be sent to households that reapply for Food Stamps.

(6-1-94)

- **91. Regular Certification Period.** To get Food Stamps with no break in issuance, households must apply for recertification before the fifteenth day of the last month of certification. The Department will notify the household of eligibility or denial by the end of the current certification period. $\frac{(6-1-94)(11-1-03)T}{(6-1-94)(11-1-03)T}$
- **O2.** Short Certification Period. Households certified for a short period and issued a notice of expiration at the time of certification, must be advised to reapply before the end of their certification period. The Department will send the household a notice of eligibility or denial no later than thirty (30) days after the date of the household's last allotment.

 (6-1-94)

(BREAK IN CONTINUITY OF SECTIONS)

735. FOOD STAMP HOUSEHOLDS THAT MOVE.

When a Food Stamp household moves, the sending and receiving $F_{\underline{f}}$ ield $O_{\underline{o}}$ ffices must transfer the case record and change the $O_{\underline{o}}$ friest must transfer the case record and $O_{\underline{o}}$ friest must transfer the case record and $O_{\underline{o}}$ friest must transfer the case record and change the $O_{\underline{o}}$ friest must transfer the case record and $O_{\underline{o}}$ friest must transfer the case record and $O_{\underline{o}}$ friest must transfer the case record and change the $O_{\underline{o}}$ friest must transfer the case record and $O_{\underline{o}}$

- 01. Responsibilities Of Sending Field Office. If a household reports its move, or plan to move, to another area, the sending Field Office must take steps to transfer the case. Duties of the sending Field Office are listed below:

 (6-1-94)
 - **a.** Record New Address. Record the household's new address in the case record and in EPICS.

 (6.1.94)
- b. Advise Household. Give the household the address and telephone number of the receiving Field Office. If the request for case record transfer is not received within thirty (30) days of the date the client was told to contact the receiving office, Food Stamps must end. Advise the household to:

 (6-1-94)
 - i. Contact the new Field Office at once. (6-1-94)
 - ii. Report their new address and living arrangements. (6-1-94)
 - iii. Allow the new Field Office time to authorize and request transfer of the case record. (6-1-94)

- iv. Contact the new Field Office or the sending Field Office will act to end Food Stamps. (6-1-94)
- Office must send the file. The sending Field Office must forward the case record to the receiving office within two (2) working days. The case record transfer must include all past and current eligibility and overissuance collection records.
- 03. Ending Benefits. If the case record was not requested by the thirtieth day after the household said they were moving, Food Stamps must be ended. The sending Field Office must send a Notice of Decision to the household's last known address. The sending Field Office must end the household's Food Stamps.

 (6-1-94)
- **Q4.** Responsibilities Of Receiving Field Office. When a Field Office learns a household has moved to its area, the receiving Field Office must request the case record within two (2) working days. The receiving office must show the household's new address in the case record. The receiving office must review the household's eligibility and benefit level. The office must review the case not later than thirty (30) days after the household's transfer request.

(6-1-94)

(BREAK IN CONTINUITY OF SECTIONS)

777. MEMBER DISQUALIFIED FOR FAILURE OR REFUSAL TO PROVIDE SSN, CHILD SUPPORT, CITIZENSHIP OR ALIENAGE, AND ABAWDS.

Food Stamp eligibility and benefit level for households containing members disqualified for failure or refusal to provide an SSN, failure to correct *Numident* an SSN, failure to cooperate with child support, failure to sign a citizenship or legal non-citizen status declaration, reaching the ABAWD time limit, or being an ineligible non-citizen, must be *computed using steps in Subsections 777.01 through 777.09* determined in accordance with 7 CFR 273.11.

 $\frac{(3-15-02)}{(11-1-03)T}$

- 01. Step 1. Count the resources of the disqualified members as resources to the Food Stamp household.

 (6-1-94)
- 02. Step 2. Count part of the income of the disqualified members as income to the household. (6-1-94)
- a. Subtract Food Stamp exclusions from the disqualified member's income. (6-1-94)
- b. Divide the income evenly among all members, including the disqualified member. (6-1-94)
- e. Count all but the disqualified member's share as income to the Food Stamp household. (6-1-94)
- 03. Step 3. Apply the earned income deduction to the prorated income of the excluded member.

 (6 1 94)
- 94. Step 4. Divide the allowable shelter, dependent care and child support expenses, paid by or billed to disqualified member, among all household members. Count all but the disqualified or ineligible member's share as a deductible shelter, dependent care or child support expense for the remaining household members. Do not prorate the SUA.
- 05. Step 5. Do not count the disqualified member as part of the household to compute the resource (6-1-94)
- **96.** Step 6. Do not count the disqualified member when computing household size for the gross and net income limit tests.

 (6-1-94)
 - **67.** Step 7. Do not count the disqualified member to compute medical deduction. (7-1-98)

- 08. Step 8. Do not count the disqualified member to compute uncapped shelter deduction. (7-1-98)
- **69.** Step 9. Do not count the disqualified member to compute household size for Food Stamp issuance.

(BREAK IN CONTINUITY OF SECTIONS)

788. INCOME AND RESOURCES OF NONHOUSEHOLD MEMBERS.

Nonhousehold members of a Food Stamp household cannot get Food Stamps. Nonhousehold members are not counted for Food Stamp issuance or eligibility. Nonhousehold members of a Food Stamp household may include students, roomers, and live-in attendants. These non-household members cannot get Food Stamps and are not counted for Food Stamp issuance or eligibility. Income and resources of nonhousehold members are not considered available to the Food Stamp household. Actions the Department must take regarding nonhousehold members are listed below:

(6-1-94)(11-1-03)T

- **O1.** Cash Payments. Cash payments from the nonhousehold member to the household are counted as income. (6-1-94)
 - **Vendor Payments.** Vendor payments from a nonhousehold member are not counted as income. (6-1-94)
- Mared Deductible Expenses. If the household shares deductible expenses with the nonhousehold member, subtract the amount actually paid by the household as an expense the household is allowed the utility allowance for which it qualifies. If the payment cannot be distinguished, prorate the expenses among the persons paying and subtract only the household's prorated share. Do not prorate the SUA, if all persons sharing utility expenses with the Food Stamp household are excluded from the household only because they are Food Stamp incligible. Allow the Food Stamp household the entire SUA.

 (3-15-02)(11-1-03)T
- **04. Shared Income**. When the earned income of the household and the nonhousehold member is combined, household income must be determined. (6-1-94)
- a. If the household's share can be identified, eount the household's portion is counted as earned income. $\frac{\text{is counted}}{(6.1-94)}(11-1-03)\text{T}$
- **b.** If the household's share cannot be identified, *prorate* the earned income <u>is prorated</u> among all persons with earned income. *Then count f* The prorated share <u>is then counted</u> as earned income for the household. $\frac{(6-1-94)(11-1-03)T}{(6-1-94)(11-1-03)T}$

IDAPA 16 - DEPARTMENT OF HEALTH AND WELFARE

16.03.09 - RULES GOVERNING THE MEDICAL ASSISTANCE PROGRAM

DOCKET NO. 16-0309-0401

NOTICE OF RULEMAKING - TEMPORARY RULE

EFFECTIVE DATE: The effective date of the temporary rule is May 20, 2003.

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 Section(s) 56-202(b) and 56-203(g), Idaho Code.

DESCRIPTIVE SUMMARY: The following is the required finding and concise statement of the supporting reasons for temporary rulemaking:

Several widely prescribed federal legend medications have changed to non-legend status. The Department needs to be able to include non-legend drug products based upon appropriate criteria to contain Medicaid Program expenditures to meet legislative appropriation. Additionally, the Department needs some discretion to exempt drugs from prior authorization. This rule will allow the public to benefit by allowing physicians to prescribe equally effective medications at a lower cost to the Department.

TEMPORARY RULE JUSTIFICATION: Pursuant to Section 67-5226(1)(a) Idaho Code, the Governor has found that temporary adoption of the rule is appropriate for the following reason:

For the protection of the public health, safety or welfare.

ASSISTANCE ON TECHNICAL QUESTIONS: For assistance on technical questions concerning the temporary rules, contact Paul Leary at (208) 364-1840.

DATED this 18th day of December, 2003.

Sherri Kovach, Program Supervisor DHW – Administrative Procedures Section 450 West State Street, 10th Floor P.O. Box 83720 Boise, Idaho 83720-0036 (208) 334-5564 phone L(208) 332-7347 fax kovachs@idhw.state.id.us e-mail

THE FOLLOWING IS THE TEXT OF DOCKET NO. 16-0309-0401

810. PRIOR AUTHORIZATION.

- **01. Items Requiring Prior Authorization**. Pharmaceutical items requiring prior authorization include: (5-20-02)T
 - a. Amphetamines and related CNS stimulants; (5-20-02)T

DEPARTMENT OF HEALTH AND WELFARE Rules Governing the Medical Assistance Program

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Growth hormones;	(5-20-02)T
	Growth hormones;

c. Retinoids; (5-20-02)T

d. Brand name drugs when an acceptable generic form exists; (5-20-02)T

e. Medication otherwise covered by the Department for which there is a therapeutically interchangeable alternate medication identified by the Department. For purposes of Subsection 810.01, fTherapeutically interchangeable means a medication that is interchangeable with another medication within the same pharmacologic or therapeutic class and is at least as effective as the medication for which it is being interchanged. The Director may exempt a drug from the prior authorization requirement described in Subsection 810.01 based upon appropriate criteria, including the following: safety, effectiveness, clinical outcomes of the drug in comparison with other therapeutically interchangeable alternative drugs, cost, and the recommendation of the P&T committee. The Department determines, and will make available to providers, which drugs are therapeutically interchangeable using a number of resources that may include:

(5-20-02)T(5-20-02)T

i. Peer-reviewed medical literature; (5	5-20-02)T
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- ii. Randomized clinical trials; (5-20-02)T
- iii. Drug comparison studies; (5-20-02)T
- iv. Pharmacoeconomic studies; (5-20-02)T
- v. Outcomes research data; (5-20-02)T
- vi. Idaho practice guidelines; and (5-20-02)T
- vii. Consultation with practicing physicians, pharmacists, and the Idaho Medicaid Medical Director. (5-20-02)T
- **f.** Medications prescribed in quantities which exceed the Food and Drug Administration (FDA) dosage guidelines. (5-20-02)T
 - g. Lipase inhibitors. (5-20-02)T
 - h. Medications prescribed outside of the Food and Drug Administration approved indications.
 (5-20-02)T
- i. Medications excluded in Section 811 of these rules that the Department accepts for other medically approved indications. (5-20-02)T
- **O2. Request For Prior Authorization**. The prior authorization procedure is initiated by the prescriber who must submit the request to the Department in the format prescribed by the Department. (5-20-02)T
- **Notice Of Decision**. The Department will determine coverage based on this request, and will notify the client, *prescriber*, *and pharmacy*, *if known* of a denial. (5-20-02)T(5-20-02)T
- **04. Emergency Situation**. The Department will provide for the dispensing of at least a seventy two (72) hour supply of a covered outpatient prescription drug in an emergency situation as required in 42 USC 1396r-8(d)(5)(B). (5-20-02)T
- **05. Response To Request.** The Department will respond within twenty-four (24) hours to a request for prior authorization of a covered outpatient prescription drug as required in 42 USC 1396r-8(d)(5)(A). (5-20-02)T

811. EXCLUDED DRUG PRODUCTS.

The following categories and specific products are excluded from coverage by Medicaid:

(4-5-00)(5-20-02)T

- **Non-Legend Medications**. *Non-legend medications unless included in Subsection 812.02. This includes fE*ederal legend medications that change to non-legend status, as well as their therapeutic equivalents regardless of prescription, status- unless: (4-5-00)(5-20-02)T
 - <u>a.</u> They are included in Subsection 812.02; or

(5-20-02)T

- <u>b.</u> The Director determines that non-legend drug products are covered based upon appropriate criteria including the following: safety, effectiveness, clinical outcomes of the drug in comparison with other therapeutically interchangeable alternative drugs, cost, and the recommendation of the P&T committee. Therapeutically interchangeable is defined in Subsection 810.01.e. (5-20-02)T
 - **102. Legend Drugs**. Any legend drugs for which federal financial participation is not available. (4-5-00)
- **03. Diet Supplements**. Diet supplements and weight loss products, except lipase inhibitors when prior authorized as outlined in Subsection 812.03 of these rules. (5-20-02)T
- **04. Amphetamines And Related Products**. Amphetamines and related products for cosmetic purposes or weight loss. Amphetamines and related products which are deemed to be medically necessary may be covered if prior authorized as outlined in Subsection 812.03 of these rules. (5-20-02)T
 - **Ovulation/Fertility Drugs**. Ovulation stimulants, fertility drugs, and similar products. (5-20-02)T
 - **06. Impotency Aids**. Impotency aids, either as medication or prosthesis. (4-5-00)
- **07. Nicotine Products**. Nicotine chewing gum, sprays, inhalers, transdermal patches and related products. (4-5-00)
- **08. Medications Utilized For Cosmetic Purposes**. Medications utilized for cosmetic purposes or hair growth. Prior authorization may be granted for these medications if the Department finds other medically necessary indications. (4-5-00)
 - **09. Vitamins.** Vitamins unless included in Subsection 812.01. (4-5-00)

IDAPA 25 - OUTFITTERS AND GUIDES LICENSING BOARD

25.01.01 - RULES OF THE OUTFITTERS AND GUIDES LICENSING BOARD

DOCKET NO. 25-0101-0401

NOTICE OF RULEMAKING - TEMPORARY RULE

EFFECTIVE DATE: The effective date of the temporary rule is December 1, 2003.

AUTHORITY: In compliance with Section 67-5226, Idaho Code, notice is hereby given that the agency has adopted a temporary rule. The action is authorized pursuant to Section 36-2107(b) and (d), Idaho Code.

DESCRIPTIVE SUMMARY: The following is the required finding and concise statement of the supporting reasons for temporary rulemaking: The changes in Rules 044 and 045 would provide that guides are licensed to fill job duties of the respective outfitters based upon terrain and services of the guide rendered. Designations for guides would be:

Level I Ski Guide: Qualified to lead ski tours in Outfitter's Operating area. (Non-hazardous terrain)

Level II Ski Guide: În depth ski guiding experience/hazardous terrain. **Ski Guide Trainee**: Assisting guide or operator on functions of Operation.

Oualifications for License:

Level I Ski Guide (non-hazardous terrain)

One year training as a ski guides assistant in a non-hazardous backcountry setting.

Standard First Aid Training (as per guide licensing Idaho).

Level I: Field-based Avalanche Training (24 hours), knowledge of Operators Scope of Operation (logistics, services, terrain), letter of reference form the employing Outfitter. Level I Ski Guides may work in hazardous terrain under the supervision of a Level II Ski Guide.

Level II Ski Guide (hazardous terrain)

Two winter seasons training with Licensed Level II Ski Outfitter; or equivalent work experience with another. Level II Ski operations which conduct services principally in hazardous (avalanche terrain).

Advanced First Aid, WFR, or EMT (minimum 48 Hours).

Level I and Level II Field based Avalanche Training (48 Hours).

Knowledge of Outfitter's Scope of Operations: logistics, services, terrain, and letter of reference from employing Outfitter.

TEMPORARY RULE JUSTIFICATION: Pursuant to Section 67-5226(1)(a), Idaho Code, the Governor has found that temporary adoption of the rule is appropriate for the following reasons: Temporary rules have been adopted and are being implemented to protect the public health, safety and welfare. Temporary rule changes are needed because under the previous license categories for ski guiding the IOGLB issued licenses for "Backcountry Alpine Skiing" for those on downhill skiing equipment that most generally operate with snowcats or helicopters, and "Cross Country Skiing" for those that guide on touring equipment. The new ski guide rule proposal is to issue licenses based upon the type of "terrain" the applicant is guiding rather than the type of equipment that is being utilized by the outfitter or guide. This better protects the public health, safety and welfare of the public by assuring that the guide is qualified to operate on the specific terrain and not necessarily the type of equipment used.

FEE SUMMARY: The following is a specific description of the fee or charge imposed or increased: There are no fees imposed or increased.

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rules, contact: Jake Howard, Executive Director, (208) 327-7380 - FAX 327-7382.

DATED this 6th day of January, 2004.

Jake Howard, Executive Director Outfitters and Guides Licensing Board 1365 North Orchard, Suite 172 Boise, Idaho 83706 (208) 327-7380, FAX (208) 327-73820

THE FOLLOWING IS THE TEXT OF DOCKET NO. 25-0101-0401

044. CROSS COUNTRY SKI GUIDE SKIING, NON-HAZARDOUS AND HAZARDOUS TERRAIN OUTFITTER, DESIGNATED AGENT, SKI GUIDE AND SKI GUIDE TRAINEE.

Cross country ski guide applicants may be licensed in several ways, depending upon training, expertise, and skill levels. An outfitter or guide must submit an outfitter or a guide application with current outfitter operating plan, ski resume, avalanche training certificates, appropriate fees and proof of first aid card. The Board will then send this information to the Technical Advisory Committee (TAC) for evaluation. The TAC will designate or determine the scope of the outfitting operation and whether guiding principally in non-hazardous or hazardous terrain and license the outfitter as either Level I Ski Operator (non-hazardous terrain, principally sub-alpine or skiing operations in forests) or a Level II Ski Operator (hazardous terrain with a high degree of avalanche exposure). Guides are licensed to fill job duties of the respective outfitters based upon terrain and services of the guide rendered. Designations and qualifications for guides outfitters, designated agents and trainees are as follows:

(4-1-92)(12-1-03)T

- 01. Apprentice Guide (Trainee). Not qualified to guide alone, but may assist in guiding day trips under the direct leadership of a guide or lead guide, or may assist on overnight trips under the direct supervision of a lead guide only. An apprentice or trainee guide must have the same general knowledge as a ski guide, but has not passed the qualifying backcountry program in order to qualify as a guide or lead guide. Level I Ski Guide (Non-Hazardous Terrain). Is qualified to lead ski tours in the outfitter's operating area. One (1) year training as a ski guide assistant in a non-hazardous backcountry setting. Level I Ski Guides may work in hazardous terrain as a Level II Ski Guide Trainee under the supervision of a Level II Ski Guide. Level I Ski Guides are required to have:

 (4-1-92)(12-1-03)T
 - <u>a.</u> Standard First Aid training as per guide licensing in Idaho;

(12-1-03)T

- **b.** <u>Level I field-based avalanche training consisting of a twenty-four (24) hour curriculum submitted and an instructor roster; (12-1-03)T</u>
 - c. Knowledge of Outfitters Scope of Operation including logistics, services, terrain; and (12-1-03)T
 - **d.** A letter of reference from the employing outfitter.

(12-1-03)T

- 02. Guide (Associate Certified Backcountry PSIA). Qualified only to guide day trips in non-hazardous terrain or assist in guiding day or overnight trips in hazardous terrain under the direct leadership of a lead guide. To obtain a license as a guide, the applicant shall have met all the general requirements for a guide license and must have good ability to ski, leadership qualities, knowledge of route selection, map and compass reading, emergency shelter technique and equipment including a minimum first aid kit, awareness of hypothermia and avalanche conditions, and must have passed the qualifying backcountry program to become a ski guide. Level II Ski Guide (Hazardous Terrain). Has in-depth ski guiding experience on hazardous terrain and has the following qualifications:
- a. Two (2) winter seasons training with Licensed Level II Ski Outfitter or Guide or equivalent work experience with another Level II ski operation which conduct services principally in hazardous or avalanche terrain;
 (12-1-03)T
 - **b.** Advanced First Aid, WFR, or EMT of a minimum of forty-eight (48) hours;
- **c.** Level 1 and Level II field-based avalanche training consisting of at least forty-eight (48) hours curriculum with a submitted instructor roster; (12-1-03)T
 - <u>d.</u> Knowledge of the Outfitters Scope of Operation including logistics, services, terrain; and (12-1-03)T
 - **e.** A letter of reference from the employing outfitter.

(12-1-03)T

(12-1-03)T

03. Lead Guide (Full Certified Backcountry - PSIA). Fully qualified to guide day and overnight trips in any terrain. Outfitters. Outfitters who conduct winter ski-based operations may be designated as:

(4-1-92)(12-1-03)T

- a. To obtain a license as a lead cross-country ski guide, the applicant shall have passed a backcountry qualifying examination and obtained full certification from a division of the Professional Ski Instructors Association (PSIA) or from an organization with similar training and examining procedures which are acceptable to the Board, or have passed a qualified program for guiding skiing that is acceptable to the Board. The Board reserves the right to investigate the training program and examining procedures of any organization whose certification is submitted as a qualification for a license. The guide must have experience guiding in areas of equivalent terrain to the operating area(s) requested. He must have also accompanied a licensed lead ski guide on a minimum of three (3) overnight tours. A log shall be submitted giving dates, miles traveled, location of trips, and shall be signed by the lead guide. All overnight ski tours shall be under the direct leadership of a licensed lead ski guide. "Direct leadership" means the licensed lead ski guide shall accompany the group for the entire tour. Level I: self-propelled, with snowcat, or with snowmobile assisted including day skiing, hut skiing in non-hazardous terrain: (4-1-92)(12-1-03)T
- b. Level II: self-propelled including day skiing, hut skiing, multi-day expeditions, in hazardous terrain; or (12-1-03)T
 - <u>c.</u> Level II skiing operations with snowcats, helicopters, or ski from out of bounds from ski areas.

 (12-1-03)T
- Outfitters Plan Of Operation. A detailed Outfitters Plan of Operation is required which includes a plan for snowpack, terrain and avalanche safety assessment, additional transport utilized (i.e., snowmobiles, snowcats, helicopters) and instruction and training plans of guides working around related equipment. Additional safety and training standards for guides must be detailed in the operating plan. (12-1-03)T
- 05. Designated Agent. The Designated Agent must be a working Guide with the appropriate level of licensing for the operation and a minimum of five (5) years working at that level of guiding as to the scope of the operation.

 (12-1-03)T
- <u>**06.**</u> <u>Ski Guide Trainees.</u> Trainees may be selected for employment by the outfitter and are not required to have a license. A trainee may only assist a licensed guide's direct supervision and trainees may not provide guided services to clients. Trainees must have thirty (30) days experience with a licensed ski guide in the outfitter's operating area and must meet all other guide requirements of Section 044 prior to submitting a guide application. (12-1-03)T

045. BACKCOUNTRY ALPINE SKI GUIDE (RESERVED).

Before conducting operations, all backcountry alpine ski guides must be licensed by the Board and employed by an outfitter who has an operating plan approved by the land manager. Guides must meet the following requirements:

(4-1-92)

- 01. Avalanche Training. Have at least forty (40) hours avalanche training at a Forest Service school, an American Avalanche Institute, Sierra Avalanche seminars, or the equivalent.

 (4-1-92)
 - **02.** Radio Communications. Have radio communication knowledge. (4-1-92)
 - 03. Skier Safety Rules. Have skier safety rules training. (4-1-92)
- **94.** Other. Have passed the regular backcountry qualifying examination and obtained full certification from a division of the Professional Ski Instructors Association (PSIA) or a qualified program acceptable to the Board.

(4-1-92)

IDAPA 57 - SEXUAL OFFENDER CLASSIFICATION BOARD

57.01.01 - RULES GOVERNING THE SEXUAL OFFENDER CLASSIFICATION BOARD DOCKET NO. 57-0101-0401

NOTICE OF PUBLIC HEARING AND EXTENSION OF WRITTEN COMMENT PERIOD

AUTHORITY: In compliance with Sections 67-5221(1), Idaho Code, notice is hereby given that this agency has scheduled a public hearing and extended the period of public comment. The action is authorized pursuant to Section 18-8314, Idaho Code.

PUBLIC HEARING SCHEDULE: A public hearing concerning this rulemaking will be held as follows:

Saturday, February 21, 2004 1:00 p.m. - 3:00 p.m. Department of Correction Basement Training Room Syringa Bank Building 1299 N. Orchard St., Boise, ID 83706

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 summary of this action and the text of the proposed rule can be found in Idaho Administrative Bulletin, Volume 04-1 dated January 7, 2004, pages 201 through 213.

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the temporary and proposed rule, contact Kathy Baird, Management Assistant, at (208) 658-2149.

Anyone may submit written comments regarding the proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before February 18, 2004.

DATED this 13th day of January, 2004.

Kathy Baird Management Assistant Sexual Offender Classification Board 1299 N. Orchard St., Suite 110 Boise, ID 83706 (208) 658-2149 phone (208) 327-7102 fax

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LEGAL NOTICE

Summary of Proposed Rulemakings

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 new issue of the state Administrative Bulletin.

Because of the moratorium on proposed rulemaking during the legislative session, there are no proposed rules being promulgated or published in this month's Bulletin

Please refer to the Idaho Administrative Bulletin, **February 4, 2004, Volume 04-2** for notices and text of all rulemakings, public hearing schedules, Governor's executive orders, and agency contact names.

Citizens of your county can view all issues of the Idaho Administrative Bulletin at the county law libraries.

Copies of the Administrative Bulletin and other rules publications are available for purchase. For subscription information and ordering call (208) 332-1820 or write the Office of Administrative Rules, Department of Administration, 650 W. State St., Room 100, Boise, Idaho 83720-0306. Visa and Mastercard accepted.

The Idaho Administrative Bulletin and Administrative Code are available on-line at: http://www2.state.id.us/adm/adminrules/

CUMULATIVE RULEMAKING INDEX OF IDAHO ADMINISTRATIVE RULES

FOR THE ABOVE LINK TO WORK YOU HAVE TO BE CONNECTED TO THE INTERNET

This index tracks the history of all agency rulemakings from 1993 to the present. It includes all rulemaking activities on each chapter of rules and includes negotiatied, temporary, proposed, pending and final rules, public hearing notices and vacated rulemaking notices.

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