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PREFACE

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

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

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

CITATION TO THE IDAHO ADMINISTRATIVE BULLETIN

The Bulletin is identified by the calendar year and issue number. For example, Bulletin 19-1 refers to the first Bulletin issued in calendar year 2019; Bulletin 20-1 refers to the first Bulletin issued in calendar year 2020. Volume numbers, which proceed from 1 to 12 in a given year, correspond to the months of publication, i.e.; Volume No. 19-1 refers to January 2019; Volume No. 20-2 refers to February 2020; and so forth. Example: The Bulletin published in January 2019 is cited as Volume 19-1. The December 2019 Bulletin is cited as Volume 19-12.

RELATIONSHIP TO THE IDAHO ADMINISTRATIVE CODE

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

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

THE DIFFERENT RULES PUBLISHED IN THE ADMINISTRATIVE BULLETIN

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

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

2. PROPOSED RULEMAKING

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

3. TEMPORARY RULEMAKING

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

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

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

4. PENDING RULEMAKING

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

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

5. FINAL RULEMAKING

A final rule is a rule that has been adopted by an agency under the regular rulemaking procedures and is of full force and effect.
HOW TO USE THE IDAHO ADMINISTRATIVE BULLETIN

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

IDAPA 38.05.01.200.02.c.ii.

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

“38.” refers to the Idaho Department of Administration

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

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

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

“02.” refers to Subsection 200.02.

“c.” refers to Subsection 200.02.c.

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

DOCKET NUMBERING SYSTEM

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

“DOCKET NO. 38-0501-1901”

“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).

“1901” denotes the year and sequential order of the docket being published; in this case the numbers refer to the first rulemaking action published in calendar year 2019. A subsequent rulemaking on this same rule chapter in calendar year 2019 would be designated as “1902”. The docket number in this scenario would be 38-0501-1902.

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)
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*Last day to submit a proposed rulemaking before moratorium begins AND last day to submit a pending rule to be reviewed by upcoming legislature.

**Last day to submit a proposed rule to remain on course for rulemaking to be completed and submitted for review by upcoming legislature.*

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<td>Architectural Examiners, Board of (24.01)</td>
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<td>Athletic Commission, State (24.02)</td>
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<td>Barber and Cosmetology Services Licensing Board (24.28)</td>
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<td>Building Safety, Division of (24.39)</td>
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<td>Chiropractic Physicians, Board of (24.03)</td>
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<td>Contractors Board, Idaho State (24.21)</td>
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<td>Engineers and Land Surveyors, Board of Licensure of Professional (24.32)</td>
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<td>Shorthand Reporters Board, Idaho Certified (24.29)</td>
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<td>Social Work Examiners, Board of (24.14)</td>
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<td>Speech, Hearing and Communication Services Licensure Board (24.23)</td>
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| IDAPA 43 | Oilseed Commission, Idaho                                |

| IDAPA 24.35 | Outfitters and Guides Licensing Board |

| IDAPA 50 | Pardons and Parole, Commission of                        |

| IDAPA 26 | Parks and Recreation, Idaho Department of                |

<p>| IDAPA 24.36 | Pharmacy, Board of                                      |</p>
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<tr>
<th>IDAPA Number</th>
<th>State Agency Name</th>
<th>Corresponding IDAPA Numbers</th>
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| IDAPA 11     | **Police, Idaho State** | Alcohol Beverage Control (11.05)  
Commercial Vehicle Safety (11.13)  
Forensic Laboratory (11.03)  
Motor Vehicles (11.07)  
Peace Officer Standards and Training Council (11.11)  
Public Safety and Security Information (11.10)  
Racing Commission (11.04) |
| IDAPA 29     | **Potato Commission, Idaho** |
| IDAPA 61     | **Public Defense Commission, State** |
| IDAPA 59     | **Public Employee Retirement System of Idaho (PERSI)** |
| IDAPA 31     | **Public Utilities Commission** |
| IDAPA 56     | **Rangeland Resources Commission, Idaho (no current rules)** |
| IDAPA 24.37  | **Real Estate Commission, Idaho** |
| IDAPA 34     | **Secretary of State, Office of the** |
| IDAPA 57     | **Sexual Offender Management Board** |
| IDAPA 24.29  | **Shorthand Reporters Board, Idaho Certified** |
| IDAPA 60     | **Soil and Water Conservation Commission, Idaho State** |
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| IDAPA 35     | **Tax Commission, State** |
| IDAPA 39     | **Transportation Department, Idaho** |
| IDAPA 54     | **Treasurer, Office of the State** |
| IDAPA 21     | **Veterans Services, Division of** |
| IDAPA 24.38  | **Veterinary Medicine, Board of** |
| IDAPA 47     | **Vocational Rehabilitation, Division of** |
| IDAPA 37     | **Water Resources, Department of** |
| IDAPA 42     | **Wheat Commission, Idaho** |
WHEREAS, Congress has passed the Coronavirus Aid, Relief, and Economic Security (CARES) Act (P.L. 116-136), which provided the State of Idaho $1.25 billion through the Coronavirus Relief Fund for qualifying expenses; and

WHEREAS, on April 30, 2020, the Board of Examiners approved, pursuant to Idaho Code § 67-3516(2), non-cognizable spending authority for the Governor’s Office in fund 0345 for the $1.25 billion for the time period of March 1, 2020, through December 30, 2020; and

WHEREAS, on June 30, 2020, the United States Department of Treasury (“U.S. Treasury”) issued guidance for state, territorial, local, and tribal governments on the proper uses of the Coronavirus Relief Fund; and

WHEREAS, the U.S. Treasury guidance (“U.S. Treasury guidance”) outlines a non-exclusive list of eligible expenditures, including expenditures for payroll expenses for public safety, public health, health care, human services, and similar employees whose services are substantially dedicated to mitigating or responding to the COVID-19 public health emergency; and

WHEREAS, the U.S. Treasury guidance states that as a matter of administrative convenience, the entire public health and public safety payroll costs may be presumed to be substantially dedicated to mitigating or responding to the COVID-19 public health emergency; and

WHEREAS, the U.S. Treasury Secretary and senior staff of the U.S. Treasury are quoted in various outlets stating that this presumption of substantial dedication to COVID-19 efforts exists regardless of whether or not the payroll costs were accounted for in the budget most recently approved as of March 27, 2020; and

WHEREAS, the U.S. Treasury states that the funds may be transferred from the state to units of local government with the addition of certain restrictions to satisfy the requirements of the CARES Act and guidance; and

WHEREAS, the U.S. Treasury notes that for payments to be deemed necessary, they must be reasonably necessary for their intended use in the reasonable judgment of the government officials responsible for spending Fund payments;

WHEREAS, in Executive Order 2020-07, I established the Coronavirus Financial Advisory Committee (CFAC) to make recommendations to me for prioritizing the use of Coronavirus Relief Funds; and

WHEREAS, CFAC is comprised of a broad group of stakeholders, including legislators, representatives of local and tribal governments, and representatives from the Idaho Association of Cities and Association of Idaho Counties; and

WHEREAS, on May 4, 2020, I approved a recommendation from CFAC to allocate $94 million to local and tribal governments to cover their direct COVID-19 expenses, making Idaho one of the first states to provide local governments access to the fund, eliciting praise from the Trump Administration; and

WHEREAS, local governments have expressed that this initial $94 million allocation is sufficient for and, in many cases in excess of, their direct COVID-19 costs and relatively little expenses have been incurred to date; and
WHEREAS, on May 28, 2020, CFAC sent a letter to U.S. Treasury staff outlining the potential use of the Fund for a Public Safety Grant Initiative (the Initiative) with restrictions to ensure compliance with U.S. Treasury guidance; and

WHEREAS, CFAC convened on June 11, 2020, and determined that, in its judgment, the expenditure of Coronavirus Relief Funds on local public safety payroll expenses was necessary to respond to COVID-19 and made unanimous recommendations to me on the expenditure of up to $200 million with eligibility criteria targeted to the U.S. Treasury guidance; and

WHEREAS, CFAC voted unanimously to allow local governments to voluntarily apply for a grant to receive this additional allocation of funds, which is on top of the original $94 million allocated to local governments; and

WHEREAS, CFAC established parameters for voluntary participation, aimed at advancing compliance with critical areas of U.S. Treasury guidance, namely (1) ensuring the receipt of this voluntary allocation does not constitute revenue replacement, which is not a permissible direct use of fund payments; and (2) ensuring that the allocation does not create a windfall that is used for non-COVID-19 related purposes; and

WHEREAS, CFAC further saw that these voluntary restrictions could advance other areas of U.S. Treasury guidance, namely the allowance to provide economic support to those suffering from the widespread COVID-19 related closures and expenses; and

WHEREAS, on June 11, 2020, I accepted the recommendation of CFAC and announced the program known as the Public Safety Grant Initiative that will provide funding for public safety payroll expenses to city and county governments that agree to participate in the Initiative and provide the resulting savings as property tax relief to the taxpayers of the participating units of local government by foregoing the taxes that would otherwise traditionally have been collected; and

WHEREAS, on July 6, 2020, CFAC sent an updated letter to U.S. Treasury re-outlining the proposed Public Safety Initiative in the context of U.S. Treasury guidance; and

WHEREAS, on July 16, 2020, I met with senior U.S. Treasury and White House staff in Washington, D.C., to discuss the Initiative and received positive reinforcement that the proposed plan aligns with U.S. Treasury guidance; and

WHEREAS, 54 cities and 28 counties submitted Letters of Intent to participate in this voluntary grant program; and

WHEREAS, the Initiative would provide a grant to these local governments in an amount that would cover approximately 42-percent of their public safety budget, allowing the funds to be targeted to those frontline public safety and public health officials who are substantially dedicated to COVID-19 mitigation and response, minimizing the potential for layoffs or furloughs; and

WHEREAS, local governments have the ability to finalize their participation in this voluntary grant program by discussing it in open, public meetings where public testimony on the merits may be taken;

WHEREAS, I have agreed with the CFAC unanimous recommendation that this expenditure in necessary for its intended use; and

WHEREAS, on August 6, 2020, I issued Executive Order No. 2020-15 to implement the Initiative and am now issuing this amended Executive Order to further define the Initiative and ensure its compliance with the CARES Act; and

WHEREAS, on September 2, 2020, U.S. Treasury issued updated guidance, noting that public health and safety payroll costs are both substantially dedicated to COVID-19, and are thus for a substantially different use than accounted for in the most recent budget. Further, Treasury defined a non-exclusive list of positions that meet this presumption; and
WHEREAS, Treasury articulated its intent that the presumption is to help minimize layoffs or furloughs in the face of budget pressure. This aligns with the primary goal of the Initiative given the budget uncertainty many Idaho local governments face. Stable coverage of a large portion of public health and safety payroll costs will help all areas of Idaho to be prepared to respond to and mitigate the COVID-19 pandemic and avoid layoffs and furloughs while not increasing the burden on local taxpayers during uncertain times.

NOW, THEREFORE, I Brad Little, Governor of the State of Idaho, by virtue of the authority vested in me by the Constitution and laws of this state do hereby order:

The Idaho State Tax Commission shall ensure that the budget and levy effects of the Initiative remain neutral those cities and counties that choose to participate. To accomplish this, the Idaho State Tax Commission shall not consider any subtraction from a participating entity’s 2020 operating budget due to participation in this program when determining 2021 budget limitations according to Idaho Code § 63-802.

Urban renewal agencies that would otherwise lose funds due to the lowered levy rates of participating cities and counties may be treated neutrally at the discretion of the participating local government. In such case, the participating local government may use tax dollars collected by the government to maintain neutrality, not CARES Act funds.

The Idaho State Tax Commission shall make such adjustments to the L-2 form as necessary to verify that participating cities and counties have met the requirements of the Initiative by certification.

IN WITNESS WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Idaho in Boise on this 14th day of September in the year of our Lord two thousand and twenty.

BRAD LITTLE
GOVERNOR

LAWERENCE DENNEY
SECRETARY OF STATE
IDAPA 08 – STATE BOARD OF EDUCATION
08.02.01 – RULES GOVERNING ADMINISTRATION
DOCKET NO. 08-0201-2001
NOTICE OF RULEMAKING – TEMPORARY AND PROPOSED RULE

EFFECTIVE DATE: The effective date of the temporary rule is August 26, 2020.

AUTHORITY: In compliance with Sections 67-5221(1) and 67-5226, Idaho Code, notice is hereby given that this agency has adopted a temporary rule, and proposed rulemaking procedures have been initiated. The action is authorized pursuant to Article IX, Section 2, Idaho Constitution and under Sections 33-105, 33-107, 33-116, 33-1001, 33-1002, 33-1004, 33-1004B, 33-1612, and 33-1027, Idaho Code.

PUBLIC HEARING SCHEDULE: Public hearing(s) concerning this rulemaking will be scheduled if requested in writing by twenty-five (25) persons, a political subdivision, or an agency, not later than close of business on October 21, 2020.

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

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

HB 293 (2019) requires the State Board of Education to promulgate rules establishing how enrollment would be counted and reported to the state for students who attend public schools full or part-time or attend more than one public school at the same time. This bill also established additional provisions on how school districts and charter school will report on the student populations based on specific student characteristics and how school districts use appropriated funds. The intent of the negotiated rulemaking is to establish a methodology for reporting student enrollment and provide any additional clarification identified by school districts for meeting the requirements established in HB 293 (2019). Additional amendments will explore methodologies for reporting average daily attendance when students are receiving virtual or blended instruction, removing the high school equivalency certificate application requirement and for making technical corrections or cleanup to existing provisions pertaining to funding and student counts that are identified during the negotiated rulemaking process as well as the removal of outdated or obsolete sections.

TEMPORARY RULE JUSTIFICATION: Pursuant to Sections 67-5226(1)(b) and (c), Idaho Code, the Governor has found that temporary adoption of the rule is appropriate for the following reasons: This rule will establish a methodology for school districts and charter schools to report student that are receiving instruction regardless of the methodology of instruction (in-person or virtual). Due to the pandemic and the need for school to be able to transition between in-person and remote instruction, the current methodology only accounts of traditional in-person courses and full-time virtual programs. Additionally, HB293 (2019) established a requirement for the Board to identify a methodology for enrollment reporting. The methodology was run as a temporary rule in 2019 to establish its validity and now needs to be established through a temporary and proposed rules, the language has been slightly modified from the 2019 version to account for areas of improvement that were identified during the pilot run of the data in 2019.

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

FISCAL IMPACT: The following is a specific description, if applicable, of any negative fiscal impact on the state general fund greater than ten thousand dollars ($10,000) during the fiscal year: The change in reporting methodology, based on the 2019-2020 FTE Enrollment report would result in approximately 2,000 additional full time students. The potential impact would vary depending on how the students were grouped in individual schools and could be mitigated through the appropriation process.

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the temporary and proposed rule, Tracie Bent at tracie.bent@osbe.idaho.gov or (208) 332-1582.

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 the close of business on October 28, 2020.

Dated this 28th day of October, 2020.

Tracie Bent
Chief Planning and Policy Officer
State Board of Education
650 W. State Street
PO Box 83720
Boise, ID and 83720-0037
Phone: (208) 332-1582
Fax: (208) 334-2632

THE FOLLOWING IS THE TEMPORARY RULE AND THE PROPOSED TEXT OF DOCKET NO. 08-0201-2001
(Only Those Sections With Amendments Are Shown.)

08.02.01 – RULES GOVERNING ADMINISTRATION

(BREAK IN CONTINUITY OF SECTIONS)

008. DEFINITIONS.

01. Course. A unit of instruction that may be determined based on the amount of instructional time or predetermined level of content and course outcomes. (8-26-20)

02. Virtual Course. A course where instruction is provided in an on-line or virtual format and does not necessarily include face-to-face instruction. (8-26-20)

0049. -- 049. (RESERVED)

(BREAK IN CONTINUITY OF SECTIONS)

250. PUPIL ACCOUNTING AND REQUIRED INSTRUCTIONAL TIME.
(Section 33-512, Idaho Code) (4-1-97)

01. Required Instructional Time. Excluding transportation to and from school, lunch periods, passing times, and recess, schools must schedule at least the following instructional times: kindergarten, four hundred fifty
(450) hours per year or equivalent amount of instruction through an online, distance, or blended learning format; grades one through three (1-3), eight hundred ten (810) hours per year or equivalent amount of instruction through an online, distance, or blended learning format; grades four through eight (4-8), nine hundred (900) hours per year or equivalent amount of instruction through an online, distance, or blended learning format; and grades nine through twelve (9-12), nine hundred ninety (990) hours per year or equivalent amount of instruction through an online, distance, or blended learning format. The equivalent amount of instruction shall be based on the amount of time reported for the same course or amount of coursework delivered in an in-person setting. (4-1-97)

02. Required Attendance. All pupils will complete four (4) years of satisfactory attendance in grades nine through twelve (9-12) to graduate from an accredited high school, except those who are approved for early graduation. (4-1-97)

03. Day in Session When Counting Pupils in Attendance. (4-1-97)

a. A school day for grades one through twelve (1-12) may be counted as a “day in session” when the school is open in session and students are under the guidance and direction of teachers in the teaching process for not less than four (4) hours or its equivalent of instruction per day. Lunch periods, breaks, passing time and recess will not be included in the four (4) hours. For kindergarten, each session will be at least two and one-half (2 1/2) hours per day. (4-1-97)

b. Half-day Session. A half-day in session occurs when the students in grades one through twelve (1-12) are under the guidance and direction of teachers in the teaching process for a minimum of two and one-half (2 1/2) hours or its equivalent of instruction or the teachers are involved in staff development activities for not less than two and one-half (2 1/2) hours. (4-1-97)

c. Teacher In-service Activities. For grades one through twelve (1-12), not more than twenty-two (22) hours may be utilized for teacher in-service activities, based on the district approved calendar. In the event a school district chooses to utilize full days instead of half-days, the attendance reported for these full days will be the average of the attendance for the other days of that same week. (4-1-97)

04. Day of Attendance - Kindergarten. A day of attendance for a kindergarten pupil is one in which a pupil is physically present for a period of two and one-half (2 1/2) hours under the direction and guidance of a teacher while school is in session or under homebound instruction. A homebound student is one who is unable to attend school for at least ten (10) consecutive days due to illness, accident or an unusual disabling condition. Attendance will be reported in half-day increments. Attendance reports for any day in the school year will reflect only those students physically present. Particularly, enrollment figures are not to be used for the beginning nor closing weeks of school. (Section 33-1001(5), Idaho Code.) (4-1-97)

05. Day of Attendance (ADA) - Grades One Through Twelve (1-12). A day of attendance is one in which a pupil is physically present for the full day under the guidance and direction of a teacher or other authorized school district personnel while school is in session or is a homebound student under the instruction of a teacher employed by the district in which the pupil resides, with the exception as stated in “day in session” above. A homebound student is one who is unable to attend school for at least ten (10) consecutive days due to illness, accident or an unusual disabling condition. Attendance will be reported in full or half-days. Attendance reports for any day in the school year will reflect only those students physically present or under homebound instruction. (Section 33-1001(4), Idaho Code) (4-1-97)

06. Average Daily Attendance. Average daily attendance will be computed by averaging the full-time equivalent enrollment by week for students receiving instruction. To be considered as a student receiving instruction the student must have regular contact with the applicable instructional or pupil service staff member and be completing assignments as applicable to the grade range and course the student is enrolled in. In a given school year, the annual average daily attendance for a given school is the aggregate scheduled days of attendance divided by the number of days school was actually in session. (Section 33-1001(2), Idaho Code) (4-1-97)

07. Full-Time Equivalent (FTE) Enrollment Reporting. (8-26-20)
a. Kindergarten students enrolled in one LEA for a total number of courses that equal six hundred (600) or more minutes per week shall equal point five (0.5) FTE. Grade one (1) through grade twelve (12) students enrolled in one LEA for a total number of courses that equal one thousand, two hundred (1,200) or more minutes per week shall equal one (1) FTE.

b. Kindergarten students enrolled in one (1) or more LEAs for a total number of courses at all LEAs that equal six hundred (600) minutes per week or less, the FTE shall be based on the percentage of time each student’s courses are of six hundred (600) minutes. Grade one (1) through grade twelve (12) students enrolled in one or more LEAs for a total number of courses at all LEAs that equal one thousand, two hundred (1,200) minutes per week or less, the FTE shall be based on the percentage of time each student’s courses are of one thousand, two hundred (1,200) minutes.

c. Kindergarten students enrolled in more than one (1) LEA for a total number of courses at all LEAs that equal six hundred (600) or more minutes per week and less than or equal to seven hundred fifty (750) minutes the FTE shall be fractionalized based on percentage of time for which the student is enrolled. Grade one (1) through grade twelve (12) students enrolled in more than one LEA for a total number of courses at all LEAs that equal one thousand, two hundred (1,200) or more minutes per week and less than or equal to the respective amounts in the following subsections the FTE shall be fractionalized based on percentage of time for which the student is enrolled:

i. Kindergarten: seven hundred fifty (750) minutes.

ii. Grade one (1) through grade three (3): one thousand, three hundred fifty (1,350) minutes.

iii. Grade four (4) through grade eight (8): one thousand, five hundred (1,500) minutes.

iv. Grade nine (9) through grade twelve (12): one thousand, six hundred fifty (1,650) minutes.

d. Students enrolled in more than one LEA for a total number of courses at all LEAs that equal more than the following minutes the FTE shall be based on the percentage of time for which the student is enrolled:

i. Grade one (1) through grade three (3): one thousand, three hundred fifty (1,350) minutes.

ii. Grade four (4) through grade eight (8): one thousand, five hundred (1,500) minutes.

iii. Grade nine (9) through grade twelve (12): one thousand, six hundred fifty (1,650) minutes.

e. Courses in LEAs with block scheduling that results in students attending courses for a period greater than one (1) week in order to encompass all courses the student is enrolled in for the term will use average minutes per week over the applicable time period to determine the courses minutes per week.

f. Students enrolled in an alternative summer school or alternative night school program of two hundred twenty-five (225) or more hours of instruction may be counted as an additional point two five (.25) FTE.

g. Students enrolled in an alternative summer school or night school program of less than two hundred twenty-five (225) hours FTE will be determined based on the proportional share of two hundred twenty-five (225) hours the program consists of.

h. Students enrolled in an alternative summer school or night school program of less than two hundred twenty-five (225) hours FTE will be determined based on the proportional share of two hundred twenty-five (225) hours the program consists of.

i. Students enrolled in more than one LEA in grade seven (7) through grade twelve (12) shall count enrollment at all LEAs for determining eligibility of overload courses identified in Sections 33-4601 and 33-4602, Idaho Code.
650. GENERAL EDUCATION DEVELOPMENT TESTS/IDAHO HIGH SCHOOL EQUIVALENCY CERTIFICATE.

The primary objective of the State Board of Education is to have all students complete their formal education and graduate from high school. However, students who drop out of school and believe it is in their best interest to take the (General Education Development) GED test may do so under the following conditions and, upon successful completion of all GED requirements, may apply for an Idaho High School Equivalency Certificate (HSEC). (4-1-97)

01. General Education Development Tests. General Education Development (GED) tests are given by approved testing centers for a statewide fee set by the Idaho Division of Career Technical Education. Candidates must make the minimum score for passing the GED test as established by the GED Testing service. (3-20-14)

02. Age Criteria. The applicant must satisfy one (1) of the following age criteria: (4-1-97)

a. The applicant must be at least eighteen (18) years of age; (4-1-97)

b. The applicant may be sixteen (16) or seventeen (17) years of age and be one (1) year or more behind in credits earned, expelled, recommended by the school, pregnant, or a parent. In such cases, the applicant is eligible if the applicant’s school verifies in writing that the student meets one of the above criteria and this verification is on file at the testing center prior to any testing. The school may give its verification only after the applicant and his or her parent or guardian submit in writing a request for the applicant to take the GED tests and the applicant and the applicant’s parent or guardian have met with school officials to review and discuss the request. (In cases where the applicant is not living with a parent or guardian, the parent or guardian’s verification is not necessary.); (4-1-97)

c. The applicant may be sixteen (16) or seventeen (17) years of age and be entering college, the military, or an employment training program, enrolled in an Adult Basic Education Program, enrolled in the Job Corps, or incarcerated. In such cases, the applicant is eligible if the institution involved applies in writing for the applicant to take the GED tests and this application is on file at the testing center prior to any testing. (3-20-14)

03. Proof of Identity. Test takers must present proof of identification that shows legal name, date of birth, signature, address and photograph. Valid drivers’ licenses, passports, military, and other forms of government-issued identification are acceptable. Two (2) forms of identification may be provided to meet these criteria. (3-20-14)

04. Idaho High School Equivalency Certificate. The State Department of Education will issue an Idaho High School Equivalency Certificate (HSEC) to eligible applicants. The normal fee for issuing a certificate is ten dollars ($10); however, this fee will be waived for military service personnel and veterans. To be eligible to receive an HSEC, an applicant must submit the following documents to the Division of Career Technical Education:

a. An official report of GED test results showing successful completion of all requirements applicable to the version of the GED test taken by the applicant. Test scores are accepted as official only when reported directly by the State’s approved vendor for transcripts and records management, the Transcript Service of the Defense Activity for Non-Traditional Education Support (DANTES), or, in special cases, the GED Testing Service. (3-25-16)

b. Individuals who took the exam prior to January 1, 2014, must also furnish documentation that they met the American Government requirement of the State of Idaho. This requirement may be met by resident study in high school or college, correspondence study from an accredited university, DANTES, or by successfully passing the American Government test furnished by the testing center. (3-25-16)

c. A completed form DD295 on all service personnel. This form is not required of veterans and non-veteran adults. (4-1-97)
d. A copy of a discharge if the applicant is a veteran of military service. (4-1-97)

e. Applicants should submit their request using the form furnished by the Division of Career Technical Education, along with the ten dollar ($10) processing fee and appropriate documentation of above requirements. After the applicant completes this form and pays the ten dollar ($10) processing fee, the applicant will be awarded an Idaho High School Equivalency Certificate (HSEC). (3-25-16)
AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Article IX, Section 2, Idaho Constitution and under Sections 33-105, 33-107, 33-1002B, 33-1201A, and 33-1202, Idaho Code.

PUBLIC HEARING SCHEDULE: Public hearing(s) concerning this rulemaking will be scheduled if requested in writing by twenty-five (25) persons, a political subdivision, or an agency, not later than the close of business on October 21, 2020.

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

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking: This rule will make two amendments to IDAPA 08.02.02 to bring it into alignment with HB 523 (2020) and SB 1329 (2020). This rule will update Section 028. Professional Endorsement, to also reference the new Advanced Professional Endorsement, pursuant to Section 33-1201A, Idaho Code, as amended by HB 523 (2020). The second amendment will amend Subsection 015.06. Industry-Based Occupational Specialist Certificate (CTE Certification) to align with Section 33-2205, Idaho Code, as amended by SB 1329 (2020), setting provisions for career technical educator degree based certification, and hours of professional experience. Additional technical correction or the elimination of obsolete language that are identified during the negotiated rulemaking will also be considered.

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

FISCAL IMPACT: The following is a specific description, if applicable, of any negative fiscal impact on the state general fund greater than ten thousand dollars ($10,000) during the fiscal year resulting from this rulemaking: These amendments update certification requirements to align with statutory changes and will have no fiscal impact outside of the fiscal impact due to the applicable statutes.

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(1), Idaho Code, negotiated rulemaking was conducted. The Notice of Intent to Promulgate Rules - Negotiated Rulemaking was published in the September 2, 2020 Idaho Administrative Bulletin, 20-9, page 17.

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Tracie Bent at tracie.bent@osbe.idaho.gov or (208) 332-1582.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before the close of business on October 28, 2020.

Dated this 28th day of October, 2020.

Tracie Bent
Chief Planning and Policy Officer
State Board of Education
650 W. State Street
PO Box 83720
Boise, ID and 83720-0037
Phone: (208) 332-1582
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015. IDAHO EDUCATOR CREDENTIAL.
The State Board of Education authorizes the State Department of Education to issue certificates and endorsements to those individuals meeting the specific requirements for each area provided herein. (3-25-16)

01. Standard Instructional Certificate. A Standard Instructional Certificate makes an individual eligible to teach all grades, subject to the grade ranges and subject areas of the valid endorsement(s) attached to the certificate. A standard instructional certificate may be issued to any person who has a baccalaureate degree from an accredited college or university and who meets the following requirements: (3-29-17)

a. Professional education requirements: (3-29-17)
   i. Earned a minimum of twenty (20) semester credit hours, or thirty (30) quarter credit hours, in the philosophical, psychological, methodological foundations, instructional technology, and in the professional subject matter, which shall include at least three (3) semester credit hours, or four (4) quarter credit hours, in reading and its application to the content area; (3-29-17)
   ii. The required minimum credit hours must include at least six (6) semester credit hours, or nine (9) quarter credit hours, of student teaching in the grade range and subject areas as applicable to the endorsement; and (3-29-17)

b. Completed an approved educator preparation program and have an institutional recommendation from an accredited college or university specifying the grade ranges and subjects for which they are eligible to receive an endorsement in; (4-11-19)

c. Individuals seeking endorsement must complete preparation in at least two (2) fields of teaching. One (1) of the teaching fields must consist of at least thirty (30) semester credit hours, or forty-five (45) quarter credit hours and a second field of teaching consisting of at least twenty (20) semester credit hours, or thirty (30) quarter credit hours. Preparation of not less than forty-five (45) semester credit hours, or sixty-seven (67) quarter credit hours, in a single subject area may be used in lieu of the two (2) teaching field requirements; (3-20-20)

d. Proficiency in areas noted above is measured by completion of the credit hour requirements provided herein. Additionally, each candidate must meet or exceed the state qualifying score on the state board approved content area and pedagogy assessments. (3-29-17)

e. The Standard Instructional Certificate is valid for five (5) years. Six (6) semester credit hours are required every five (5) years in order to renew the certificate. (3-29-17)

02. Pupil Service Staff Certificate. Persons who serve as school counselors, school psychologists, speech-language pathologists, school social workers, school nurses and school audiologists are required to hold the Pupil Service Staff Certificate, with the respective endorsement(s) for which they qualify. Persons who serve as an occupational therapist or physical therapist may be required, as determined by the local educational agency, to hold the Pupil Service Staff Certificate with respective endorsements for which they qualify. (3-28-18)

a. School Counselor (K-12) Endorsement. To be eligible for a Pupil Service Staff Certificate - School Counselor (K-12) endorsement, a candidate must have satisfied the following requirements. The Pupil Service Staff Certificate with a School Counselor (K-12) endorsement is valid for five (5) years. Six (6) semester credit hours are required every five (5) years in order to renew the endorsement. (3-28-18)
   i. Hold a master's degree and provide verification of completion of an approved program of graduate
study in school counseling, including sixty (60) semester credits, from a college or university approved by the Idaho State Board of Education or the state educational agency of the state in which the program was completed. The program must include successful completion of seven hundred (700) clock hours of supervised field experience, seventy-five percent (75%) of which must be in a K-12 school setting. This K-12 experience must be in each of the following levels: elementary, middle/junior high, and high school. Previous school counseling experience may be considered to help offset the field experience clock hour requirement; and

ii. An institutional recommendation is required for a School Counselor (K-12) endorsement.

b. School Counselor – Basic (K-12) Endorsement.

i. Individuals serving as a school counselor pursuant to Section 33-1212, Idaho Code, shall be granted a Pupil Service Staff Certificate with a School Counselor – Basic (K-12) endorsement. The endorsement is valid for five (5) years or until such time as the holder no longer meets the eligibility requirements pursuant to Section 33-1212, Idaho Code. Six (6) semester credit hours are required every five (5) years in order to renew the endorsement.

ii. Individuals who received their endorsement pursuant to Section 33-1212, Idaho Code, prior to July 1, 2018, will be transitioned into the School Counselor – Basic (K-12) endorsement. Renewal date will remain the same as the initial credential.

c. School Psychologist Endorsement. This endorsement is valid for five (5) years. In order to renew the endorsement, six (6) professional development credits are required every five (5) years. The renewal credit requirement may be waived if the applicant holds a current valid National Certification for School Psychologists (NCSP) offered through the National Association of School Psychologists (NASP). To be eligible for initial endorsement, a candidate must complete a minimum of sixty (60) graduate semester credit hours which must be accomplished through one (1) of the following options:

i. Completion of an approved thirty (30) semester credit hour, or forty-five (45) quarter credit hours, master's degree in education or psychology and completion of an approved thirty (30) semester credit hour, or forty-five (45) quarter credit hour, School Psychology Specialist Degree program, and completion of a minimum of twelve hundred (1,200) clock-hour internship within a local education agency under the supervision of the training institution and direct supervision of a certificated school psychologist;

ii. Completion of an approved sixty (60) semester credit hour, or ninety (90) quarter credit hour, master's degree program in School Psychology, and completion of a minimum of twelve hundred (1,200) clock-hour internship within a local education agency under the supervision of the training institution and direct supervision of a certificated school psychologist;

iii. Completion of an approved sixty (60) semester credit hour, or ninety (90) quarter credit hour, School Psychology Specialist degree program which did not require a master's degree as a prerequisite, with laboratory experience in a classroom, which may include professional teaching experience, student teaching or special education practicum, and completion of a minimum twelve hundred (1,200) clock-hour internship within a local education agency under the supervision of the training institution and direct supervision of a certificated school psychologist; and

iv. Earn a current and valid National Certification for School Psychologists (NCSP) issued by the National Association of School Psychologists (NASP).

d. Interim Endorsement – School Psychologist. This endorsement will be granted for those who do not meet the educational requirements but hold a master’s degree in school psychology and are pursuing an educational specialist degree. This non-renewable endorsement will be issued for three (3) years while the applicant is meeting the educational requirements.

e. School Nurse Endorsement. This endorsement is valid for five (5) years. Six (6) credits are required every five (5) years in order to renew the endorsement. Initial endorsement may be accomplished through completion
of either requirements in Subsections 015.02.c.i or 015.02.c.ii.

i. The candidate must possess a valid professional nursing (RN) license issued by the Idaho State Board of Nursing, and a baccalaureate degree in nursing, education, or a health-related field from an accredited institution.

   (4-11-19)

ii. The candidate must possess a valid professional nursing (RN) license issued by the Idaho State Board of Nursing; have two (2) years of full-time (or part-time equivalent) school nursing, community health nursing, or any other area of pediatric, adolescent, or family nursing experience; and have completed six (6) semester credit hours from a university or college in any of the following areas:

   (1) Health program management.
   (2) Nursing leadership.
   (3) Pediatric nursing or child development.
   (4) Population of community health.
   (5) Health care policy, ethics, or cultural competency.
   (6) Research and/or statistics.

   (4-11-19)

f. Interim Endorsement - School Nurse. This endorsement will be granted for those who do not meet the educational and/or experience requirements but who hold a valid professional nursing (RN) license in Idaho. An Interim School Nurse Endorsement will be issued for three (3) years while the applicant is meeting the educational or experience requirements, or both, and it is not renewable.

   (4-11-19)

g. Speech-Language Pathologist Endorsement. This endorsement is valid for five (5) years. Six (6) credits are required every five (5) years in order to renew the endorsement. The initial endorsement will be issued to candidates who possess a master's degree from an accredited college or university in a speech/language pathology program approved by the State Board of Education, and who receive an institutional recommendation from an accredited college or university.

   (3-25-16)

h. Interim Endorsement - Speech-Language Pathologist. This endorsement will be granted for those who do not meet the educational requirements but hold a baccalaureate degree in speech-language pathology and are pursuing a master’s degree. This endorsement will be issued for three (3) years while the applicant is meeting the educational requirements, and is not renewable.

   (3-25-16)

i. Audiology Endorsement. This endorsement is valid for five (5) years. Six (6) credits are required every five (5) years in order to renew the endorsement. The initial endorsement will be issued to candidates who possess a master's degree from an accredited college or university in an audiology program approved by the State Board of Education, and who receive an institutional recommendation from an accredited college or university.

   (3-25-16)

j. School Social Worker Endorsement. This endorsement is valid for five (5) years. Six (6) credit hours are required every five (5) years in order to renew the endorsement. Initial endorsement shall be accomplished by meeting the following requirements:

   (3-20-20)

   i. A master's degree in social work (MSW) from a postsecondary institution accredited by an organization recognized by the State Board of Education. The program must be currently approved by the state educational agency of the state in which the program was completed; and

       (3-29-17)

   ii. An institution recommendation from an Idaho State Board of Education approved program; and

       (3-29-17)

   iii. The successful completion of a school social work practicum in a preschool through grade twelve
12 (Pre-K-12) setting. Post-LMSW extensive experience working with children and families may be substituted for the completion of a school social work practicum in a Pre-K-12 setting; and

iv. A current and valid social work license pursuant to chapter 32, title 54, Idaho Code, and the rules of the State Board of Social Work Examiners.

k. Occupational Therapist Endorsement. A candidate with a current and valid Occupational Therapy license issued by the Occupational Therapy Licensure Board of Idaho will be granted an Occupational Therapist endorsement. The Pupil Service Staff Certificate with an Occupational Therapist endorsement is valid for five (5) years. Six (6) semester credit hours are required every five (5) years in order to renew the endorsement. Candidate must maintain current and valid Occupational Therapy Licensure for the endorsement to remain valid.

l. Physical Therapist Endorsement. A candidate with a current and valid Physical Therapy license issued by the Idaho Physical Therapy Licensure Board will be granted a Physical Therapist endorsement. The Pupil Service Staff Certificate with a Physical Therapist endorsement is valid for five (5) years. Six (6) semester credit hours are required every five (5) years in order to renew the endorsement. Candidate must maintain current and valid Physical Therapy Licensure for the endorsement to remain valid.

03. Administrator Certificate. Every person who serves as superintendent, director of special education, secondary school principal, or principal of an elementary school with eight (8) or more teachers (including the principal), or is assigned to conduct the summative evaluation of certified staff is required to hold an Administrator Certificate. The certificate may be endorsed for service as school principal, superintendent, or director of special education. Assistant superintendents are required to hold the Superintendent endorsement. Assistant principals or vice-principals are required to hold the School Principal endorsement. Directors of special education are required to hold the Director of Special Education endorsement. Possession of an Administrator Certificate does not entitle the holder to serve as a teacher at a grade level for which the educator is not qualified or certificated. All administrator certificates require candidates to meet the Idaho Standards for School Principals. The Administrator Certificate is valid for five (5) years. Six (6) semester credit hours are required every five (5) years in order to renew the certificate.

a. School Principal (Pre-K-12) Endorsement. To be eligible for an Administrator Certificate endorsed for School Principal (Pre-K-12), a candidate must have satisfied the following requirements:

i. Hold a master's degree from an accredited college or university.

ii. Have four (4) years of full-time certificated experience working with students, Pre-K-12, while under contract in an accredited school setting.

iii. Have completed an administrative internship in a state-approved program, or have one (1) year of experience as an administrator in grades Pre-K-12.

iv. Provide verification of completion of a state-approved program of at least thirty (30) semester credit hours, forty-five (45) quarter credit hours, of graduate study in school administration for the preparation of school principals at an accredited college or university. This program shall include the competencies of the Idaho Standards for School Principals.

v. An institutional recommendation is required for a School Principal (Pre-K-12) Endorsement.

b. Superintendent (Pre-K-12) Endorsement. To be eligible for an Administrator Certificate with a Superintendent (Pre-K-12) endorsement, a candidate must have satisfied the following requirements:

i. Hold an education specialist or doctorate degree or complete a comparable post-master's sixth year program at an accredited college or university.

ii. Have four (4) years of full-time certificated/licensed experience working with Pre-K-12 students while under contract in an accredited school setting.
iii. Have completed an administrative internship in a state-approved program for the superintendent endorsement or have one (1) year of out-of-state experience as an assistant superintendent or superintendent in grades Pre-K-12.  (3-25-16)

iv. Provide verification of completion of an approved program of at least thirty (30) semester credit hours, or forty-five (45) quarter credit hours, of post-master’s degree graduate study for the preparation of school superintendents at an accredited college or university. This program in school administration and interdisciplinary supporting areas shall include the competencies in Superintendent Leadership, in additional to the competencies in the Idaho Standards for School Principals.  (3-28-18)

v. An institutional recommendation is required for a School Superintendent Endorsement (Pre-K-12).  (3-28-18)

c. Director of Special Education (Pre-K-12) Endorsement. To be eligible for an Administrator Certificate endorsed for Director of Special Education (Pre-K-12), a candidate must have satisfied all of the following requirements:  (3-28-18)

i. Hold a master's degree from an accredited college or university;  (3-25-16)

ii. Have four (4) years of full-time certificated/licensed experience working with students Pre-K-12, while under contract in a school setting;  (3-25-16)

iii. Obtain college or university verification of demonstrated the competencies of the Director of Special Education in Idaho Standards for Initial Certification of Professional School Personnel;  (3-28-18)

iv. Obtain college or university verification of demonstrated competencies in the following areas, in addition to the competencies in the Idaho Standards for School Principals: Concepts of Least Restrictive Environment; Post-School Outcomes and Services for Students with Disabilities Ages Three (3) to Twenty-one (21); Collaboration Skills for General Education Intervention; Instructional and Behavioral Strategies; Individual Education Programs (IEPs); Assistive and Adaptive Technology; Community-Based Instruction and Experiences; Data Analysis for Instructional Needs and Professional Training; Strategies to Increase Program Accessibility; Federal and State Laws and Regulations and School District Policies; Resource Advocacy; and Technology Skills for Referral Processes, and Record Keeping;  (3-28-18)

v. Have completed an administrative internship in the area of administration of special education; and

vi. An institutional recommendation is required for Director of Special Education (Pre-K-12) endorsement.  (3-28-18)

04. Certification Standards For Career Technical Educators. Teachers of career technical courses or programs in secondary schools must hold an occupational specialist certificate and an endorsement in an appropriate occupational discipline. All occupational certificates must be approved by the Division of Career Technical Education regardless of the route an individual is pursuing to receive the certificate.  (3-28-18)

05. Degree Based Career Technical Certification.  (3-25-16)

a. Individuals graduating from an approved occupational teacher preparation degree program qualify to teach in the following *seven* disciplines: agricultural science and technology; business technology education; computer science technology; engineering; family and consumer sciences; marketing technology education; and technology education. Occupational teacher preparation course work must meet the Idaho Standards for the Initial Certification of Professional School Personnel. The occupational teacher education program must provide appropriate content to constitute a major in the identified field. Student teaching shall be in an approved program and include experiences in the major field. Applicants shall have accumulated one thousand (1,000) clock hours of related work experience or practicum in their respective field of specialization, as approved by the Division of Career Technical Education. The certificate is valid for five (5) years. Six (6) semester credit hours are required.
every five (5) years pursuant to Section 060 of these rules.

b. The Career Technical Education Administrator certificate is required for an individual serving as an administrator, director, or manager of career technical education programs at the state Division of Career Technical Education or in Idaho public schools. Individuals must meet one (1) of the two (2) following prerequisites to qualify for the Career Technical Education Administrator Certificate. The certificate is valid for five (5) years. Six (6) semester credit hours are required every five (5) years pursuant to Section 060 of these rules to renew.

i. Qualify for or hold an Advanced Occupational Specialist certificate or hold an occupational endorsement on a standard instructional degree based career technical certificate; provide evidence of a minimum of four (4) years teaching, three (3) of which must be in a career technical discipline; hold a master's degree; and complete at least fifteen (15) semester credits of administrative course work.

(2-8-18)

(3) Applicants must have completed credits in: education finance, administration and supervision of personnel, legal aspects of education; and conducting evaluations using the statewide framework for teacher evaluations.

(3-28-18)

(2) Additional course work may be selected from any of the following areas: administration and supervision of occupational programs; instructional supervision; administration internship; curriculum development; curriculum evaluation; research in curriculum; school community relations; communication; teaching the adult learner; coordination of work-based learning programs; and/or measurement and evaluation.

(3-28-18)

ii. Hold a superintendent or principal (Pre-K-12) endorsement on a standard administrator certificate and provide evidence of a minimum of four (4) years teaching, three (3) of which must be in a career technical discipline or successfully complete the Division of Career Technical Education twenty-seven (27) month Idaho career technical education leadership institute.

(3-28-18)

c. Work-Based Learning Coordinator Endorsement. Educators assigned to coordinate approved work-based experiences must hold the Work-Based Learning Coordinator endorsement. To be eligible, applicants must hold an occupational endorsement on the Standard Instructional Certificate or qualify for an Occupational Specialist Certificate, plus complete course work in coordination of work-based learning programs.

(3-28-18)

d. Career Counselor Endorsement. The endorsement for a Career Counselor may be issued to applicants who hold a current Pupil Service Staff Certificate with a School Counselor (K-12) endorsement, and who have satisfied the following career technical requirement: Career Pathways and Career Technical Guidance: Principles/Foundations of Career Technical Education; and Theories of Occupational Choice.

(3-28-18)

06. Industry-Based Occupational Specialist Certificate. The industry-based Occupational Specialist Certificates are industry-based career technical certifications issued in lieu of a degree-based career technical certificate. Certificate holders must meet the following eligibility requirements:

(3-28-18)

a. Be at least twenty-two (22) years of age; document recent, gainful employment in the area for which certification is requested; possess either a high school diploma or General Educational Development (GED) certificate; meet provisions of Idaho Code; and, verify technical skills through work experience, industry certification or testing as listed below. When applicable, requirements of occupationally related state agencies must also be met. Since educational levels and work experiences vary, applicants may be determined highly qualified under any one (1) of the following three (3) options:

i. Have six three (6) years or twelve six thousand (12,000) hours of recent, gainful employment in the occupation for which certification is requested. Up to forty-eight (48) months credit or up to eight thousand (8,000) hours can be counted toward the six (6) years or twelve thousand (12,000) hours on a month-to-month basis for journeyman training or completed postsecondary training in a career technical education program, at least half of which must have been during the immediate previous five (5) years; or

(2-8-18)

ii. Have a baccalaureate degree in the specific occupation or related area, plus two one (2) years or four two thousand (4,000) hours of recent, gainful employment in the occupation for which certification is required.
iii. Have completed a formal apprenticeship program in the occupation or related area for which certification is requested plus two (2) years or four thousand (4,000) hours of recent, gainful, related work experience, at least half of which must have been completed in the immediate previous five (5) years. Hold or have held an industry certification in a field closely related to the content area in which the individual seeks to teach as approved by the Division of Career Technical Education.  

b. Limited Occupational Specialist Certificate. This certificate is issued to individuals who are new to teaching in Idaho public schools or new to teaching in career technical education in Idaho public schools. The certificate is an interim certificate and is valid for three (3) years and is non-renewable. Applicants must meet all of the minimum requirements established in Subsection 015.06.a. of these rules. Individuals on a limited occupational specialist certificate must complete one (1) of the two (2) following pathways during the validity period of the certificate:

i. Pathway I - Coursework: Within the three-year period of the Limited Occupational Specialist Certificate, the instructor must satisfactorily complete the pre-service training prescribed by the Division of Career Technical Education and demonstrate competencies in principles/foundations of occupational education and methods of teaching occupational education. Additionally, the instructor must satisfactorily demonstrate competencies in two (2) of the following areas: career pathways and guidance; analysis, integration, and curriculum development; and measurement and evaluation.

ii. Pathway II – Cohort Training: Within the first twelve (12) months, the holder must enroll in the Division of Career Technical Education sponsored two-year cohort training and complete the two (2) training within the three-year validity period of the interim certificate.

c. Standard Occupational Specialist Certificate.

i. This certificate is issued to individuals who have held a limited occupational specialist certificate and completed one (1) of the pathways for completions.

ii. The Standard Occupational Specialist Certificate is valid for five (5) years. Six (6) semester credit hours are required every five (5) years pursuant to Section 060 of these rules to renew. Credit equivalency will be based on verification of forty-five (45) hours of participation at approved technical conferences, institutes, or workshops where participation is prorated at the rate of fifteen (15) hours per credit; or one hundred twenty (120) hours of approved related work experience where hours worked may be prorated at the rate of forty (40) hours per credit; or any equivalent combination thereof, and having on file a new professional development plan for the next certification period.

d. Advanced Occupational Specialist Certificate. This certificate is issued to individuals who:

i. Are eligible for the Standard Occupational Specialist Certificate;

ii. Provide evidence of completion of a teacher training degree program or eighteen (18) semester credits of Division of Career Technical Education approved education or content-related course work in addition to the twelve (12) semester credits required for the Standard Occupational Specialist Certificate (a total of thirty (30) semester credits); and

iii. Have on file a new professional development plan for the next certification period.

iv. The Advanced Occupational Specialist Certificate is valid for five (5) years. Six (6) semester credit hours are required every five (5) years pursuant to Section 060 of these rules to renew.

07. Postsecondary Specialist. A Postsecondary Specialist certificate will be granted to a current academic faculty member whose primary employment is with an accredited Idaho postsecondary institution. To be eligible to teach in the public schools under this postsecondary specialist certificate, the candidate must supply a
recommendation from the employing institution (faculty's college dean). The primary use of this state-issued certificate is for distance education, virtual classroom programs, and public and postsecondary partnerships.

a. Renewal. This certificate is good for five (5) years and is renewable. To renew the certificate, the renewal application must be accompanied with a new written recommendation from the postsecondary institution (faculty's college dean level or higher).

b. Fees. The fee is the same as an initial or renewal certificate as established in Section 066 of these rules.

c. The candidate must meet the following qualifications:
   i. Hold a master's degree or higher in the content area being taught;
   ii. Be currently employed by the postsecondary institution in the content area to be taught; and
   iii. Complete and pass a criminal history background check as required by Section 33-130, Idaho Code.

08. American Indian Language. Each Indian tribe shall provide to the State Department of Education the names of those highly and uniquely qualified individuals who have been designated to teach the tribe’s native language in accordance with Section 33-1280, Idaho Code. Individuals identified by the tribe(s) may apply for an Idaho American Indian Certificate as American Indian languages teachers.

a. The Office of Indian Education at the State Department of Education will process an application that has met the requirements of the Tribe(s) for an American Indian languages teacher.

b. Once an application with Tribal approval has been received, it will be reviewed and, if approved, it will be forwarded to the Office of Certification for a criminal history background check as required in Section 33-130, Idaho Code. The application must include a ten–finger fingerprint card or scan and a fee for undergoing a background investigation check pursuant to Section 33-130, Idaho Code.

c. The Office of Certification will review the application and verify the applicant is eligible for an Idaho American Indian Certificate. The State Department of Education shall authorize an eligible applicant as an American Indian languages teacher. An Idaho American Indian Certificate is valid for not more than five (5) years. Individuals may apply for a renewal certificate.

09. Junior Reserved Officer Training Corps (Junior ROTC) Instructors.

a. Each local education agency with a Junior ROTC program shall provide the State Department of Education a list of individuals who have completed an official armed forces training program to qualify as Junior ROTC instructors in high schools and a notarized copy of their certificate(s) of completion.

b. Authorization Letter. Upon receiving the items identified in Subsection 015.09.a., the State Department of Education shall issue a letter authorizing these individuals as Junior ROTC instructors.

10. Additional Renewal Requirements. In addition to specific certificate or endorsement renewal requirements, applicants must meet the following renewal requirements as applicable:

a. Administrator certificate renewal. In order to recertify, holders of an administrator certificate must complete a course consisting of a minimum of three (3) semester credits in the Idaho framework for teachers' evaluation pursuant to Section 33-1204, Idaho Code. Credits must be earned through an approved educator preparation program and include a laboratory component. The laboratory component must include in-person or video observation and scoring of teacher performance using the statewide framework for teacher’s evaluation. The approved course must include the following competencies:
i. Understanding professional practice in Idaho evaluation requirements, including gathering accurate evidence and artifacts, understanding and using the state framework for evaluation rubric with fidelity, proof of calibration and interrater reliability, ability to provide effective feedback for teacher growth, and understanding and advising teachers on individualized learning plan and portfolio development. (3-28-18)

ii. Understanding student achievement and growth in the Idaho evaluation framework, including understanding how measurable student achievement and growth measures impact summative evaluation ratings and proficiency in assessment literacy. (3-28-18)

(BREAK IN CONTINUITY OF SECTIONS)

028. PROFESSIONAL ENDORSEMENT.
Eligibility for the professional and advanced professional endorsement pursuant to Section 33-1201A, Idaho Code, may be established by providing additional evidence demonstrating effective teaching for the purpose of determining proficiency and student achievement in the event required standards for the professional endorsement are not met. (4-11-19)

01. Measurable Student Achievement and Student Success Indicators. Evidence of a majority of the applicable staff person’s students meeting measurable student achievement targets, or student success indicator targets, may be demonstrated by the certificated staff member providing evidence that students from an accredited private or out-of-state public school have met targets set by the certificated staff member. The measurable student achievement or student success indicators must be comparable to the measurable student achievement or student success indicator targets established by the hiring school for certificated staff in similar employment areas and similar grade ranges pursuant to Section 33-1001, Idaho Code. (4-11-19)

02. Performance Criteria. Evidence of an overall rating of proficient, and no components rated as unsatisfactory on the state framework for teaching evaluation meeting the performance criteria as applicable to the professional or advanced professional endorsement pursuant to Section 33-1001, Idaho Code, may be provided through the submittal of annual evaluations showing standards aligned to the Idaho framework for teaching evaluation standards. (4-11-19)

03. Validity of Evidence. Evidence provided must show that the certificated staff member met each of the proficiency and student achievement requirements in each year required. (4-11-19)

04. Evaluation of Evidence. The local education agency administrator shall be responsible for evaluating the evidence provided and determining alignment with the school district or charter schools measurable student achievement and student success indicators and alignment with the Idaho framework for teaching evaluation standards. The reviewing administrator shall sign an affidavit stating the evidence meets the district and state standards for measurable student achievement and student success indicators and performance criteria. The local education agency shall report the equivalent performance criteria rating the certified staff member received and indicate if any equivalent components were rated as unsatisfactory and the measurable student achievement or student success indicator used with verification that the majority of their students have met the measurable student achievement targets or student success indicators. Targets must be comparable to targets set for like groups of students at the hiring school. The state board of education or state department of education may request to review the evidence provided for determining proficiency and student achievement. (4-11-19)
NOTICE OF RULEMAKING – PROPOSED RULE

AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Article IX, Section 2 of the Idaho Constitution and under Sections 33-101, 33-105, and Chapter 15, Title 22, Idaho Code, Idaho Code.

PUBLIC HEARING SCHEDULE: Public hearing(s) concerning this rulemaking will be scheduled if requested in writing by twenty-five (25) persons, a political subdivision, or an agency, not later than the close of business on October 21, 2020.

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

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking: This rule will vacate the entire chapter, IDAPA 08.05.01 Seed Certification Standards. Allowing this chapter to be repealed at this time will align with the 2020 Legislative action removing the requirement that seed certification standards are promulgated through the rulemaking process.

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

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

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(2), Idaho Code, negotiated rulemaking was not conducted because this amendment is simple in nature and the statutory authority for promulgating seed certification standards in administrative rule was removed during the 2020 Legislature.

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Tracie Bent at tracie.bent@osbe.idaho.gov or (208) 332-1582.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before the close of business on October 28, 2020.

Dated this 28th day of October, 2020.

Tracie Bent
Chief Planning and Policy Officer
State Board of Education
650 W. State Street
PO Box 83720
Boise, ID and 83720-0037
Phone: (208) 332-1582
Fax: (208) 334-2632

IDAPA 08.05.01 IS BEING REPEALED IN ITS ENTIRETY
AUTHORITY: In compliance with Section 36-105(3), Idaho Code, notice is hereby given that at a August 20, 2020, meeting the Commission amended by proclamation the 2020 and 2021 Upland Game, Turkey, and Furbearer proclamation. The amendment lists areas where pheasants are stocked and an Upland Game Bird permit is required to hunt or possess pheasants during the fall 2020 seasons.

Hunters are advised that they must consult the text of the Commission’s official proclamation before hunting as this notice is merely meant to advise that an amended proclamation has been adopted.

ASSISTANCE ON TECHNICAL QUESTIONS: For assistance on technical questions concerning the amended proclamation, contact Owen Moroney at (208) 334-3715.
AUTHORITY: In compliance with Section 36-105(3), Idaho Code, notice is hereby given that at a September 15, 2020, special meeting the Commission amended by proclamation the 2020 and 2021 Upland Game, Turkey, and Furbearer proclamation. The amendment adjusts shooting hours for locations where pheasants are stocked and an Upland Game Bird permit is required to hunt or possess pheasants during the fall 2020 seasons.

Hunters are advised that they must consult the text of the Commission’s official proclamation before hunting as this notice is merely meant to advise that an amended proclamation has been adopted.

ASSISTANCE ON TECHNICAL QUESTIONS: For assistance on technical questions concerning the amended proclamation, contact Owen Moroney at (208) 334-3715.
AUTHORITY: In compliance with Section 36-105(3), Idaho Code, notice is hereby given that at an August 20, 2020 meeting the Commission adopted by proclamation the 2020 Sage grouse Season, establishing a season and limit for hunting in Idaho.

Hunters are advised that they must consult the text of the Commission’s official proclamation before hunting as this notice is merely meant to advise that a new proclamation has been adopted.

ASSISTANCE ON TECHNICAL QUESTIONS: For assistance on technical questions concerning the proclamation, contact Owen Moroney at (208) 334-3715.
AUTHORITY: In compliance with Section 36-105(3), Idaho Code, notice is hereby given that at a August 20, 2020 meeting the Commission amended by proclamation the 2020 Idaho Fall Steelhead Season, establishing seasons and limits for fishing in Idaho. At the meeting the Commission approved modifications to the steelhead season in the Salmon, Little Salmon and Snake Rivers for the fall 2020 season, reducing the bag and possession limits.

Anglers are advised that they must consult the text of the Commission's official proclamation before fishing as this notice is merely meant to advise that changes have been made. This notice is not an exhaustive list of those changes.

ASSISTANCE ON TECHNICAL QUESTIONS: For assistance on technical questions concerning the amended proclamation, contact Owen Moroney at (208) 334-3715.
AUTHORITY: In compliance with Section 36-105(3), Idaho Code, notice is hereby given that at a September 15, 2019 special meeting the Commission adopted by proclamation the 2020 coho salmon season, establishing seasons and limits for fishing in Idaho.

Anglers are advised that they must consult the text of the Commission’s official proclamation before fishing as this notice is merely meant to advise that changes have been made. This notice is not an exhaustive list of those changes.

ASSISTANCE ON TECHNICAL QUESTIONS: For assistance on technical questions concerning the proclamation, contact Owen Moroney at (208) 334-3715.
AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section 56-202(b) Idaho Code and Senate Bill 1204 (2019).

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

<table>
<thead>
<tr>
<th>PUBLIC HEARING</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuesday, October 20, 2020</td>
</tr>
<tr>
<td>3:00 p.m. - 5:00 p.m. MDT</td>
</tr>
</tbody>
</table>

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

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

This chapter made reference to the federal Institutions for Mental Disease (IMD) exclusion, which no longer applies as of the effective date of the approved Medicaid waiver or state plan authority. This rulemaking removes all mentions of this exclusion in rule to allow Medicaid reimbursement for services delivered to eligible adults in an IMD setting. This confers a benefit to citizens needing treatment for substance use disorders and/or mental health disorders in an IMD setting.

The rule changes themselves have been in effect as Temporary rules since January 1, 2020, under the original Temporary Docket No. 16-0309-2001 and repromulgated as a Temporary rule under this docket number effective March 20, 2020 (see Idaho Administrative Bulletin, April 1, 2020, Vol. 20-4, p. 40).

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

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

Senate Bill 1204 (2019) shifted budget dollars from the Division of Behavioral Health to the Division of Medicaid to pay for costs of Medicaid Expansion, including the costs of the sideboards and waivers. Therefore, this rule change will have no net impacts to the State General Fund.

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(2), Idaho Code, negotiated rulemaking was not conducted because it was not feasible. This rulemaking is being done to align with S1204 (2019).

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A

ASSISTANCE ON TECHNICAL QUESTIONS: For assistance on technical questions concerning the proposed rule, contact Clay Lord at (208) 364-1979.
Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before October 28, 2020.

Dated this 14th day of August, 2020.

Tamara Prisock
DHW – Administrative Rules Unit
450 W. State Street – 10th Floor
P.O. Box 83720
Boise, ID 83720-0036
Phone: (208) 334-5564
Fax: (208) 334-6558
dhwrules@dhw.idaho.gov

Pursuant to Section 67-5221(1), Idaho Code, this docket is being published as a proposed rule.

This docket has been previously published as a temporary rule.
The temporary effective date is March 20, 2020.

The original text of the temporary rule was published in the Idaho Administrative Bulletin,
Volume 20-4, April 1, 2020, pages 40 through 43.

THE FOLLOWING IS THE PROPOSED TEXT FOR DOCKET NO. 16-0309-2002
(Only Those Sections With Amendments Are Shown.)

701. INPATIENT BEHAVIORAL HEALTH SERVICES: PARTICIPANT ELIGIBILITY.

01. Inpatient Psychiatric Hospital Services. Participants are eligible who have a diagnosis from the current DSM with substantial impairment in thought, mood, perception, or behavior. A court-ordered admission or physician’s emergency certificate alone does not justify Medicaid reimbursement for these services. Medical necessity must be demonstrated for admission or extended stay by meeting the severity of illness and intensity of service criteria as found in Subsections 701.03 and 701.04 of this rule. Services may be provided in:

a. A freestanding psychiatric hospital;

b. A hospital psychiatric unit; and

c. Subject to federal approval, an Institution for mental diseases for participants meeting the conditions in Subsections 701.01.c.i. and 701.01.c.ii. of this rule.

i. Participants must be under the age of twenty-one (21); and

ii. If a participant reaches age twenty-one (21) while receiving services, he may continue inpatient treatment until services are no longer required, or he reaches age twenty-two (22), whichever comes first.

02. Inpatient Substance Use Disorder Services. Participants are eligible when medical necessity is demonstrated by meeting the severity of illness and intensity of service criteria as found in Subsections 701.03 and 701.04 of this rule. A court-ordered admission or physician’s emergency certificate alone does not justify Medicaid
reimbursement for these services. Services may be provided in:

- a. A freestanding psychiatric hospital; or
- b. A hospital psychiatric unit.

03. Severity of Illness Criteria. Both severity of illness and intensity of services criteria must be met for admission to an IMD or psychiatric unit of a general hospital.

a. Severity of illness criteria. The participant must meet one (1) of the following criteria related to the severity of his their psychiatric illness:

   i. Is currently dangerous to self as indicated by at least one (1) of the following:
      - (1) Has actually made an attempt to take his their own life in the last seventy-two (72) hours (details of the attempt must be documented); or
      - (2) Has demonstrated self-mutilative behavior within the past seventy-two (72) hours (details of the behavior must be documented); or
      - (3) Has a clear plan to seriously harm himself, overt suicidal intent, and lethal means available to follow the plan (this information can be from the participant or a reliable source and details of the participant's plan must be documented); or

   ii. Participant is actively violent or aggressive and exhibits homicidal ideation or other symptoms which that indicate they is are a probable danger to others as indicated by one (1) of the following:
      - (1) The participant has engaged in, or threatened, behavior harmful or potentially harmful to others or caused serious damage to property which that would pose a serious threat of injury or harm to others within the last twenty-four (24) hours (description of the behavior and extent of injury or damage must be documented, as well as the time the behavior occurred relative to the present); or
      - (2) The participant has made threats to kill or seriously injure others or to cause serious damage to property which that would pose a threat of injury or harm to others and has effective means to carry out the threats (details of threats must be documented); or

   iii. Participant is gravely impaired as indicated by at least one (1) of the following criteria:
      - (1) The participant has such limited functioning that his their physical safety and well being are in jeopardy due to his their inability for basic self-care, judgment, and decision making (details of the functional limitations must be documented); or
      - (2) The acute onset of psychosis or severe thought disorganization or clinical deterioration has rendered the participant unmanageable and unable to cooperate in non-hospital treatment (details of the participant’s behaviors must be documented); or
      - (3) There is a need for treatment, evaluation, or complex diagnostic testing where the participant's level of functioning or communication precludes assessment and/or treatment, or both, in a non-hospital based setting, and may require close supervision of medication or behavior or both.
(4) The participant is undergoing severe or medically complicated withdrawal from alcohol, opioids, stimulants, or sedatives.

04. Intensity of Service Criteria. The participant must meet all of the following criteria related to the intensity of services needed for treatment.

a. Documentation that ambulatory care resources available in the community do not meet the treatment needs of the participant; and

b. The services provided can reasonably be expected to improve the participant's condition or prevent further regression so that inpatient services will no longer be needed; and

c. Treatment of the participant's condition requires services on an inpatient basis, including twenty-four (24) hour nursing observation.

d. Exceptions. The requirement to meet intensity of service criteria may be waived for first-time admissions if severity of illness is met and the physician is unable to make a diagnosis or treatment decision while the participant is in his their current living situation. The waiver of the intensity of services requirement can be for no longer than forty-eight (48) hours and is not waivable for repeat hospitalizations.

05. Exclusions. If a participant meets one (1) or more of the following criteria, Medicaid reimbursement will be denied:

a. The participant is unable to actively participate in an outpatient treatment program solely because of a major medical condition, surgical illness or injury; or

b. The participant has a primary diagnosis of being intellectually disabled and the primary treatment need is related to the intellectual disability.

702. INPATIENT BEHAVIORAL HEALTH SERVICES: COVERAGE AND LIMITATIONS.

01. Initial Length of Stay. An initial length of stay, or a prior authorization requirement, will be established by the Department, or its designee, in the Idaho Medicaid Provider Handbook. Requirements for establishing length of stay will never be more restrictive than requirements for non-behavioral health services in a general hospital.

02. Extended Stay. The Department, or its designee, will establish authorization requirements in the Idaho Medicaid Provider Handbook. An authorization is necessary when the appropriate care of the participant indicates the need for inpatient days in excess of the initial length of stay or previously approved extended stay.

02a. Excluded Services. Placement in an IMD for participants between the ages of twenty-one (21) and sixty-four (64) is not a covered service.
IDAPA 16 – DEPARTMENT OF HEALTH AND WELFARE
16.03.09 – MEDICAID BASIC PLAN BENEFITS
DOCKET NO. 16-0309-2004
NOTICE OF RULEMAKING – PROPOSED RULE

AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section 56-202(b) and the 21st Century Cures Act – Public Law 114–255, Section 12006.

PUBLIC HEARING SCHEDULE: Public hearings concerning this rulemaking will be held as follows:

<table>
<thead>
<tr>
<th>PUBLIC HEARINGS</th>
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</table>
| For Electronic Visit Verification (EVV) -- 
Wednesday, October 14, 2020, 3:00 p.m. - 5:00 p.m. MDT |
| **WebEx INFORMATION** |
| WebEx Phone: |
| +1-415-655-0003 US Toll |
| +1-720-650-7664 United States Toll |
| Meeting Number (Access Code): 133 127 0087 |
| Meeting password: medicaidhearing (63342243 from phones and video systems) |
| WebEx Link: |
| [https://idhw.webex.com/idhw/j.php?MTID=m552a7147cb81abe347c3ae320a559c64c](https://idhw.webex.com/idhw/j.php?MTID=m552a7147cb81abe347c3ae320a559c64c) |

| For Waiver of Criminal History Check for Peer Support/Recovery Coaching -- 
Tuesday, October 20, 2020, 3:00 p.m. - 5:00 p.m. MDT |
| **TELECONFERENCE INFORMATION** |
| Call in: 1-877-820-7831 |
| Guest Code: 301388 |

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

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

1. Peer Support and Recovering Coaching: There is an ongoing issue with the availability of Peer Support and Recovery Coaching services delivered through the Idaho Behavioral Health Plan (IBHP). Qualified providers of these services have lived experience with substance use disorders; however, prospective providers who are recovering addicts frequently have drug convictions on their criminal records, and therefore cannot obtain criminal history check clearance. This change would allow the Department to waive clearance requirements for these providers, which in turn would expand access to these services.

2. Electronic Visit Verification (EVV): These rule changes secure State authority to implementation of an Electronic Visit Verification (EVV) system to comply with the 21st Century Cures Act while helping minimize provider administrative burden. EVV Implementation aims to protect participants by verifying services are received using an electronic verification method, and also aims to reduce instances of fraud, waste, and abuse by providers who bill for these services. Medicaid is in the process of implementing an Open Model structure for providers, allowing providers freedom to choose the EVV provider that best fits with each agency’s budget and needs as long as it is certified as compatible with the Data Aggregator DXC Technology (Medicaid’s existing Medicaid Management Information System vendor) will launch to process EVV claims. DXC will also include provider training and
certification to help the implementation process. Rulemaking will be as minimal as possible, to ensure CMS compliance with the Act, while procedural guidance will be provided via Idaho Provider Handbook and DXC training materials.

The Department also intends to take this opportunity to simplify existing procedural requirements in rule related to Home Health services that correspond to EVV implementation.

**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

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

For Peer support and recovery coaching: there are no fiscal impacts to the State General Fund expected if the changes are implemented, since the services are currently available to any Medicaid participant who needs them. By increasing the size of the provider pool, the change is intended to decrease the number of days Medicaid participants must wait to book appointments with providers. Decreasing delays in the onset of treatment is critical to the success of Idaho’s response to the opioid crisis.

For EVV: Senate Bill 1418 (2020) approved EVV implementation costs that include a one-time system expense of $545,700 from the SGF for SFY 2020. This cost is the combined shared sum with the EVV implementation for Docket No. 16-0310-2002 implementing EVV for Personal Care Services (PCS) and Aged and Disabled (A&D) waiver services. In order to minimize financial impact to SGF, the Department chose to do the minimum system implementation by amending the contract with our current MMIS contractor (DXC Technologies) to add an MMIS Aggregator for EVV and provide training and validation for providers that must comply with EVV requirements. Providers are allowed the choice of the EVV Solution that meets their agency’s budget and process needs, as long as it is verified as compatible by the MMIS subcontractor in charge of the EVV work. Ongoing support and maintenance related to EVV systems will include a monthly fee, but this is incorporated in the annually approved MMIS Contract and not expected to add to an additional line item for future budget years. In the Department budget approved during the 2020 Legislative Session, the total breakdown for EVV service implementation (under this docket and Docket No. 16-0310-2002) is as follows: State General Fund Allocation: $545,700, Federal Fund Allocation: $1,828,700, and Total Allocation: $2,374,400.

**NEGOTIATED RULEMAKING:** Pursuant to Section 67-5220(2), Idaho Code, negotiated rulemaking was not conducted because negotiated rulemaking was not feasible. However, extensive informal negotiated rulemaking was conducted with stakeholders in 2019 and 2020.

**INCORPORATION BY REFERENCE:** Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A

**ASSISTANCE ON TECHNICAL QUESTIONS:** For assistance on technical questions concerning the proposed rule, contact Jennifer Pinkerton (208) 287-1171.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before October 28, 2020.

Dated this 14th day of August, 2020.

Tamara Prisock, DHW – Administrative Rules Unit
450 W. State Street – 10th Floor
P.O. Box 83720
Boise, ID 83720-0036
Phone: (208) 334-5564
Fax: (208) 334-6558
dhwrules@dhw.idaho.gov
009. CRIMINAL HISTORY AND BACKGROUND CHECK REQUIREMENTS.

01. Compliance With Department Criminal History Check. Criminal history checks are required for certain types of providers under these rules. Providers who are required to have a criminal history check must comply with IDAPA 16.05.06, “Criminal History and Background Checks.” (3-30-07)

02. Department-Issued Variances to Requirements for a Criminal History Check Clearance. (___)

a. Notwithstanding those provider types required to obtain a criminal history check clearance or Department enhanced clearance under these rules or under IDAPA 16.05.06, “Criminal History and Background Checks,” the Department at its discretion may allow variances to clearance requirements under certain circumstances. Providers who are subject to a criminal history and background check must still complete and notarize an application for a criminal history and background check. (___)

b. In cases where the application process results in a denial rather than a clearance, and the denial is due to the applicant’s prior convictions for disqualifying drug and alcohol offenses, the applicant may, with prior written approval of the Department, deliver covered Medicaid Peer Support and Recovery Coaching services. (___)

c. A variance may be granted on a case-by-case basis upon review by the Department or its designee of any underlying facts and circumstances in each individual case. The Department will establish the process for the administrative review which will be conducted separate from the criminal history unit. During the Department’s review, the following factors may be considered:

i. The severity or nature of the crimes or other findings; (___)

ii. The period of time since the incidents occurred; (___)

iii. The number and pattern of incidents being reviewed; (___)

iv. Circumstances surrounding the incidents that would help determine the risk of repetition; (___)

v. The relationship between the incidents and the position sought; (___)

vi. Activities since the incidents, such as continuous employment, education, participation in treatment, completion of a problem-solving court or other formal offender rehabilitation, payment of restitution, or any other factors that may be evidence of rehabilitation; (___)

vii. A pardon that was granted by the Governor or the President of the United States; (___)

viii. The falsification or omission of information on the self-declaration form and other supplemental forms submitted; and (___)

ix. Any other factor deemed relevant to the review. (___)

d. A variance granted under these rules is not a criminal history and background check clearance and does not set a precedent for subsequent application for variance. The Department may revoke a variance when it identifies a risk to participants’ health and safety. Providers who have been granted a variance must still meet all other Department requirements for Medicaid coverage and reimbursement of Peer Support and Recovery Coaching services, and are prohibited from delivering any other covered Medicaid service without the required clearance or clearance from the Department.
033. Availability to Work or Provide Service. (3-30-07)
   a. The employer, at its discretion, may allow an individual to provide care or services on a provisional
      basis once the application for a criminal history and background check is completed and notarized, and the employer
      has reviewed the application for any disqualifying crimes or relevant records. The employer determines whether the
      individual could pose a health and safety risk to the vulnerable participants it serves. The individual is not allowed to
      provide care or services when the employer determines the individual has disclosed a disqualifying crime or relevant
      records.
   b. Those individuals licensed or certified by the Department are not available to provide services or
      receive licensure or certification until the criminal history and background check is completed and a clearance issued
      by the Department.

034. Additional Criminal Convictions. Once an individual has received a criminal history clearance,
      any additional criminal convictions must be reported by the agency to the Department when the agency learns of the
      conviction. (3-30-07)

045. Providers Subject to Criminal History Check Requirements. The following providers must
      receive a criminal history clearance: (3-30-07)
   a. Contracted Non-Emergency Medical Transportation Providers. All staff of transportation providers
      having contact with participants must comply with IDAPA 16.05.06, “Criminal History and Background Checks,”
      with the exception of individual contracted transportation providers defined in Subsection 870.02 of these rules.
      (4-7-11)
   b. Provider types deemed by the Department to be at high risk for fraud, waste, and abuse under
      Subsection 200.02 of these rules must consent to comply with criminal background checks, including fingerprinting,
      in accordance with 42 CFR 455.434.

(BREAK IN CONTINUITY OF SECTIONS)

210. CONDITIONS FOR PAYMENT.

01. Participant Eligibility. The Department will reimburse providers for medical care and services,
    regardless of the current eligibility status of the medical assistance participant in the month of payment, provided a
    complete and properly submitted claim for payment has been received and each of the following conditions are met:
    (3-20-14)
   a. The participant was found eligible for medical assistance for the month, day, and year during which
      the medical care and services were rendered; (3-30-07)
   b. The participant received such medical care and services no earlier than the third month before the
      month in which application was made on such participant's behalf; and (3-30-07)
   c. The provider verified the participant’s eligibility on the date the service was rendered and can
      provide proof of the eligibility verification. (3-20-14)
   d. Not more than twelve (12) months have elapsed since the month of the latest participant services
      for which such payment is being made. Medicare cross-over claims are excluded from the twelve (12) month
      submittal limitation. (3-30-07)

02. Time Limits. The time limit set forth in Subsection 210.01.d. of this rule does not apply with
    respect to retroactive eligibility adjustment. When participant eligibility is determined retroactively, the Department
will reimburse providers for services within the period of retroactive eligibility if a claim for those services is submitted within twelve (12) months of the date of the participant’s eligibility determination. (3-20-14)

03. Acceptance of State Payment. By participating in the Medical Assistance Program, providers agree to accept, as payment in full, the amounts paid by the Department for services to Medicaid participants. Providers also agree to provide all materials and services without unlawfully discriminating on the grounds of race, age, sex, creed, color, national origin, or physical or intellectual disability. (3-30-07)

04. Payment in Full. If a provider accepts Medicaid payment for a covered service, the Medicaid payment must be accepted as full payment for that service, and the participant cannot be billed for the difference between the billed amount and the Medicaid allowed amount. (3-30-07)

05. Medical Care Provided Outside the State of Idaho. Out-of-state medical care is subject to the same utilization review and other Medicaid coverage requirements and restrictions as medical care received within the state of Idaho. (3-30-07)

06. Ordering, Prescribing, and Referring Providers. Any service or supply ordered, prescribed, or referred by a physician or other professional who is not an enrolled Medicaid provider will not be reimbursed by the Department. (3-20-14)

07. Referral From Participant’s Assigned Primary Care Provider. Medicaid services may require a referral from the participant’s assigned primary care provider. Services requiring a referral are listed in the Idaho Medicaid Provider Handbook. Services provided without a referral, when one is required, are not covered and are subject to sanctions, recoupment, or both. The Department may change the services that require a referral after appropriate notification of Medicaid-eligible individuals and providers as specified in Section 563 of these rules. (3-25-16)

08. Follow-up Communication with Assigned Primary Care Provider. Medicaid services may require timely follow-up communication with the participant’s assigned primary care provider. Services requiring post-service communication with the primary care provider and time frames for that communication are listed in the Idaho Medicaid Provider Handbook. Services provided without timely communication of care outcomes, when communication is required, are not covered and are subject to sanctions, recoupment, or both. The Department may change the services that require communication of care outcomes after appropriate notification of Medicaid eligible individuals and providers as specified in Section 563 of these rules. (3-25-16)

09. Services Delivered Via Telehealth. Services delivered via telehealth as defined in Title 54, Chapter 57, Idaho Code, must be identified as such in accordance with billing requirements published in the Idaho Medicaid Provider Handbook. Telehealth services billed without being identified as such are not covered. Services delivered via telehealth may be reimbursed within limitations defined by the Department in the Idaho Medicaid Provider Handbook. Fee for service reimbursement is not available for a telephone conversation, electronic mail message (e-mail), or facsimile transmission (fax) between a physician and a participant. (3-25-16)

10. Services Subject to Electronic Visit Verification (EVV). Services requiring EVV compliance are subject to quality review. EVV services billed without the minimum essential elements, as defined by Section 1903(l)(2) of the Social Security Act, may be denied, delayed, or subject to sanctions or recoupment, or both, in accordance with IDAPA 16.05.07, “The Investigation and Enforcement of Fraud, Abuse, and Misconduct.”

(BREAK IN CONTINUITY OF SECTIONS)

720. HOME HEALTH SERVICES: DEFINITIONS.

01. Aggregator. System that collects provider EVV information from multiple software platforms and standardizes the information in MMIS for EVV data validation. (____)

02. Claims Adjudication. The process of determining Medicaid financial responsibility for claims
Electronic Visit Verification (EVV). EVV is a software or device(s) that electronically captures information verifying services delivered in a participant’s home.

Home Health Plan of Care. A written description of home health services to be provided to a participant as defined in IDAPA 16.03.07, “Home Health Agencies.”

Home Health Services. Home health services are services and items including nursing services, home health aide services, physical therapy, occupational therapy, speech-language pathology services, audiology services, and medical supplies, equipment, and appliances that are provided under a home health plan of care.

Ordered by a physician as part of a home health plan of care;

Performed by a licensed, qualified professional acting within their authorized scope of practice;

Typically received by a participant at the participant’s place of residence, but may be received in any setting in which normal life activities take place, other than a hospital, nursing facility, ICF/ID unless such services are not otherwise required to be provided by the ICF/ID, or any other setting in which payment is made or could be made, under Medicaid for inpatient services that include room and board; and

Reasonable and medically necessary for the treatment of a disability, illness, or injury for a Medicaid participant.

Home health visits services are limited to one hundred (100) visits per calendar year per person.

Audiology services under Subsections 740 through 749 of these rules;

Medical supplies, items, and appliances under Subsections 750 through 779 of these rules;

Physical therapy, occupational therapy, and speech-language pathology services under Subsections 730 through 739 of these rules; and
723. HOME HEALTH SERVICES: PROCEDURAL REQUIREMENTS.

01. Physician Orders.

a. Home health services must be ordered by a physician, nurse midwife, nurse practitioner, clinical nurse specialist, or physician assistant. Such Orders must include at a minimum, the physician’s provider’s National Provider Identifier (NPI), the services or items to be provided, the frequency, and, where applicable, the expected duration of time for which the home health services will be needed. Orders for medical supplies, equipment, and appliances are detailed in Section 753 of these rules.

b. In the event that home health services are required for extended periods, these services must be reordered as necessary, but at least every sixty (60) days for services and at least annually for medical supplies, equipment, and appliances.

02. Face-to-Face Encounter for Home Health Services, — Excluding Medical Supplies, Equipment, and Appliances.

a. For the initiation of home health services, excluding medical supplies, equipment, and appliances, the participant’s physician, or a non-physician practitioner as authorized in this rule, must document that a face-to-face encounter that is related to the primary reason the patient requires home health services occurred with the participant no more than ninety (90) days before, or thirty (30) days after, the start of the home health services. Appropriate documentation must indicate the practitioner who conducted the encounter, and the date of the encounter as described in the CMS/Medicare DME coverage manual.

i. For home health services, the face-to-face encounter must have occurred no more than ninety (90) days before, or thirty (30) days after, the start of the home health services.

ii. For home health medical supplies, equipment, and appliances, the face-to-face encounter must have occurred no more than six (6) months before the start of services.

b. The face-to-face encounter may occur via telehealth, as defined in Title 54, Chapter 57, Idaho Code Subsection 210.09 of these rules.

c. The face-to-face encounter may be performed by participant’s physician, including an attending acute or post-acute physician, or one (1) of the following non-physician practitioners (NPP):

i. The participant’s physician, including an attending acute or post-acute physician;

ii. A nurse practitioner or clinical nurse specialist working in collaboration with the ordering physician;

iii. A nurse midwife; or

iv. A physician assistant under the supervision of the ordering physician.

d. If the face-to-face encounter is performed by an allowed NPP, the NPP must communicate the clinical findings of that face-to-face encounter to the ordering physician.

02c. Face-to-Face Encounter for Home Health Medical Supplies, Equipment, and Appliances.

a. For the initiation of home health medical supplies, equipment, and appliances, the participant’s physician, or a non-physician practitioner as authorized in Subsection 723.02 of this rule, must document that a face-to-face encounter that is related to the primary reason the patient requires medical supplies, equipment, and
appliances, occurred with the participant no more than six (6) months before the start of services. Appropriate documentation must indicate the practitioner who conducted the encounter, and the date of the encounter as described in the CMS/Medicare DME coverage manual.

(7-1-17)

b. The face-to-face encounter may occur via telehealth, as defined in Title 54, Chapter 57, Idaho Code.

(7-1-17)

c. The face-to-face encounter may be performed by participant’s physician, including an attending acute or post-acute physician, or one (1) of the following non-physician practitioners (NPP):

i. A nurse practitioner or clinical nurse specialist working in collaboration with the ordering physician;

(7-1-17)

ii. A physician assistant under the supervision of the ordering physician.

(7-1-17)

d. If the face-to-face encounter is performed by an allowed NPP, the NPP must communicate the clinical findings of that face-to-face encounter to the ordering physician.

(7-1-17)

043. Home Health Plan of Care.

(7-1-17)

a. All home health services must be provided under a home health plan of care that is established prior to beginning treatment. The home health plan of care and must be signed by the licensed, qualified professional who established the plan and must contain the information required under IDAPA 16.03.07, “Home Health Agencies.”

(7-1-17)

b. All home health plans of care must be reviewed by the participant’s physician as necessary, but ordering provider at least every sixty (60) days for services, and at least annually for medical supplies, equipment, and appliances.

(7-1-17)

724. ELECTRONIC VISIT VERIFICATION (EVV).

Effective July 1, 2021, Home Health Agencies (HHA) are required to submit claims using a compliant EVV system as mandated by Section 12006 of the 21st Century Cures Act for all services provided in the participant’s residence, except for the provision of medical supplies and equipment. Providers must:

01. Maintain System. Maintain an EVV system chosen by their agency that is certified as compliant with the MMIS aggregator, as determined by the Department and/or the MMIS Contractor;

(____)

02. Document Consent. Document and retain participant consent for use of location and identity verification methods;

(____)

03. Develop Policies and Procedures. Develop and maintain policies and procedures outlining agency implementation and use of EVV technology, including strategies for safeguarding of participant information and privacy; and

(____)

04. Submit EVV Data. Submit EVV data that captures these six (6) system-validated data elements for services delivered in the participant’s home:

a. Date of service;

(____)

b. Time the service begins and ends;

(____)

c. Individual providing the service;

(____)

d. Participant receiving the service;

(____)

e. Type of service performed; and

(____)
72.65. HOME HEALTH SERVICES: PROVIDER QUALIFICATIONS AND DUTIES.
In order to participate as a Home Health Agency (HHA) provider for Medicaid-eligible persons, the provider must be licensed as required by the state, and be certified to participate in the Medicare Program. Loss of either state license or Medicare Program certification is cause for termination of Medicaid provider status. (3-30-07)

72.66. HOME HEALTH SERVICES: PROVIDER REIMBURSEMENT.

01. Mileage Included in Cost. Payment by the Department for home health services will include mileage as part of the cost of the visit. (3-30-07)

02. Payment Procedures - Home Health Services. Payment for home health services will be limited to the services authorized in Sections 720 through 722 of these rules and must not exceed the lesser of reasonable cost as determined by Medicare or the Medicaid percentile cap. (3-30-07)

a. For visits performed in the first state fiscal year for which this Subsection is in effect, the Medicaid percentile cap will be established at the seventy-fifth percentile of the ranked costs per visit as determined by the Department using the data from the most recent finalized Medicare cost reports on hand in the Department on June 1, 1987. Thereafter, the Medicaid percentile cap will be revised annually, effective at the beginning of each state fiscal year. Revisions will be made using the data from the most recent finalized Medicare cost reports on hand thirty (30) days prior to the effective date. (3-30-07)

b. When determining reasonable costs of rented medical equipment ordered by a physician and used for the care of the participant, the total rental cost of a Durable Medical Equipment (DME) item must not exceed one-tenth (1/10) of the total purchase price of the item. A minimum rental rate of fifteen dollars ($15) per month is allowed on all DME items. Payment by the Department for home health will include mileage as part of the cost of the visit. (7-1-17)

c. The Department may enter into lease/purchase agreements with providers in order to purchase medical equipment when the rental charges total the purchase price of the equipment. Provider claims for services requiring EVV will include the corresponding EVV data elements listed in Subsection 724.04 of these rules. Provider EVV data will be submitted to the state’s aggregator prior to billing claims. Claims corresponding to EVV data submissions are subject to a quality review in accordance with Subsection 210.09 of these rules. (3-30-07)

d. The Department will not pay for services at a cost in excess of prevailing Medicare rates. (3-30-07)

02. Medical Supplies, Equipment, and Appliances. Payment for medical supplies, equipment, and appliances is detailed in Subsection 755 of these rules. (3-30-07)

72.67. -- 729. (RESERVED)
IDAPA 16 – DEPARTMENT OF HEALTH AND WELFARE
16.03.10 – MEDICAID ENHANCED PLAN BENEFITS
DOCKET NO. 16-0310-2002
NOTICE OF RULEMAKING – PROPOSED RULE

AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section 56-202(b) and the 21st Century Cures Act – Public Law 114–255, Section 12006.

PUBLIC HEARING SCHEDULES: Public hearings concerning this rulemaking will be held as follows. ONE (1) is for Electronic Visit Verification – Personal Care Services and TWO (2) is for Behavioral Care Units:

<table>
<thead>
<tr>
<th>PUBLIC HEARINGS</th>
</tr>
</thead>
<tbody>
<tr>
<td>For Electronic Visit Verification (EVV) --</td>
</tr>
<tr>
<td>Wednesday, October 14, 2020, 3:00 p.m. - 5:00 p.m. MDT</td>
</tr>
<tr>
<td>WebEx INFORMATION</td>
</tr>
<tr>
<td>WebEx Phone: +1-415-655-0003 US Toll</td>
</tr>
<tr>
<td>+1-720-650-7664 United States Toll</td>
</tr>
<tr>
<td>Meeting Number (Access Code): 133 127 0087</td>
</tr>
<tr>
<td>Meeting password: medicaidhearing (63342243 from phones and video systems)</td>
</tr>
<tr>
<td>WebEx Link: <a href="https://idhw.webex.com/idhw/j.php?MTID=m552a7147cb81abe347c3ac20a559c64c">https://idhw.webex.com/idhw/j.php?MTID=m552a7147cb81abe347c3ac20a559c64c</a></td>
</tr>
</tbody>
</table>

| For Behavioral Care Units -- |
| Friday, October 16, 2020, 1:00 p.m. - 2:00 p.m. MDT |
| WebEx INFORMATION |
| WebEx Phone: +1-415-655-0003 US Toll |
| +1-720-650-7664 United States Toll |
| Meeting Number (Access Code): 133 091 2789 |
| Meeting password: 9wpq64v5xm9 (99776485 from phones and video systems) |
| WebEx Link: https://idhw.webex.com/idhw/j.php?MTID=mccf4fd75ab5d64ae832315a5595029ac |

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

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

**ELECTRONIC VISIT VERIFICATION (EVV) - PERSONAL CARE SERVICES (PCS) and Aged and Disabled (A&D) Waiver Services -- All Sections EXCEPT for 267 and 268 --** This rulemaking is being done by the Department to secure state authority allowing implementation of an Electronic Visit Verification (EVV) system to comply with Section 12006 of the 21st Century Cures Act (Public Law 114–255) while helping minimize provider administrative burden. The Cures Act mandates states to implement an Electronic Visit Verification (EVV) system for all Personal Care Services (PCS) and Aged and Disabled (A&D) Waiver Services that require an in-home visit by a provider.
EVV Implementation aims to protect participants by verifying services are received using an electronic verification method (phone, GPS, etc.), and also aims to reduce instances of fraud, waste, and abuse by providers who bill for these services. Medicaid is in the process of implementing an Open Model structure for providers, allowing providers freedom to choose the EVV provider that best fits with each agency’s budget and needs as long as it is certified as compatible with the Data Aggregator DXC Technology (Medicaid’s existing Medicaid Management Information System vendor) will launch to process EVV claims. DXC will also include provider training and certification to help the implementation process. Rulemaking will be as minimal as possible, to ensure CMS compliance with the Act, while procedural guidance will be provided via Idaho Provider Handbook and DXC training materials.

The Department is also simplifying existing procedural requirements in rule related to Home Health services that correspond to EVV implementation.

BEHAVIORAL CARE UNITS (BCU) -- ONLY Sections 267 and 268 -- The Department, providers, and the Idaho Health Care Association have agreed to increase the current Behavioral Care Unit (BCU) census requirement from 20% to 30% for new BCU providers. This increase will help the Department maintain support for BCU providers consistent with state needs and aligns this chapter with HB351 (2020) requirements for nursing facilities. The changes contained in this rulemaking are the first stage of those required to comply with the aforementioned legislation. These changes were requested by stakeholders to be put into rule as soon as possible. Other changes are planned for 2021 to complete the alignment of this chapter with the requirements of this new statute.

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 for EVV-PCS and BCU.

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

**EVV - PCS and A&D -- S1418 (2020) approved costs that include a one-time system implementation expense of $545,700 from the SGF for SFY2020. This cost is shared with expenses shown with the companion docket for 16.03.09 Medicaid Basic Plan Benefits for EVV Home Health services. To minimize fiscal impact to SGF, the Department chose to pursue the minimum system implementation by amending the contract with our current MMIS contractor (DXC Technologies) to add an MMIS Aggregator for EVV and provide training and validation for providers that must comply with EVV requirements. Providers are allowed the choice of the EVV Solution that meets their agency’s budget and process needs, if it is verified as compatible by the MMIS subcontractor in charge of the EVV work. A rate increase was approved, and this was for PCS and related A&D Waiver Services totaling $1,589,000 of the combined budget allocation. These rate increases went into effect on July 1, 2020. Ongoing support and maintenance related to EVV systems include a monthly fee, that is incorporated in the annually approved MMIS Contract and is not expected to add to an additional line item for the future.**

**BCU --** Budgets for nursing facilities will remain the same. There is no anticipated fiscal impact to state or general funds as a result of this rulemaking.

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(2), Idaho Code, negotiated rulemaking was not conducted because negotiated rulemaking was not feasible. However, for both **EVV - PCS and BCU - extensive informal negotiated rulemaking was conducted with stakeholders in 2019 and 2020.**

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A

ASSISTANCE ON TECHNICAL QUESTIONS: For assistance on technical questions concerning the proposed rule, for **EVV - PCS** contact Jennifer Pinkerton (208) 287-1171; for **BCU** contact Angela Toomey at (208) 364-1817.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before October 28, 2020.
THE FOLLOWING IS THE PROPOSED TEXT FOR DOCKET NO. 16-0310-2002
(Only Those Sections With Amendments Are Shown.)

041. **SPECIALIZED REIMBURSEMENT: ELECTRONIC VISIT VERIFICATION (EVV).**

01. Services Subject to EVV Requirement. Effective July 1, 2021, providers of the following services are required to submit claims using a compliant EVV system as mandated by Section 12006 of the 21st Century Cures Act for services provided in a participant’s residence:

   a. Private Duty Nursing Services as described in Sections 200 through 210 of these rules;

   b. Personal Care Services (PCS) as described in Sections 300 through 309 of these rules;

   c. The following Aged and Disabled Waiver Services as described in Sections 320 through 329 of these rules:

      i. Attendant Care;

      ii. Homemaker; and

      iii. Respite.

02. EVV Definitions.

   a. Aggregator. System that collects provider EVV information from multiple software platforms and standardizes the information in MMIS for EVV data validation.

   b. Claims Adjudication. The process of determining Medicaid financial responsibility for claims submitted to MMIS.

   c. Electronic Visit Verification (EVV). EVV is software or device(s) that electronically captures information verifying services delivered in a participant’s home.

03. Claims Subject to EVV Requirements. To submit eligible claims for services with EVV requirements, providers must:

   a. Maintain an EVV system chosen by their agency and certified as compliant with the MMIS aggregator, as determined by the Department and/or the MMIS Contractor;
b. Document and retain participant consent for use of location and identity verification methods; 

c. Develop and maintain policies and procedures outlining agency implementation and use of EVV technology, including strategies for safeguarding of participant information and privacy; and

d. Submit EVV data that captures these six (6) system-validated data elements for services delivered in the Participant's home:

i. Date of service;

ii. Time the service begins and ends;

iii. Individual providing the service;

iv. Participant receiving the service;

v. Type of service performed; and

vi. Location of service delivery.

e. Provider claims for services requiring EVV will include the corresponding EVV data elements listed above. Provider EVV data will be submitted to the state's aggregator prior to billing claims. These claims are subject to a quality review in accordance with Subsection 210.10 of IDAPA 16.03.09, "Medicaid Basic Plan Benefits."

0412. -- 049. (RESERVED)

(BREAK IN CONTINUITY OF SECTIONS)

202. PRIVATE DUTY NURSING: ELIGIBILITY.
To be eligible for Private Duty Nursing (PDN), the nursing needs must be of such a nature that the Idaho Nursing Practice Act, Rules, Regulations, or policy require the service to be provided by an Idaho Licensed Registered Nurse (RN), or by an Idaho Licensed Practical Nurse (LPN), and require more individual and continuous care than is available from Home Health nursing services. PDN service will be authorized by the Department prior to delivery of service.

(3-19-07)

203. PRIVATE DUTY NURSING: FACTORS ASSESSED FOR ELIGIBILITY AND REDETERMINATION.
Factors assessed for eligibility/redetermination include:

01. Age for Eligibility. The individual is under the age of twenty-one (21) years.

(3-19-07)

02. Maintained in Personal Residence. That the child is being maintained in their personal residence and receives safe and effective services through PDN services.

(3-19-07)

03. Medical Justification. The child receiving PDN services has medical justification and physician's orders.

(3-19-07)

04. Written Plan of Care. That there is an updated written plan of care signed by the attending physician, the parent or legal guardian, PDN, RN supervisor, and a representative from the Department.

(3-19-07)

05. Attending Physician. That the attending physician has determined the number of PDN hours needed to ensure the health and safety of the child in their home.

(3-19-07)
06. **Redetermination.** Redetermination will be at least annually. The purpose of an annual redetermination for PDN is to:

- **a.** Determine if the child continues to meet the PDN criteria in Subsection 203.01 through 203.05 of these rules; and
- **b.** Assure that services and care are medically necessary and appropriate.

(3-19-07)

204. **PRIVATE DUTY NURSING: COVERAGE AND LIMITATIONS.**

PDN services are functions that cannot be delegated to an Unlicensed Assistive Personnel (UAP) as defined by Idaho Code and IDAPA 23.01.01, “Rules of the Idaho Board of Nursing.”

(3-19-07)

01. **Ordered by a Physician.** PDN Services must be ordered by a physician and include:

- **a.** A medical status that is so complex or unstable, as determined by the attending physician, that licensed or professional nursing assessment is needed to determine the need for changes in medications or other interventions; or
- **b.** An assessment by a licensed registered nurse of a child's health status for unstable chronic conditions that includes an evaluation of the child's responses to interventions or medications.

(3-19-07)

02. **Plan of Care.** PDN Services must include a Plan of Care that:

- **a.** Is developed by a multi-disciplinary team to include, at a minimum, the parent or legal guardian, the primary PDN, RN, or RN Supervisor, and a representative from the Department;
- **b.** Includes all aspects of the medical, licensed, and personal care services medically necessary to be performed, including the amount, type, and frequency of such service;
- **c.** Is approved and signed by the attending physician, parent or legal guardian, and primary PDN, RN, or RN supervisor, and a representative from the Department; and
- **d.** Is revised and updated as child's needs change or upon significant change of condition, but at least annually, and is submitted to the Department for review and prior authorization of service.

(3-19-07)

03. **Status Updates.** Status updates must be completed every ninety (90) days from the start of services. The Status Update is intended to document any change in the child's health status. Annual plan reviews will replace the fourth quarter Status Update. The Status Update must be signed by both the parent or legal guardian and the primary RN supervisor completing the form.

(3-19-07)

04. **Limitations.** PDN Services may be provided only in the child's personal residence or when normal life activities take the child outside of this setting. However, if service is requested only to attend school or other activities outside of the home, but does not need such services in the home, private duty nursing will not be authorized. The following are specifically excluded as personal residences:

- **a.** Licensed Nursing Facilities (NF);
- **b.** Licensed Intermediate Care Facilities for Persons with Intellectual Disabilities (ICF/ID);
- **c.** Residential Assisted Living Facilities;
- **d.** Licensed hospitals; and
- **e.** Public or private school.

(3-19-07)

(3-19-07)

(3-20-20)

(3-19-07)

05. – 208. (RESERVED)
209. PRIVATE DUTY NURSING: PROVIDER QUALIFICATIONS AND DUTIES.

01. Primary RN Responsibility For PDN Redetermination. Primary RN responsibility for PDN redetermination is to submit a current plan of care to the Department at least annually or as the child's needs change. Failure to submit an updated plan of care to the Department prior to the end date of the most recent authorization will cause payments to cease until completed information is received and evaluated and authorization given for further PDN services. The plan of care must include all requested material outlined in Subsection 204.02 of these rules.

(3-19-07)

02. Physician Responsibilities. Physician responsibilities include:

a. Medical Information. Provide the Department the necessary medical information in order to establish the child's medical eligibility for services based on an EPSDT screen.

(3-19-07)

b. Order Services. Order all services to be delivered by the private duty nurse.

(3-19-07)

c. Sign Medical Plan of Care. Review, sign, and date child's Medical Plan of Care and orders at least annually or as condition changes.

(3-19-07)

d. Community Resources. Determine if the combination of PDN Services along with other community resources are sufficient to ensure the health or safety of the child. If it is determined that the resources are not sufficient to ensure the health and safety of the child, notify the family and the Department and facilitate the admission of the child to the appropriate medical facility.

(3-19-07)

03. Private Duty Nurse Responsibilities. RN supervisor or an RN providing PDN services responsibilities include:

a. Notify the physician immediately of any significant changes in the child's medical condition or response to the service delivery;

(3-19-07)

b. Notify the Department within forty-eight (48) hours or on the first business day following a weekend or holiday of any significant changes in the child's condition or if the child is hospitalized at any time;

(3-19-07)

c. Evaluate changes of condition;

(3-19-07)

d. Provide services in accordance with the nursing care plan; and

(3-19-07)

e. Must ensure copies of records are maintained in the child's home including:

i. The date;

(3-19-07)

ii. Time of start and end of service delivery each day;

(3-19-07)

iii. Comments on child's response to services delivered;

(3-19-07)

iv. Nursing assessment of child's status and any changes in that status per each working shift;

(3-19-07)

v. Services provided during each working shift; and

(3-19-07)

vi. The Medical Plan of Care signed by the physician, primary RN, the parent or legal guardian and a representative from the Department.

(3-19-07)

04. LPN Providers. In the case of LPN providers, document that oversight of services by an RN is in accordance with the Idaho Nursing Practice Act and IDAPA 23.01.01, “Rules of the Board of Nursing.” RN
Supervisor visits must occur at least once every thirty (30) days when services are provided by an LPN.

05. **Ensure Health and Safety of Children.** PDN providers must notify the physician if the combination of Private Duty Nursing (PDN) Services along with other community resources are not sufficient to ensure the health or safety of the child.

210. **PRIVATE DUTY NURSING SERVICES: PROVIDER REIMBURSEMENT.**

Provider claims for PDN Services require EVV compliance as described in Section 041 of these rules in order to be eligible for payment.

2101. - 214. (RESERVED)

(BREAK IN CONTINUITY OF SECTIONS)

267. **NURSING FACILITY: TREATMENT OF NEWLY LICENSED FACILITIES WITH BEHAVIORAL CARE UNITS.**

01. **Criteria to Qualify as a New BCU On or After September 1, 2017.** Facilities licensed on or after September 1, 2017, must meet the qualifications for a BCU described in Subsections 266.02, 266.03, and 266.05 through 266.15 of these rules. BCU facilities existing prior to this date that receive a new license due to a change in ownership will not be subject to the provisions of this rule.

02. **Reimbursement for Years One (1) Through Three (3).** Beginning with the first day of the first month following approval of the BCU license and when the provider can demonstrate that BCU days from a minimum of sixty (60) calendar days, regardless of payer source, divided by total census days for that same sixty-day (60) period, equals or exceeds a minimum of twenty thirty percent (230%), the provider’s rate will change to reflect BCU services. The provider will be reimbursed at the median rate for BCU facilities of that type, either freestanding or hospital-based, for the remaining period within the first three (3) full years of operation. If there are no facilities of the same type (for example, no other hospital-based BCUs), the provider will receive the median rate for their type, but the direct cost portion of the rate will be revised to the median rate of existing BCUs. The rate change to reflect BCU services will not be retroactive to rate quarters paid prior to meeting the twenty thirty percent (230%) BCU occupancy requirement.

a. A nursing facility must apply for BCU eligibility on an annual basis in accordance with Subsection 266.07 of these rules. If the provider did not meet the BCU qualifications described in Section 266 of these rules, with the exception of Subsections 266.01 and 266.04, for a full cost report year corresponding to the initial application year, the twenty percent (20%) BCU day requirement will apply only to days beginning with the first day of BCU eligibility to the end of the year.

b. During the period of limitation, the facility’s rate will be modified annually on July 1st to reflect the current median rate for skilled care facilities of that type. After the first three (3) complete years of operations, the facility will have its rate established at the next July 1st with the existing facilities in accordance with Subsections 266.03 and 266.05 of these rules.

c. During the period of limitation, providers must demonstrate annually that BCU days were equal to or exceeded twenty percent (20%), as described in Subsection 267.02 of this rule. Providers must provide a report to the Department with a calculation of BCU days for each month during the period being reviewed. If the twelve-month (12) average falls below twenty percent (20%), then the BCU reimbursement will revert back to the median rate per Section 260 of these rules. Once the Department has established the provider has met the requirements of Subsection 267.01 of this rule they will be eligible for a new rate outlined in Subsection 267.02.b. of this rule.

268. **NURSING FACILITY: EXISTING PROVIDER ELECTS TO ADD BEHAVIORAL CARE UNIT (BCU).**
An existing nursing facility provider that elects to add a BCU on or after September 1, 2017, may be deemed eligible after meeting the following requirements:

01. **Meet Criteria for BCU.** The nursing facility provider must meet the criteria for a BCU described in Section 266 of these rules. (3-28-18)

02. **BCU Eligible Days.** The provider must demonstrate that BCU days from a minimum of sixty (60) calendar days, regardless of payer source, divided by total census days for that same sixty (60) day period, equals or exceeds a minimum of twenty thirty percent (230%). (3-28-18)

03. **BCU Payments.** Once the provider has met the requirements of Subsections 268.01 and 268.02 of this rule, beginning with the first day of the first quarter following approval of the BCU license, the provider’s rate will change to reflect BCU services. At no time will the rate be adjusted mid-quarter. The rate will be calculated as follows.

   a. The indirect costs, costs exempt from limitations, and property cost will be reimbursed in the same manner as all other nursing facilities in accordance with reimbursement provisions contained in IDAPA 16.03.10, “Medicaid Enhanced Plan Benefits.” (3-28-18)

   b. The direct cost portion of the rate will be reimbursed as a prospective rate not subject to a change from an interim rate to a final rate. The direct cost portion of the rate will be calculated by determining the median direct cost portion for BCU facilities of that type (freestanding or hospital-based) effective on July 1 of the rate year. If there are no facilities of the same type (for example no other hospital-based BCUs), the direct cost portion of the rate will be set at the median rate of existing BCUs. The direct cost portion of the rate will be updated on July 1 of each rate year until the provider has a qualifying twelve-month (12) cost report, as described in Subsection 268.03.d. of this rule. (3-28-18)

   c. The provider’s total calculated rate will be subject to customary charge limitations and any other rate reductions implemented for other providers. (3-28-18)

   d. Once the provider has a twelve-month (12) cost report that contains a full year of BCU costs, their rate will be calculated in the same manner as other providers in accordance with IDAPA 16.03.10, “Medicaid Enhanced Plan Benefits.” (3-28-18)

   e. A nursing facility must apply for BCU eligibility on an annual basis in accordance with Section 266 of these rules. If the provider was not a BCU for a full cost report year, the twenty percent (20%) BCU day requirement will apply only to days beginning with the first day of BCU eligibility to the end of the year. (3-28-18)

(BREAK IN CONTINUITY OF SECTIONS)

301. **PERSONAL CARE SERVICES: DEFINITIONS.**

01. **Children’s PCS Assessment.** A set of standardized criteria adopted by the Department to assess functional and cognitive abilities of children to determine eligibility for children’s personal care services (PCS). (3-29-10)

02. **Natural Supports.** Personal associations and relationships that enhance the quality and security of life for people, such as family, friends, neighbors, volunteers, church, or others. (3-29-10)

03. **Personal Care Services (PCS).** A range of medically-oriented care services related to a participant's physical or functional requirements. These services are provided in the participant's home or personal residence, but do not include housekeeping or skilled nursing care. (3-29-10)

04. **PCS Family Alternate Care Home.** The private home of an individual licensed by the Department to provide personal care services (PCS) to one (1) or two (2) children, who are unable to reside in their own home and
require assistance with medically-oriented tasks related to the child's physical or functional needs. (3-29-10)

(BREAK IN CONTINUITY OF SECTIONS)

304. PERSONAL CARE SERVICES: PROCEDURAL REQUIREMENTS.

01. Service Delivery Based on Plan of Care or NSA. All PCS services are provided based on a written plan of care or a negotiated service agreement (NSA). The requirements for the NSA for participants in Residential Assisted Living Facilities are described in IDAPA 16.03.22, “Residential Assisted Living Facilities.” The requirements for the NSA for participants in Certified Family Homes are described in IDAPA 16.03.19, “Certified Family Homes.” The Personal Assistance Agency and the participant who lives in their own home are responsible to prepare the plan of care. (3-19-07)

a. The plan of care for participants who live in their own homes or in a PCS Family Alternate Care Home is based on:

i. The physician's or authorized provider's information if applicable; (4-2-08)

ii. The results of the UAI for adults, the children’s PCS assessment and, if applicable, the QIDP's assessment and observations of the participant; and (3-29-10)

iii. Information obtained from the participant. (3-19-07)

b. The plan of care must include all aspects of medical and non-medical care that the provider needs to perform, including the amount, type and frequency of necessary services. (3-19-07)

c. The plan of care must be revised and updated based upon treatment results or a change(s) in the participant's needs, or both, but at least annually. (3-19-07)

d. The plan of care or NSA must meet the person-centered planning requirements described in Sections 316 and 317 of these rules. (7-1-16)

02. Service Supervision. The delivery of PCS may be overseen by a licensed registered nurse (RN) or Qualified Intellectual Disabilities Professional (QIDP). The BLTC will identify the need for supervision. (3-20-20)

a. Oversight must include all of the following:

i. Assistance in the development of the written plan of care; (3-19-07)

ii. Review of the treatment given by the personal assistant through a review of the participant's PCS record as maintained by the provider; (3-19-07)

iii. Reevaluation of the plan of care as necessary; and (3-19-07)

iv. Immediate notification of the guardian, emergency contact, or family members of any significant changes in the participant's physical condition or response to the services delivered. (3-19-07)

b. All participants who are developmentally disabled, other than those with only a physical disability as determined by the BLTC, may receive oversight by a QIDP as defined in 42 CFR 483.430. Oversight must include:

i. Assistance in the development of the plan of care for those aspects of active treatment that are provided in the participant's personal residence by the personal assistant; (3-19-07)

ii. Review of the care or training programs given by the personal assistant through a review of the
03. Prior Authorization Requirements. All PCS services must be prior authorized by the Department. Authorizations will be based on the information from:

a. The children’s PCS assessment or Uniform Assessment Instrument (UAI) for adults;  

b. The individual service plan developed by the Personal Assistance Agency; and  

c. Any other medical information that supports the medical need.

04. PCS Record Requirements for a Participant in Their Own Home. The PCS records must be maintained on for all participants who receiving PCS in their own homes or in a PCS Family Alternate Care Home.

a. Written Documentation Requirements. The PCS provider must maintain written documentation of every visit made to the participant's home and must record the following minimum information:

   i. Date and time of visit;  
   ii. Length of visit;  
   iii. Services provided during the visit; and  
   iv. Documentation of any changes noted in the participant's condition or any deviations from the plan of care.

b. Participant's Signature. The participant or legal guardian must sign the record of service delivery verifying that the services were delivered using the provider’s EVV system. The BLTC may waive this requirement if it determines the participant is not able to verify the service delivery.

c. Provider Signature. The Plan of Care must be signed by the provider indicating that they will deliver services according to the authorized service plan and consistent with home and community-based requirements.

d. Copy Requirement. A copy of the information required in Subsection 304.04 of these rules must be maintained and available in a format accessible to the participant's home unless the BLTC authorizes the information to be kept elsewhere. Failure to maintain this information may result in recovery of funds paid for undocumented services.

e. Telephone Tracking – Electronic Visit Verification (EVV) System. Agencies may employ a software system that allows personal assistants to register their start and stop times and a list of services by placing a telephone call to the agency system from the participant's home. This system – EVV systems as described in Section 041 of these rules will not take the place of documentation requirements of Subsection 304.04 of these rules but may be used to generate documentation retained in the participant’s home.

05. PCS Record Requirements for a Participant in a Residential Assisted Living Facility or Certified Family Home. The PCS records must be maintained on all participants who receive PCS in a Residential Assisted Living Facility (RALF) or Certified Family Home (CFH).

a. Participant in a Residential Assisted Living Facility RALF. The additional PCS record requirements
for participants in Residential Assisted Living Facility RALF are described in IDAPA 16.03.22, “Residential Assisted Living Facilities.” (7-1-16)

b. Participant in a Certified Family Home CFH. The additional PCS record requirements for participants in Certified Family Homes CFHs are described in IDAPA 16.03.19, “Certified Family Homes.” (7-1-16)

c. Participant’s Signature. The participant or legal guardian must sign the NSA agreeing to the delivery of services as specified. (7-1-16)

d. Provider Signature. The NSA must be signed by the supervisory nurse or agency personnel responsible for developing the NSA with the participant, and must indicate that they will deliver services according to the authorized NSA and consistent with home and community-based requirements. (7-1-16)

06. Provider Responsibility for Notification. The Personal Assistance Agency is responsible to notify the BLTC and physician or authorized provider when any significant changes in the participant's condition are noted during service delivery. This notification must be documented in the Personal Assistance Agency record.

(3-20-20)

(BREAK IN CONTINUITY OF SECTIONS)

307. PERSONAL CARE SERVICES: PROVIDER REIMBURSEMENT.

01. Reimbursement Rate. Personal assistance providers will be paid a uniform reimbursement rate for service as established by the Department. Provider claims for payment will be submitted on claim forms provided or approved by the Department. Billing instructions will be provided by the Department. (4-4-13)

02. Calculated Fee. The fee calculated for personal care provider reimbursement includes a basic rate for services and mileage. No separate charges for mileage will be paid by the Department for non-medical transportation, unless approved by the Department or its contractor under a Home and Community-Based Services (HCBS) waiver, or provider transportation to and from the participant's home. Fees will be calculated as provided in Subsections 307.03 through 307.08 of this rule. (4-4-13)

03. Weighted Average Hourly Rate Methodology. Annually Medicaid will conduct a poll of all Idaho nursing facilities and ICFs/ID, and establish the weighted average hourly rates (WAHR) for nursing facility industry employees in comparable positions (i.e. RN, QMRP, certified and non-certified nurse's aides) in Idaho to be used in calculating the reimbursement rate to be effective on July 1st of that year. (4-4-13)

04. Payment for Personal Assistance Agency. Payment for personal assistance agency services will be paid according to rates established by the Department.

a. The Department will establish Personal Assistance Agency rates for personal assistance services based on the WAHR.

| Personal Assistance Agencies | WAHR x supplemental component = $ amount/hour |

(4-4-13)

b. The Department will calculate a supplemental component using costs reported for travel, administration, training, and all payroll taxes and fringe benefits. The survey data is the cost information collected during the prior State Fiscal Year. (4-4-13)

c. The Department will survey one hundred percent (100%) of personal care service PCS providers. Cost surveys are unaudited, but a provider that refuses or fails to respond to the periodic state surveys may be disenrolled as a Medicaid provider. The Department will derive reimbursement rates using direct care staff costs,
employment related expenditures, program related costs, and indirect general and administrative costs in the reimbursement methodology, when these costs are incurred by a provider. (4-4-13)

05. Payment Levels for Adults in Residential-Assisted Living Facilities a RALF or Certified Family Homes CFH. Adult participants living in Residential-Assisted Living Facilities (RALF) or Certified Family Homes CFHs will receive personal care services PCS at a rate based on their care level. Each level will convert to a specific number of hours of personal care services PCS.

a. Reimbursement Level I -- One point twenty-five (1.25) hours of personal care services PCS per day or eight point seventy-five (8.75) hours per week. (3-19-07)

b. Reimbursement Level II -- One point five (1.5) hours of personal care services PCS per day or ten point five (10.5) hours per week. (3-19-07)

c. Reimbursement Level III -- Two point twenty-five (2.25) hours of personal care services PCS per day or fifteen point seventy-five (15.75) hours per week. (3-19-07)

d. Reimbursement Level IV - One point seventy-nine (1.79) hours of personal care services PCS per day or twelve point five (12.5) hours per week. This level will be assigned based on a documented diagnosis of mental illness, intellectual disability, or Alzheimer’s disease. If an individual is assessed as Level III with a diagnosis of mental illness, intellectual disability, or Alzheimer’s disease the provider reimbursement rate will be the higher amount as described in Subsection 307.05.c. of these rules. (3-19-07)

06. Attending Physician Reimbursement Level. The attending physician or authorized provider will be reimbursed for services provided using current payment levels and methodologies for other services provided to eligible participants. (3-19-07)

07. Supervisory RN and QMRR QIDP Reimbursement Level. The supervisory RN and QMRR QIDP will be reimbursed at a per visit amount established by the Department for supervisory visits. Participant evaluations and Care Plan Development will be reimbursed at a rate established by the Department, following authorization by the Department or its contractor.

a. The number of supervisory visits by the RN or QMRR QIDP to be conducted per calendar quarter will be approved as part of the PCS care plan by the Department or its contractor. (4-4-13)

b. Additional evaluations or emergency visits in excess of those contained in the approved care plan will be authorized when needed by the Department or its contractor. (4-4-13)

08. Payment for PCS Family Alternate Care Home. The Department will establish PCS Family Alternate Care Home rates for personal assistance services based on the WAHR. Based on the survey conducted, the Department will calculate a supplemental component using costs reported for administration, and training. The survey data is the cost information collected during the prior State Fiscal Year.

<table>
<thead>
<tr>
<th>PCS Family Alternate Care Home</th>
<th>Children’s PCS Assessment Weekly Hours x (WAHR x supplemental component)</th>
<th>$ amount/week</th>
</tr>
</thead>
</table>

(4-4-13)

09. EVV Compliance. Provider claims for PCS require EVV compliance as described in Section 041 of these rules in order to be eligible for payment. (___)

308. PERSONAL CARE SERVICES (PCS): QUALITY ASSURANCE.

01. Responsibility for Quality. Personal Assistance Agencies, Residential-Assisted Living Facilities RALFs, and Certified Family Homes CFHs furnishing PCS are responsible for assuring that they provide quality services in compliance with applicable rules. (7-1-16)
02. Review Results. Results of quality assurance reviews conducted by the Department must be transmitted to the provider within forty-five (45) days after the review is completed. (3-19-07)

03. Quality Improvement Plan. The provider must respond within forty-five (45) days after the results are received. If problems are identified, the provider must implement a quality improvement plan and report the results to the Department upon request. (3-19-07)

04. HCBS Compliance. Personal Assistance Agencies are responsible for ensuring they meet the setting requirements described in Section 313 of these rules. Residential Assisted Living Facilities (RALFs), and Certified Family Homes (CFHs) are responsible for ensuring that they meet the setting requirements described in Sections 313 and 314 of these rules. All providers furnishing PCS are responsible for ensuring they meet the person-centered planning requirements described in Sections 316 through 317 of these rules. PCS providers must comply with associated Department quality assurance activities. The Department may take enforcement actions as described in IDAPA 16.03.09, “Medicaid Basic Plan Benefits,” Section 205, if the provider fails to comply with any term or provision of the provider agreement, or any applicable state or federal regulation. (7-1-16)

(BREAK IN CONTINUITY OF SECTIONS)

324. AGED AND DISABLED WAIVER SERVICES: TARGET GROUP.
Persons who would be Medicaid eligible if residing in a nursing facility, require the level of care provided in a nursing facility, are over the age of eighteen (18), demonstrate significant disability on the Uniform Assessment Instrument (UAI), and have deficits that affect their ability to function independently. (3-19-07)

325. HOME AND COMMUNITY-BASED SERVICES (HCBS) WAIVER: PARTICIPANT LIMITATIONS.
The number of Medicaid participants to receive waiver services under the Home and Community-Based Services (HCBS) waiver for the aged and disabled will be limited to the projected number of users identified in the Department's approved waiver. If necessary, participants who apply for waiver services after the waiver maximum has been reached will be placed on a waiting list and will have their applications processed after September 30th of each new waiver year. The earliest effective date of waiver service delivery for these participants will be October 1st of each new waiver year. (3-19-07)

326. AGED AND DISABLED WAIVER SERVICES: COVERAGE AND LIMITATIONS.

01. Adult Day Health. Adult day health is a supervised, structured service generally furnished four (4) or more hours per day on a regularly scheduled basis, for one (1) or more days per week. It is provided outside the home of the participant in a non-institutional, community-based setting, and it encompasses health services, social services, recreation, supervision for safety, and assistance with activities of daily living needed to ensure the optimal functioning of the participant. Adult day health services provided under this waiver will not include room and board payments. (4-4-13)

02. Adult Residential Care Services. Adult residential care services consist of a range of services provided in a homelike, non-institutional setting that include residential care or assisted living facilities (RALFs) and certified family homes (CFHs). Payment is not made for the cost of room and board, including the cost of building maintenance, upkeep and improvement. (4-4-13)

a. Adult residential care services consist of a range of services provided in a congregate setting licensed under IDAPA 16.03.22, “Residential Assisted Living Facilities,” that include:

i. Medication assistance, to the extent permitted under State law; (4-4-13)

ii. Assistance with activities of daily living; (3-19-07)

iii. Meals, including special diets; (3-19-07)
iv. Housekeeping; (3-19-07)

v. Laundry; (3-19-07)

vi. Transportation; (3-19-07)

vii. Opportunities for socialization; (3-19-07)

viii. Recreation; and (3-19-07)

ix. Assistance with personal finances. (3-19-07)

x. Administrative oversight must be provided for all services provided or available in this setting. (3-19-07)

xi. A written documented individual service plan must be negotiated between the participant or their legal representative, and a facility representative. (3-19-07)

b. Adult residential care services also consist of a range of services provided in a setting licensed under IDAPA 16.03.19, “Certified Family Homes,” that include:

i. Medication assistance, to the extent permitted under State law; (4-4-13)

ii. Assistance with activities of daily living; (4-4-13)

iii. Meals, including special diets; (4-4-13)

iv. Housekeeping; (4-4-13)

v. Laundry; (4-4-13)

vi. Transportation; (4-4-13)

vii. Recreation; and (4-4-13)

viii. Assistance with personal finances. (4-4-13)

ix. Administrative oversight must be provided for all services provided or available in this setting. (4-4-13)

x. A written documented individual service plan must be negotiated between the participant or their legal representative, and a facility representative. (4-4-13)

03. Specialized Medical Equipment and Supplies. (4-4-13)

a. Specialized medical equipment and supplies include:

i. Devices, controls, or appliances that enable a participant to increase their abilities to perform activities of daily living, or to perceive, control, or communicate with the environment in which they live; and (4-4-13)

ii. Items necessary for life support, ancillary supplies and equipment necessary for the proper functioning of such items, and durable and non-durable medical equipment not available under the Medicaid State Plan. (4-4-13)

b. Items reimbursed with waiver funds are in addition to any medical equipment and supplies furnished under the Medicaid State plan and exclude those items that are not of direct medical or remedial benefit to
04. Non-Medical Transportation. Non-medical transportation enables a waiver participant to gain access to waiver and other community services and resources.

a. Non-medical transportation is offered in addition to medical transportation required in IDAPA 16.03.09, “Medicaid Basic Plan Benefits,” and will not replace it.

b. Whenever possible, family, neighbors, friends, or community agencies who can provide this service without charge, or public transit providers will be utilized.

05. Attendant Care. Services provided under a Medicaid Home and Community-Based Services waiver that involve personal and medically oriented tasks dealing with the functional needs of the participant and accommodating the participant’s needs for long-term maintenance, supportive care, or activities of daily living (ADL). These services may include personal assistance and medical tasks that can be done by unlicensed persons, or delegated to an unlicensed person by a licensed health care professional or the participant. Services are based on the participant’s abilities and limitations, regardless of age, medical diagnosis, or other category of disability. This assistance may take the form of hands-on assistance (actually performing a task for the person) or cuing to prompt the participant to perform a task.

06. Chore Services. Chore services include the following services when necessary to maintain the functional use of the home, or to provide a clean, sanitary, and safe environment:

a. Intermittent assistance may include the following.

i. Yard maintenance;

ii. Minor home repair;

iii. Heavy housework;

iv. Sidewalk maintenance; and

v. Trash removal to assist the participant to remain in the home.

b. Chore activities may include the following:

i. Washing windows;

ii. Moving heavy furniture;

iii. Shoveling snow to provide safe access inside and outside the home;

iv. Chopping wood when wood is the participant's primary source of heat; and

v. Tacking down loose rugs and flooring.

c. These services are only available when neither the participant, nor anyone else in the household is capable of performing or financially providing for them, and where no other relative, caregiver, landlord, community volunteer, agency, or third-party payer is willing to provide them or is responsible for their provision.

d. In the case of rental property, the landlord’s responsibility under the lease agreement will be examined prior to any authorization of service. Chore services are limited to the services provided in a home rented or owned by the participant.

07. Companion Services. Companion services include non-medical care, supervision, and socialization provided to a functionally impaired adult. Companion services are in-home services to ensure the safety
and well-being of a person who cannot be left alone because of frail health, a tendency to wander, inability to respond to emergency situations, or other conditions that would require a person on-site. The service provider, who may live with the participant, may provide voice cuing and occasional assistance with toileting, personal hygiene, dressing, and other activities of daily living. Providers may also perform light housekeeping tasks that are incidental to the care and supervision of the participant. However, the primary responsibility is to provide companionship and be there in case they are needed. (4-4-13)

08. Consultation. Consultation services are services to a participant or family member. Services are provided by a Personal Assistance Agency to a participant or family member to increase their skills as an employer or manager of their own care. Such services are directed at achieving the highest level of independence and self-reliance possible for the participant and the participant’s family. Services include consulting with the participant and family to gain a better understanding of the special needs of the participant and the role of the caregiver. (4-4-13)

09. Home Delivered Meals. Home delivered meals are meals that are delivered to the participant’s home to promote adequate participant nutrition. One (1) to two (2) meals per day may be provided to a participant who:

a. Rents or owns a home; (4-4-13)
b. Is alone for significant parts of the day; (4-4-13)
c. Has no caregiver for extended periods of time; and (4-4-13)
d. Is unable to prepare a meal without assistance. (4-4-13)

10. Homemaker Services. Homemaker services consist of performing for the participant, or assisting them with, or both, the following tasks: laundry, essential errands, meal preparation, and other routine housekeeping duties if there is no one else in the household capable of performing these tasks. (4-4-13)

11. Environmental Accessibility Adaptations. Environmental accessibility adaptations include minor housing adaptations that are necessary to enable the participant to function with greater independence in the home, or without which, the participant would require institutionalization or have a risk to health, welfare, or safety. Such adaptations may include:

a. The installation of ramps and lifts, widening of doorways, modification of bathroom facilities, or installation of electric and plumbing systems that are necessary to accommodate the medical equipment and supplies necessary for the welfare of the waiver participant, but must exclude those adaptations or improvements to the home that are not of direct medical or remedial benefit to the participant, such as carpeting, roof repair, or central air conditioning. (4-4-13)
b. Unless otherwise authorized by the Department, permanent environmental modifications are limited to a home that is the participant’s principal residence, and is owned by the participant or the participant’s non-paid family. (4-4-13)
c. Portable or non-stationary modifications may be made when such modifications can follow the participant to their next place of residence or be returned to the Department. (4-4-13)

12. Personal Emergency Response System (PERS). PERS is an electronic device that enables a waiver participant to secure help in an emergency. The participant may also wear a portable “help” button to allow for mobility. The system is connected to the participant’s phone and programmed to signal a response center once a “help” button is activated. The response center is staffed by trained professionals. This service is limited to participants who:

a. Rent or own a home, or live with unpaid caregivers; (4-4-13)
b. Are alone for significant parts of the day; (3-19-07)
c. Have no caregiver for extended periods of time; and (4-4-13)
d. Would otherwise require extensive, routine supervision. (3-19-07)

13. Respite Care. Respite care includes short-term breaks from care giving responsibilities to non-paid caregivers. The caregiver or participant is responsible for selecting, training, and directing the provider. While receiving respite care services, the waiver participant cannot receive other services that are duplicative in nature. Respite care services provided under this waiver do not include room and board payments. Respite care services may be provided in the participant’s residence, a certified family home CFH, a developmental disabilities agency, a residential care or assisted living facility RALF, or an adult day health facility. (4-4-13)

14. Skilled Nursing. Skilled nursing includes intermittent or continuous oversight, training, or skilled care that is within the scope of the Nurse Practice Act. Such care must be provided by a licensed registered nurse, or licensed practical nurse under the supervision of a licensed registered nurse, licensed to practice in Idaho. These services are not appropriate if they are less cost effective than a Home Health visit. (4-4-13)

15. Habilitation. Habilitation services assist the participant to reside as independently as possible in the community, or maintain family unity. (4-4-13)

   a. Residential habilitation. Residential habilitation services consist of an integrated array of individually tailored services and supports furnished to eligible participants. These services and supports are designed to assist the participants to reside successfully in their own homes, with their families, or in certified family homes. The services and supports that may be furnished consist of the following: (4-4-13)

      i. Self-direction consists of identifying and responding to dangerous or threatening situations, making decisions and choices affecting the individual's life, and initiating changes in living arrangements or life activities; (3-30-07)

      ii. Money management consists of training or assistance in handling personal finances, making purchases, and meeting personal financial obligations; (3-30-07)

      iii. Daily living skills consist of training in accomplishing routine housekeeping tasks, meal preparation, dressing, personal hygiene, self-administration of medications, and other areas of daily living including proper use of adaptive and assistive devices, appliances, as well as following home safety, first aid, and emergency procedures; (3-30-07)

      iv. Socialization consists of training or assistance in participation in general community activities and establishing relationships with peers with an emphasis on connecting the participant to their community. Socialization training associated with participation in community activities includes assisting the participant to identify activities of interest, working out arrangements to participate in such activities, and identifying specific training activities necessary to assist the participant to continue to participate in such activities on an on-going basis. Socialization training does not include participation in nontherapeutic activities that are merely diversional or recreational in nature; (3-30-07)

      v. Mobility consists of training or assistance aimed at enhancing movement within the person's living arrangement, mastering the use of adaptive aids and equipment, accessing and using public transportation, independent travel, or movement within the community; or (3-30-07)

      vi. Behavior shaping and management consist of training and assistance in appropriate expressions of emotions or desires, assertiveness, acquisition of socially appropriate behaviors, or extension of therapeutic services that consist of reinforcing physical, occupational, speech, and other therapeutic programs. (3-30-07)

      vii. Personal assistance services necessary to assist the individual in daily living activities, household tasks, and such other routine activities as the person or the person’s primary caregiver(s) are unable to accomplish on their own behalf. Personal assistance services include direct assistance with grooming, bathing, and eating, assistance with medications that are ordinarily self-administered, supervision, communication assistance, reporting changes in the waiver participant’s condition and needs, household tasks essential to health care at home to include
general cleaning of the home, laundry, meal planning and preparation, shopping, and correspondence.  

b. Day habilitation. Day habilitation consists of assistance with acquisition, retention, or improvement in self-help, socialization, and adaptive skills that take place in a non-residential setting, separate from the home or facility in which the participant resides. Services will normally be furnished four (4) or more hours per day on a regularly scheduled basis, for one (1) or more days per week, unless provided as an adjunct to other day activities included in a participant's plan of care. Day habilitation services will focus on enabling the participant to attain or maintain their maximum functional level and will be coordinated with any physical therapy, occupational therapy, or speech-language pathology services listed in the plan of care. In addition, day habilitation services may serve to reinforce skills or lessons taught in school, therapy, or other settings.  

16. Supported Employment. Supported employment consists of competitive work in integrated work settings for individuals with the most severe disabilities for whom competitive employment has not traditionally occurred, or for whom competitive employment has been interrupted or intermittent as a result of a severe disability. Because of the nature and severity of their disability, these individuals need intensive supported employment services or extended services in order to perform such work.  

a. Supported employment services rendered under this waiver are not available under a program funded by either the Rehabilitation Act of 1973, as amended, or the Individuals with Disabilities Education Act (IDEA). Documentation must be maintained in the file of each individual receiving this service verifying that the service is not otherwise available or funded under the Rehabilitation Act of 1973, as amended, or the IDEA.  

b. Federal Financial Participation (FFP) cannot be claimed for incentive payments, subsidies, or unrelated vocational training expenses such as the following: incentive payments made to an employer of waiver participants to encourage or subsidize the employer’s participation in a supported employment program, payments that are passed through to beneficiaries of a supported employment program, or payments for vocational training that is not directly related to a waiver participant's supported employment program.  

17. Transition Services. Transition services include goods and services that enable a participant residing in a nursing facility, hospital, IMD, or ICF/ID to transition to a community-based setting. A participant is eligible to receive transition services immediately following discharge from a qualified institution after residing within that institution for a minimum of forty-five (45) Medicaid-reimbursed days.  

a. Qualified Institutions include the following:  

i. Skilled, or Intermediate Care Facilities;  

ii. Nursing Facility;  

iii. Licensed Intermediate Care Facility for the Persons with Intellectual Disabilities (ICF/ID);  

iv. Hospitals; and  

v. Institutions for Mental Diseases (IMD).  

b. Transition services may include the following goods and services:  

i. Security deposits that are required to obtain a lease on an apartment or home;  

ii. Cost of essential household furnishings, including furniture, window coverings, food preparation items, and bed/bath linens; and  

iii. Set-up fees or deposits for utility or service access, including telephone, electricity, heating and water;  

iv. Services necessary for the individual's health and safety such as pest eradication and one-time
cleaning prior to occupancy; (4-11-19)
  v. Moving expenses; and (4-11-19)
  vi. Activities to assess need, arrange for and procure transition services. (4-11-19)

c. Excluded goods and services. Transition services do not include ongoing expenses, real property, ongoing utility charges, décor, or diversion/recreational items such as televisions, DVDs, and computers. (4-11-19)

d. Service limitations. Transition services are limited to a total cost of two thousand dollars ($2,000) per participant and can be accessed every two (2) years, contingent upon a qualifying transition from an institutional setting. Transition services are furnished only to the extent that the person is unable to meet such expense or when the support cannot be obtained from other sources. (4-11-19)

(BREAK IN CONTINUITY OF SECTIONS)

328. AGED AND DISABLED WAIVER SERVICES: PROCEDURAL REQUIREMENTS.

01. Role of the Department. The Department or its contractor will provide for the administration of the UAI, and the development of the initial individual service plan. This will be done either by Department staff or a contractor. The Department or its contractor will review and approve all individual service plans, and will authorize Medicaid payment by type, scope, and amount. (4-4-13)

  a. Services that are not in the individual service plan approved by the Department or its contractor are not eligible for Medicaid payment. (4-4-13)

  b. Services in excess of those in the approved individual service plan are not eligible for Medicaid payment. (3-19-07)

  c. The earliest date that services may be approved by the Department or its contractor for Medicaid payment is the date that the participant's individual service plan is signed by the participant or their designee. (4-4-13)

02. Pre-Authorization Requirements. All waiver services must be pre-authorized by the Department. Authorization will be based on the information from:

  a. The UAI; (3-19-07)

  b. The individual service plan developed by the Department or its contractor; and (3-19-07)

  c. Any other medical information that verifies the need for nursing facility services in the absence of the waiver services. (3-19-07)

03. UAI Administration. The UAI will be administered, and the initial individual service plan developed, by the Department or its contractor. (4-4-13)

04. Individual Service Plan. All waiver services must be authorized by the Department or its contractor in the Region where the participant will be residing and services provided based on a written documented individual service plan.

  a. The initial individual service plan is developed by the Department or its contractor, based on the UAI, in conjunction with:

     i. The waiver participant (with efforts made by the Department or its contractor to maximize the participant's involvement in the planning process by providing them with information and education regarding their rights); (4-4-13)
ii. The guardian, when appropriate; (3-30-07)

iii. The supervising nurse or case manager, when appropriate; and (3-19-07)

iv. Others identified by the waiver participant. (3-19-07)

b. The individual service plan must include the following:

i. The specific type, amount, frequency, and duration of Medicaid reimbursed waiver services to be provided; (3-30-07)

ii. Supports and service needs that are to be met by the participant's family, friends, neighbors, volunteers, church, and other community services; (3-30-07)

iii. The providers of waiver services when known; (3-30-07)

iv. Documentation that the participant has been given a choice between waiver services and institutional placement; and (3-19-07)

v. The signature of the participant or their legal representative, agreeing to the plan. (3-19-07)

c. The individual service plan must be revised and updated at least annually, based upon treatment results or a change in the participant's needs. (3-19-07)

d. All services reimbursed under the Aged and Disabled Waiver must be authorized by the Department or its contractor prior to the payment of services. (4-4-13)

e. The individual service plan, which includes all waiver services, is monitored by the Personal Assistance Agency, participant, family, and the Department or its contractor. (4-4-13)

05. Service Delivered Following a Written Documented Plan of Care. All services that are provided must be based on a written documented plan of care. (3-30-07)

a. The plan of care is developed by the plan of care team that includes:

i. The waiver participant with efforts made to maximize their participation on the team by providing them with information and education regarding their rights; (3-30-07)

ii. The guardian when appropriate; (3-30-07)

iii. Service provider identified by the participant or guardian; and (3-30-07)

iv. May include others identified by the waiver participant. (3-30-07)

b. The plan of care must be based on an assessment process approved by the Department. (3-30-07)

c. The plan of care must include the following:

i. The specific types, amounts, frequency and duration of Medicaid reimbursed waiver services to be provided; (3-30-07)

ii. Supports and service needs that are to be met by the participant's family, friends and other community services; (3-30-07)

iii. The providers of waiver services; (3-30-07)
iv. Goals to be addressed within the plan year; (3-30-07)

v. Activities to promote progress, maintain functional skills, or delay or prevent regression; and (3-30-07)

vi. The signature of the participant or their legal representative. (3-30-07)

vii. The signature of the agency or provider indicating that they will deliver services according to the authorized service plan and consistent with home and community-based requirements. (7-1-16)

d. The plan must be revised and updated by the plan of care team based upon treatment results or a change in the participant's needs. A new plan must be developed and approved annually. (3-30-07)

e. The Department's Nurse Reviewer monitors the plan of care and all waiver services. (7-1-16)

f. The plan of care may be adjusted during the year with an addendum to the plan. These adjustments must be based on changes in a participant’s need or demonstrated outcomes. Additional assessments or information may be clinically necessary. Adjustment of the plan of care is subject to prior authorization by the Department. (3-30-07)

06. Individual Service Plan and Written Plan of Care. The development and documentation of the individual service plan and plan of care must meet the person-centered planning requirements described in Sections 316 and 317 of these rules. (7-1-16)

07. Provider Records. Records will be maintained on each waiver participant. (3-19-07)

a. Each service provider must document each visit made or service provided to the participant, and will record at a minimum the following information: (3-19-07)

i. Date and time of visit; (3-19-07)

ii. Services provided during the visit; (3-19-07)

iii. Provider observation of the participant's response to the service, if appropriate to the service provided, including any changes in the participant's condition; and (3-19-07)

iv. Length of visit, including time in and time out, if appropriate to the service provided. Unless the Department or its contractor determines that the participant is unable to do so, the service delivery will be verified by the participant as evidenced by their signature on the service record. (4-4-13)

b. The provider is required to keep the original service delivery record. A copy of the service delivery record will be maintained in and available in a format accessible to the participant's living arrangement unless authorized to be kept elsewhere by the Department. Failure to maintain documentation according to these rules will result in the recoupment of funds paid for undocumented services. (4-4-13)

c. The individual service plan initiated by the Department or its contractor must specify which waiver services are required by the participant. The plan will contain all elements required by Subsection 328.04.a. of these rules and a copy of the most current individual service plan will be maintained in the participant's home and will be available to all service providers and the Department. A copy of the current individual service plan and UAI will be available from the Department or its contractor to each individual service provider with a release of information signed by the participant or legal representative. (4-4-13)

d. Record requirements for participants in residential care or assisted living facilities RALFs are described in IDAPA 16.03.22, “Residential Assisted Living Facilities.” (4-4-13)

e. Record requirements for participants in certified family homes CFHs are described in IDAPA 16.03.19, “Certified Family Homes.” (4-4-13)
f. EVV Systems as described in Section 041 of these rules will not take the place of documentation requirements of Subsection 328.07 of this rule, but maybe used to generate documentation retained in the participant’s home.

08. Provider Responsibility for Notification. The service provider is responsible to notify the Department or its contractor, physician or authorized provider, or case manager, and family if applicable, when any significant changes in the participant's condition are noted during service delivery. Such notification will be documented in the service record.

09. Records Retention. Personal Assistance Agencies, and other providers are responsible to retain their records for five (5) years following the date of service.

10. Requirements for an Fiscal Intermediary (FI). Participants of PCS will have one (1) year from the date that services begin in their geographic region to obtain the services of an FI and become an employee in fact or to use the services of an agency. Provider qualifications are in accordance with Section 329 of these rules.

329. AGED AND DISABLED WAIVER SERVICES: PROVIDER QUALIFICATIONS AND DUTIES.
Each provider must have a signed provider agreement with the Department for each of the services it provides.

01. Employment Status. Unless otherwise specified by the Department, each individual service provider must be an employee of record or fact of an agency. The Department may enter into provider agreements with individuals in situations in which no agency exists, or no fiscal intermediary agency is willing to provide services. Such agreements will be reviewed annually to verify whether coverage by a personal assistance agency or fiscal intermediary agency is still not available.

02. Fiscal Intermediary Services. An agency that has responsibility for the following:

a. To directly assure compliance with legal requirements related to employment of waiver service providers;

b. To offer supportive services to enable participants or their families to perform the required employer tasks themselves;

c. To bill the Medicaid program for services approved and authorized by the Department;

d. To collect any participant participation due;

e. To pay personal assistants and other waiver service providers for service;

f. To perform all necessary withholding as required by state and federal labor and tax laws, rules and regulations;

the Department and the general public;

g. To assure that personal assistants providing services meet the standards and qualifications under in

h. To maintain liability insurance coverage;

i. To conduct, at least annually, participant satisfaction or quality control reviews that are available to the Department and the general public;

j. To obtain such criminal background checks and health screens on new and existing employees of

03. Provider Qualifications. All providers of homemaker services, respite care, adult day health,
transportation, chore services, companion services, attendant care, adult residential care, and home delivered meals must meet, either by formal training or demonstrated competency, the training requirements contained in the provider training matrix and the standards for direct care staff and allowable tasks or activities in the Department's Aged and Disabled waiver as approved by CMS.

(4-4-13)

a. A waiver provider cannot be a relative of any participant to whom the provider is supplying services.

(3-19-07)

b. For the purposes of Section 329 of these rules, a relative is defined as a spouse or parent of a minor child.

(3-19-07)

c. Individuals who provide direct care or services must satisfactorily complete a criminal history and background check in accordance with IDAPA 16.05.06, “Criminal History and Background Checks.”

(4-4-13)

04. Quality Assurance. Providers of Aged and Disabled waiver services are responsible for ensuring that they provide quality services in compliance with applicable rules.

(7-1-16)

a. The results of a quality assurance review conducted by the Department must be transmitted to the provider within forty-five (45) days after the review is completed.

(7-1-16)

b. The provider must respond to the quality assurance review within forty-five (45) days after the results are received from the Department. If problems are identified, the provider must implement a quality improvement plan and report the results to the Department upon request.

(7-1-16)

c. The Department may take enforcement actions as described in IDAPA 16.03.09, “Medicaid Basic Plan Benefits,” Section 205, if the provider fails to comply with any term or provision of the provider agreement, or any applicable state or federal regulation.

(7-1-16)

05. HCBS Setting Compliance. Providers of Aged and Disabled waiver services are responsible for ensuring that they meet the person-centered planning and setting quality requirements described in Sections 311 through 318 of these rules, as applicable, and must comply with associated Department quality assurance activities.

(7-1-16)

06. Specialized Medical Equipment and Supplies. Providers of specialized medical equipment and supplies must be enrolled in the Medicaid program as participating medical vendor providers. Providers must ensure all items meet applicable standards of manufacture, design and installation. Preference will be given to equipment and supplies that are the most cost-effective option to meet the participant’s needs.

(4-4-13)

07. Skilled Nursing Service. Skilled nursing service providers must be licensed in Idaho as a licensed registered nurse or licensed practical nurse in good standing, or must be practicing on a federal reservation and be licensed in another state. Skilled nursing providers who provide direct care and services must satisfactorily complete a criminal history and background check in accordance with IDAPA 16.05.06, “Criminal History and Background Checks.”

(4-4-13)

08. Consultation Services. Consultation services must be provided through a Personal Assistance Agency by a person who has demonstrated skills in training participants/family members in hiring, firing, training, and supervising their own care providers.

(4-4-13)

09. Adult Residential Care. Adult residential care providers will meet all applicable state laws and regulations. In addition, the provider must ensure that adequate staff are provided to meet the needs of the participants accepted for admission. Adult residential care providers who provide direct care or services must satisfactorily complete a criminal history and background check in accordance with IDAPA 16.03.19, “Certified Family Homes,” or IDAPA 16.03.22, “Residential Assisted Living Facilities.”

(4-4-13)

10. Home Delivered Meals. Providers of home delivered meals must be a public agency or private business, and must exercise supervision to ensure that:

(4-4-13)
a. Each meal meets one-third (1/3) of the Recommended Daily Allowance, as defined by the Food and Nutrition Board of the National Research Council of the National Academy of Sciences; (4-4-13)

b. Meals are delivered in accordance with the service plan, in a sanitary manner, and at the correct temperature for the specific type of food; (4-4-13)

c. Documentation is maintained demonstrating that the meals served are made from the highest USDA grade for each specific food served; (4-4-13)

d. The agency or business is inspected and licensed as a food establishment under IDAPA 16.02.19, “Idaho Food Code”; (4-4-13)

e. A Registered Dietitian documents the review and approval of menus, menu cycles, and any changes or substitutions; and (4-4-13)

f. Either by formal training or demonstrated competency, the training requirements contained in the Idaho provider training matrix and the standards for direct care staff in accordance with Subsection 329.03 of this rule have been met. (4-4-13)

11. Personal Emergency Response Systems. Personal emergency response system providers must demonstrate that the devices installed in a waiver participant’s home meet Federal Communications Standards, or Underwriter’s Laboratory Standards, or equivalent standards. (4-4-13)

12. Adult Day Health. Providers of adult day health must meet the following requirements: (4-4-13)

a. Services provided in a facility must be provided in a facility that meets the building and health standards identified in IDAPA 16.03.21, “Developmental Disabilities Agencies (DDA).” (4-4-13)

b. Services provided in a home must be provided in a home that meets the standards of home certification identified in IDAPA 16.03.19, “Certified Family Homes.” (4-4-13)

c. Services provided in a residential adult living facility RALF must be provided in a residential adult living facility that meets the standards identified in IDAPA 16.03.22, “Residential Assisted Living Facilities.” (4-4-13)

d. Adult day health providers who provide direct care or services must satisfactorily complete a criminal history check in accordance with IDAPA 16.05.06, “Criminal History and Background Checks.” (4-4-13)

e. Providers of adult day health must notify the Department on behalf of the participant, if the adult day health is provided in a certified family home CFH other than the participant's primary residence. The adult day health provider must provide care and supervision appropriate to the participant’s needs as identified on the plan. (4-4-13)

f. Adult day health providers who provide direct care or services must be free from communicable disease. (4-4-13)

g. All providers of adult day health services must meet, either by formal training or demonstrated competency, the training requirements contained in the Idaho provider training matrix and the standards for direct care staff in accordance with Subsection 329.03 of this rule. (4-4-13)

13. Non-Medical Transportation Services. Providers of non-medical transportation services must: (4-4-13)

a. Possess a valid driver’s license; (4-4-13)

b. Possess valid vehicle insurance; and (4-4-13)
c. Meet, either by formal training or demonstrated competency, the training requirements contained in the Idaho provider training matrix and the standards for direct care staff in accordance with Subsection 329.03 of this rule.  

14. **Attendant Care.** Attendant care providers who provide direct care and services must satisfactorily complete a criminal history and background check in accordance with IDAPA 16.05.06, “Criminal History and Background Checks.” All providers of attendant care must meet, either by formal training or demonstrated competency, the training requirements contained in the Idaho provider training matrix and the standards for direct care staff in accordance with Subsection 329.03 of this rule.  

15. **Homemaker Services.** The homemaker must be an employee of record or fact of an agency. Homemaker service providers who provide direct care or services must satisfactorily complete a criminal history and background check in accordance with IDAPA 16.05.06, “Criminal History and Background Checks.” All providers of homemaker services must meet, either by formal training or demonstrated competency, the training requirements contained in the Idaho provider training matrix and the standards for direct care staff in accordance with Subsection 329.03 of this rule.  

16. **Environmental Accessibility Adaptations.** All services must be provided in accordance with applicable state or local building codes and meet state or local building, plumbing, and electrical requirements for certification.  

17. **Residential Habilitation Supported Living.** When residential habilitation services are provided by an agency, the agency must be certified by the Department as a residential habilitation agency under IDAPA 16.04.17, “Residential Habilitation Agencies,” and supervise the direct services provided. Individuals who provide residential habilitation services in the home of the participant (supported living) must be employed by a residential habilitation agency. Providers of residential habilitation services must meet the following requirements:  

a. Direct service staff must meet the following minimum qualifications:  

i. Be at least eighteen (18) years of age;  

ii. Be a high school graduate, or have a GED, or demonstrate the ability to provide services according to a plan of service;  

iii. Have current CPR and First Aid certifications;  

iv. Be free from communicable disease;  

v. Each staff person assisting with participant medications must successfully complete and follow the “Assistance with Medications” course available through the Idaho Professional Technical Education Program approved by the Idaho State Board of Nursing or other Department-approved training.  

vi. Residential habilitation service providers who provide direct care or services must satisfactorily complete a criminal history and background check in accordance with IDAPA 16.05.06, “Criminal History and Background Checks;”  

vii. Have appropriate certification or licensure if required to perform tasks that require certification or licensure. Direct service staff must also have taken a traumatic brain injury training course approved by the Department.  

b. The provider agency is responsible for providing direct service staff with a traumatic brain injury training course approved by the Department, and training specific to the needs of the participant.  

c. Prior to delivering services to a participant, agency direct service staff must complete an orientation program. The orientation program must include the following subjects:  

i. Purpose and philosophy of services;
ii. Service rules;  
(3-30-07)

iii. Policies and procedures;  
(3-30-07)

iv. Proper conduct in relating to waiver participants;  
(3-30-07)

v. Handling of confidential and emergency situations that involve the waiver participant;  
(3-30-07)

vi. Participant rights;  
(3-30-07)

vii. Methods of supervising participants;  
(3-30-07)

viii. Working with individuals with traumatic brain injuries; and  
(3-30-07)

ix. Training specific to the needs of the participant.  
(3-30-07)

d. Additional training requirements must be completed within six (6) months of employment with the residential habilitation agency and include at a minimum:  
(3-29-12)

i. Instructional techniques: Methodologies for training in a systematic and effective manner;  
(3-30-07)

ii. Managing behaviors: Techniques and strategies for teaching adaptive behaviors;  
(3-30-07)

iii. Feeding;  
(3-30-07)

iv. Communication;  
(3-30-07)

v. Mobility;  
(3-30-07)

vi. Activities of daily living;  
(3-30-07)

vii. Body mechanics and lifting techniques;  
(3-30-07)

viii. Housekeeping techniques; and  
(3-30-07)

ix. Maintenance of a clean, safe, and healthy environment.  
(3-30-07)

e. The provider agency will be responsible for providing on-going training specific to the needs of the participant as needed.  
(4-4-13)

18. **Day Habilitation.** Providers of day habilitation services must have a minimum of two (2) years of experience working directly with persons with a traumatic brain injury, must provide documentation of standard licensing specific to their discipline, and must have taken a traumatic brain injury course approved by the Department. Day habilitation providers who provide direct care and services must satisfactorily complete a criminal history and background check in accordance with IDAPA 16.05.06, “Criminal History and Background Checks.”  
(4-4-13)

19. **Respite Care.** Providers of respite care services must meet the following minimum qualifications:  
(4-4-13)

a. Have received care giving instructions in the needs of the person who will be provided the service;  
(4-4-13)

b. Demonstrate the ability to provide services according to a plan of service;  
(4-4-13)
c. Be free of communicable disease; and (4-4-13)

d. Respite care service providers who provide direct care and services must satisfactorily complete a criminal history and background check in accordance with IDAPA 16.05.06, “Criminal History and Background Checks.” (4-4-13)

20. **Supported Employment.** Supported employment services must be provided by an agency that supervises the direct service and is accredited by the Commission on Accreditation of Rehabilitation Facilities, other comparable standards, or meet State requirements to be a State-approved provider. Supported employment service providers who provide direct care or services must satisfactorily complete a criminal history and background check in accordance with IDAPA 16.05.06, “Criminal History and Background Checks.” (3-20-20)

21. **Chore Services.** Providers of chore services must meet the following minimum qualifications:

   a. Be skilled in the type of service to be provided; and (4-4-13)

   b. Demonstrate the ability to provide services according to a plan of service. (4-4-13)

   c. Chore service providers who provide direct care and services must satisfactorily complete a criminal history and background check in accordance with IDAPA 16.05.06, “Criminal History and Background Checks.” (4-4-13)

   d. Meet, either by formal training or demonstrated competency, the training requirements in the Idaho provider training matrix and the standards for direct care staff in accordance with Subsection 329.03 of this rule. (4-4-13)

22. **Transition Services.** Transition managers as described in Section 350.01 of these rules are responsible for administering transition services. (4-11-19)

330. **AGED AND DISABLED WAIVER SERVICES: PROVIDER REIMBURSEMENT.**
The criteria used in reimbursing providers for waiver services are listed in Subsections 330.01 through 330.03 of these rules. (3-19-07)

01. **Fee for Services.** Waiver service providers will be paid on a fee for service basis as established by the Department, or as agreed upon by the Department’s contractor and the provider, depending on the type of service provided. Adult residential care will be paid on a per diem basis, based on the number of hours and types of assistance required by the participant as identified in the UAI. (4-4-13)

02. **Provider Claims.** Provider claims for payment will be submitted on claim forms provided or approved by the Department or its contractor. Billing instructions will be provided by the Department's payment system contractor. (4-4-13)

03. **Calculation of Fees.** The fees calculated for waiver services include both services and mileage. No separate charges for mileage will be paid by the Department for provider transportation to and from the participant's home or other service delivery location when the participant is not being provided waiver or state plan transportation. (3-19-07)

04. **EVV Compliance.** Provider claims for the following Aged and Disabled Waiver Services require EVV compliance as described in Section 041 of these rules in order to be eligible for payment: (___)

   a. Attendant Care; (___)

   b. Homemaker; and (___)

   c. Respite. (___)
IDAPA 16 – DEPARTMENT OF HEALTH AND WELFARE

16.03.10 – MEDICAID ENHANCED PLAN BENEFITS

DOCKET NO. 16-0310-2003

NOTICE OF RULEMAKING – ADOPTION OF TEMPORARY RULE

EFFECTIVE DATE: The effective date of the temporary rule is October 1, 2020.

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 56-202(b), Idaho Code.

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

The Department, providers, and the Idaho Health Care Association have agreed to increase the current Behavioral Care Unit (BCU) census requirement from 20% to 30% for new BCU providers. This increase will help the Department maintain support for BCU providers consistent with state needs and aligns this chapter with HB351 (2020) requirements for nursing facilities. The changes contained in this rulemaking are the first stage of those required to comply with the aforementioned legislation. These changes were requested by stakeholders to be put into rule as soon as possible. Other changes are planned for 2021 to complete the alignment of this chapter with the requirements of this new statute.

TEMPORARY RULE JUSTIFICATION: Pursuant to Section 67-5226(1)(b), Idaho Code, the Governor has found that temporary adoption of the rule is appropriate to align this chapter of rules with the requirements of HB351 (2020).

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 Angela Toomey at (208) 364-1817.

Dated this 14th day of August, 2020.

Tamara Prisock
DHW - Administrative Rules Unit
450 W. State Street - 10th Floor
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THE FOLLOWING IS THE TEMPORARY RULE FOR DOCKET NO. 16-0310-2003
(Only Those Sections With Amendments Are Shown.)
267. NURSING FACILITY: TREATMENT OF NEWLY LICENSED FACILITIES WITH BEHAVIORAL CARE UNITS.

01. Criteria to Qualify as a New BCU On or After September 1, 2017. Facilities licensed on or after September 1, 2017, must meet the qualifications for a BCU described in Subsections 266.02, 266.03, and 266.05 through 266.15 of these rules. BCU facilities existing prior to this date that receive a new license due to a change in ownership will not be subject to the provisions of this rule.

02. Reimbursement for Years One (1) Through Three (3). Beginning with the first day of the first month following approval of the BCU license and when the provider can demonstrate that BCU days from a minimum of sixty (60) calendar days, regardless of payer source, divided by total census days for that same sixty-day (60) period, equals or exceeds a minimum of twenty thirty percent (230%), the provider’s rate will change to reflect BCU services. The provider will be reimbursed at the median rate for BCU facilities of that type, either freestanding or hospital-based, for the remaining period within the first three (3) full years of operation. If there are no facilities of the same type (for example, no other hospital-based BCUs), the provider will receive the median rate for their type, but the direct cost portion of the rate will be revised to the median rate of existing BCUs. The rate change to reflect BCU services will not be retroactive to rate quarters paid prior to meeting the twenty thirty percent (230%) BCU occupancy requirement.

03. A nursing facility must apply for BCU eligibility on an annual basis in accordance with Subsection 266.07 of these rules. If the provider did not meet the BCU qualifications described in Section 266 of these rules, with the exception of Subsections 266.01 and 266.04, for a full cost report year corresponding to the initial application year, the twenty percent (20%) BCU day requirement will apply only to days beginning with the first day of BCU eligibility to the end of the year.

b. During the period of limitation, the facility’s rate will be modified annually on July 1st to reflect the current median rate for skilled care facilities of that type. After the first three (3) complete years of operations, the facility will have its rate established at the next July 1st with the existing facilities in accordance with Subsections 266.03 and 266.05 of these rules.

268. NURSING FACILITY: EXISTING PROVIDER ELECTS TO ADD BEHAVIORAL CARE UNIT (BCU).

An existing nursing facility provider that elects to add a BCU on or after September 1, 2017, may be deemed eligible after meeting the following requirements:

01. Meet Criteria for BCU. The nursing facility provider must meet the criteria for a BCU described in Section 266 of these rules.

02. BCU Eligible Days. The provider must demonstrate that BCU days from a minimum of sixty (60) calendar days, regardless of payer source, divided by total census days for that same sixty (60) day period, equals or exceeds a minimum of twenty thirty percent (230%).

03. BCU Payments. Once the provider has met the requirements of Subsections 268.01 and 268.02 of this rule, beginning with the first day of the first quarter following approval of the BCU license, the provider’s rate will change to reflect BCU services. At no time will the rate be adjusted mid-quarter. The rate will be calculated as follows.

a. The indirect costs, costs exempt from limitations, and property cost will be reimbursed in the same
manner as all other nursing facilities in accordance with reimbursement provisions contained in IDAPA 16.03.10, “Medicaid Enhanced Plan Benefits.”

b. The direct cost portion of the rate will be reimbursed as a prospective rate not subject to a change from an interim rate to a final rate. The direct cost portion of the rate will be calculated by determining the median direct cost portion for BCU facilities of that type (freestanding or hospital-based) effective on July 1 of the rate year. If there are no facilities of the same type (for example no other hospital-based BCUs), the direct cost portion of the rate will be set at the median rate of existing BCUs. The direct cost portion of the rate will be updated on July 1 of each rate year until the provider has a qualifying twelve-month (12) cost report, as described in Subsection 268.03.d. of this rule.

c. The provider’s total calculated rate will be subject to customary charge limitations and any other rate reductions implemented for other providers.

d. Once the provider has a twelve-month (12) cost report that contains a full year of BCU costs, their rate will be calculated in the same manner as other providers in accordance with IDAPA 16.03.10, “Medicaid Enhanced Plan Benefits.”

e. A nursing facility must apply for BCU eligibility on an annual basis in accordance with Section 266 of these rules. If the provider was not a BCU for a full cost report year, the twenty percent (20%) BCU day requirement will apply only to days beginning with the first day of BCU eligibility to the end of the year.
EFFECTIVE DATE: The effective date of the temporary rule is August 7, 2020.

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 67-2609(13) and 67-2609(17), Idaho Code.

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

Certain licensing agencies within the Division of Occupational and Professional Licenses allow a licensee to renew a lapsed license or registration within five (5) years of the expiration date. This process is known as reinstatement and involves additional administrative cost. The additional cost is primarily the staff time to process an application for reinstatement, to ensure compliance with relevant licensing regulations such as continuing education. This fee will cover the added expense of administering renewals for expired licenses, so that the extra cost will be borne by the individual applicant, rather than all licensees.

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

Adoption of this temporary rule is necessary for the protection of public health, safety, and welfare. The continuity of the reinstatement fee is necessary for the Division to maintain reinstatement services. Agencies within the Division rely on the revenue from the reinstatement fee to offset the administrative cost incurred when processing an expired application, as well as ensure that the extra expenses are not subsidized by all licensees, but rather the particular licensee inducing the additional cost.

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: for licensing agencies that do not have a reinstatement fee listed within their administrative rules, the reinstatement fee will be $35.

ASSISTANCE ON TECHNICAL QUESTIONS: For assistance on technical questions concerning the temporary rule, contact Rob McQuade at (208) 334-3233.

Dated this 18th Day of September, 2020.

Russell Barron
Administrator
Division of Occupational and Professional Licenses
700 W. State Street
P.O. Box 83720
Boise, ID 83720
Phone: (208) 334-3233
ibol@ibol.idaho.gov
THE FOLLOWING IS THE TEXT OF THE TEMPORARY RULE FOR DOCKET NO. 24-2001-2002
(Only Those Sections With Amendments Are Shown.)

202.  **FEES.**
Unless otherwise specified in board law or rule, boards served by the Division may charge a reinstatement fee of thirty-five dollars ($35).  (8-7-20)T

2023.  -- 999.  (RESERVED)
IDAPA 35 – STATE TAX COMMISSION

35.02.01 – TAX COMMISSION ADMINISTRATION AND ENFORCEMENT RULES

DOCKET NO. 35-0201-2001

NOTICE OF RULEMAKING – PROPOSED RULE

AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section 63-105, Idaho Code.

PUBLIC HEARING SCHEDULE: Public hearing(s) concerning this rulemaking will be scheduled if requested in writing by twenty-five (25) persons, a political subdivision, or an agency, not later than October 21, 2020.

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

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

Rule 310 - The changes to this rule add the interest rate for calendar year 2021 and the Revenue Ruling where the federal rate for the calculation can be found.

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

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

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(2), Idaho Code, negotiated rulemaking was not conducted because the rule is simple in nature.

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Tom Shaner, using the contact information below.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before October 28, 2020.

Dated this 7th of October, 2020.

Tom Shaner, Tax Research Manager
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THE FOLLOWING IS THE PROPOSED TEXT OF DOCKET NO. 35-0201-2001
(Only Those Sections With Amendments Are Shown.)

310. INTEREST RATES (RULE 310).
Sections 63-3045, 63-3073, Idaho Code

01. In General. The annual rate of interest applicable to delinquent taxes accruing or unpaid during all or any part of a calendar year is determined in accordance with Section 63-3045, Idaho Code. The rates starting with the rate applicable at July 1, 1981, and the Internal Revenue Service Revenue Rulings, if applicable for the calculation of the rate, are listed in Subsection 310.02 of this rule. These interest rates also apply to the allowance of a credit or refund of tax erroneously or illegally assessed or collected as provided in Section 63-3073, Idaho Code. (4-6-05)

02. Idaho Interest Rates and Applicable Revenue Rulings.

<table>
<thead>
<tr>
<th>PERIOD</th>
<th>RATE OF INTEREST</th>
<th>INTERNAL REVENUE SERVICE REVENUE RULING</th>
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<tr>
<td>July 1, 1981, through December 31, 1993</td>
<td>12% simple interest</td>
<td>Not Applicable</td>
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<tr>
<td>Calendar Year 1994</td>
<td>7% simple interest</td>
<td>Revenue Ruling 93-64</td>
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<td>Calendar Year 1995</td>
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<td>Revenue Ruling 94-61</td>
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<td>Revenue Ruling 95-67</td>
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<td>Revenue Ruling 2001-49</td>
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<td>Revenue Ruling 2002-64</td>
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<td>Revenue Ruling 2003-107</td>
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<td>Revenue Ruling 2013-18</td>
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<td>RATE OF INTEREST</td>
<td>INTERNAL REVENUE SERVICE REVENUE RULING</td>
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<td>Calendar Year 2015</td>
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<td>Calendar Year 2021</td>
<td>2% simple interest</td>
<td>Revenue Ruling 2020-21</td>
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EFFECTIVE DATE: A temporary rule was adopted under docket number 39-0000-2000F in the April 15, 2020, Idaho Administrative Bulletin, Vol. 20-4SE, pages 2200-2212. The effective date of the amendment to the temporary rule is January 1, 2021.

AUTHORITY: In compliance with Section 67-5226, Idaho Code, notice is hereby given this agency has amended a temporary rule. The action is authorized pursuant to Section 54-5206(1), Idaho Code.

DESCRIPTIVE SUMMARY: The following is a concise explanatory statement of the reasons for amending the temporary rule and a statement of any change between the text of the temporary rule and text of the amended temporary rule with an explanation for any changes:

The amendments to this current temporary rule, specifically in IDAPA 39.02.60, “Rules Governing License Plate Provisions,” are based on the passage of SB1349aaS-2020. The rule changes will address the modifications made by the Idaho Legislature to the Specialty License Plate Program. This rulemaking will ensure consistency between Idaho Code and the Idaho Administrative Procedures Act.

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

To reflect statutory changes made to Sections 49-402C and 49-402D, Idaho Code, during the 2nd Regular Session of the 65th Idaho Legislature (2020).

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:

This rule does include several fees; however, the proposed amendments to this temporary rule do not impact, change or modify the existing fees.

ASSISTANCE ON TECHNICAL QUESTIONS: For assistance on technical questions concerning the amendments to the temporary rule, please contact Chris Fisher, DMV Program Specialist, at (208) 334-8167.

Dated this 15th Day of September, 2020.

Ramón S. Hobdey-Sánchez, J.D.
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Idaho Transportation Department
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Phone: (208) 334-8810
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The original text of the temporary rule was published in the Idaho Administrative Special Edition Bulletin, Volume 20-4SE, April 15, 2020, pages 2200 through 2212.

THE FOLLOWING IS THE TEXT OF THE AMENDED TEMPORARY RULE FOR OMNIBUS DOCKET NO. 39-0000-2000F, IDAPA 39.02.60 ONLY (Only those sections that have changed from the original text are printed in this Bulletin following this notice.)

155. PROVISIONS FOR SPECIAL LICENSE PLATE PROGRAM PREQUALIFICATION AND APPLICATION PROCEDURES.

01. Special License Plate Prequalification. Anyone After July 1, 2020, only those agencies authorized by Section 49-402C, Idaho Code, desiring legislation to establish a Special License Plate Program may make application to the Department on a Special Plate Program application form designed and provided by the Department. If all the prequalification requirements are met by the submission of other documentation, this will also be acceptable. A Special Plate Program Development Guide will also be provided to each applicant, detailing the procedures for the prequalification and application and providing information regarding the steps required to successfully accomplish a special plate program from prequalification through passage of the legislation, statutory requirements and standards for the plate color and license plate design. (3-20-20)T (1-1-21)T

02. Special License Plate Approved by the Legislature. If a special license plate program is approved by the Idaho legislature, prior to production and sale of the special license plates, the sponsor will meet the requirements outlined in Subsection 155.03 of this rule. (3-20-20)T (1-1-21)T

03. Special Plate Requirements: (3-20-20)T

a. The individual responsible for representing the agency requesting the prequalification/application procedure will complete and sign a Special Plate Program application form that will contain a declaration of the responsible individual for certifying compliance with the requirements to the Department. (3-20-20)T (1-1-21)T

b. Responsible individual representing the agency will submit a financial plan detailing the use for the proceeds from the special plate sales. After July 1, 2020, the individual representing an eligible agency will acknowledge that all special plate sales proceeds will be deposited in the highway distribution account pursuant to Section 49-402D(a), Idaho Code. (3-20-20)T (1-1-21)T

c. On and before July 1, 2020, for non-profit agencies, the responsible individual will provide evidence that the applicant has had 501 (c) Federal Income Tax status for at least two (2) years. (3-20-20)T (1-1-21)T

04. Special License Plate Program Application Approval: (3-20-20)T

a. Upon approval of application by Department, applicant will, by September 1, deposit programming and administration fees determined by an estimate of projected programming hours required. One thousand dollars ($1,000) of this fee will not be refundable. (3-20-20)T

b. Applicant will complete and submit a list of two hundred fifty (250) applicants, currently registered in Idaho, who intend to purchase the Specialty License Plates when available. The form may be delivered to the Department by mail or electronic means such as e-mail or facsimile. (3-20-20)T

05. Submission to the Legislature. (3-20-20)T

a. For those desiring legislation, when all requirements have been met, the Department will forward the completed application to the chairman of the Transportation and Defense Committees of the Senate and the House
of Representatives, chairman of the Senate Transportation Committee and the chairman of the House Transportation and Defense Committee of the Idaho State Legislature for consideration in the next Legislative Session. This submission will be on a form developed by the Department or other documentation that meets all the requirements listed in this rule.

b. For those Special License Plate Programs with enacting legislation that fail to meet the requirements of this Section, the Department will report such finding to the chairmen of the Transportation and Defense Committees of the Idaho State Senate and the House of Representatives, and will not proceed with production and sale of the special plates.

06. **Annual Report.** An annual report form, designed and provided by the Department, will be made available to special license plate sponsors for all special license plate programs receiving revenue in existence or passed by the legislature on or prior to July 1, 2020. The report will require an accounting of revenues and expenditures associated with the funds collected for the special license plate program.

a. The report will be completed and submitted to the Department by January 1 so that by January 15 of each year the Department has the necessary data compiled and the required information forwarded to the chairmen of the Senate Transportation Committee and the chairman of the House Transportation and Defense Committees of the Idaho State Legislature.

i. All nonprofit agencies who have filed a 501(c)(3) federal income tax status will be required to submit an annual financial report.

ii. All government entities receiving any portion of revenue from the sale of specialty plates will be required to submit an annual financial report.

b. If the agency fails to provide the required report, the Department will immediately discontinue the special license plate sales for that program until the accounting is provided.

c. Military License Plate and Collegiate and University License Plate programs will not be included in this requirement.

d. All government entities with special plate programs for which revenue is deposited in the highway distribution account from the sale of their special plate program will not be included in this requirement.

07. **Appeals.** The appeals process will allow the applicant for a special license plate program to appeal the Department’s decision to deny the application (See Section 003 of this rule). The notice of the appeal will be sent in writing via mail, electronic mail or facsimile within twenty (20) days of the denial.

08. **Cancellation of Plate Programs.** The cancellation of a plate program will occur when a nonprofit agency (who has filed a 501(c)(3) federal income tax status) plate program fails to meet any of the following criteria:

a. Fails to sell one-thousand (1000) plates, in the first year of availability.

b. Fails to sell one-thousand-five-hundred plates (1,500), in the second year of availability.

c. Fails to sell two-thousand (2,000) plates in the third and any subsequent years of availability.

d. The department will notify the plate program sponsor ninety (90) days prior to cancellation informing the sponsor of the intent to cancel the program due to low plate sales volume. Sales volume is calculated by determining the number of current, valid registrations for the plate program on file with the department.

i. Upon the first year, second year, or third and subsequent year anniversary dates, if plate sales are below the mandatory volumes, provided in Section 49-402D, Idaho Code, the Department will notify the plate...
program sponsor that the program has been canceled and the effective date of the cancellation. Such programs will no longer be available at the county offices or the department for new registrations. (1-1-21)

ii. The Department will notify current registrants of the special plate program of the cancellation, and advise the registrant may retain and renew the registration with the additional program fees, and retain the plates until the physical plates are required to be replaced, however replacement plates will not be available, due to loss or damage. (1-1-21)

iii. The portion of canceled special plate program fees no longer deposited with the nonprofit agency (who has filed a 501 (c)(3) federal income tax status) program sponsor will be deposited in the state highway account. (1-1-21)

iv. Upon mandatory replacement of physical plates as required by statute, the customer may choose another plate program or standard county plates at the customer’s preference. (1-1-21)

v. The department will include in its annual report to the chairman of the Senate Transportation Committee and the chairman of the House Transportation and Defense Committee of the Idaho State Legislature any special plate programs that have been canceled during the preceding year. (1-1-21)

202. PROVISIONS FOR PERSONALIZED LICENSE PLATES.

01. Special Characters or Marks. No special characters, or punctuation marks, may be used for personalized messages on license plates. (3-20-20)

   a. Up to seven (7) letters or any combination of seven (7) letters and numbers and spaces (no half spaces) may be used for personalized messages on eligible six inch by twelve inch (6” x 12”) license plates. (3-20-20)

   b. Up to six (6) letters or any combination of six (6) letters and numbers and spaces (no half spaces) may be used for personalized messages on four inch by seven inch (4” x 7”) motorcycle plates. (3-20-20)

   c. Up to six (6) letters or any combination of six (6) letters and numbers and spaces (no half spaces) may be used for personalized messages on specialty program license plates. (3-20-20)

   d. Disability six inch by twelve inch (6” x 12”) plates will display the international disability symbol followed by up to five (5) letters, numbers, and spaces in the personalized message. Disability four inch by seven inch (4” x 7”) motorcycle plates will display the international disability symbol followed by up to four (4) letters, numbers, and spaces (no half spaces) in the personalized message. (3-20-20)

02. Issue of Personalized Plates. Personalized plates may be issued to vehicles if no specific wording is required on the plate to identify the purpose for which the vehicle is registered. Personalized plates will not be issued if such plates would jeopardize the integrity of unique plate identification requirements. Examples include but are not limited to:

   a. Commercial vehicles registered under the International Registration Plan (IRP), because the designators PRP are required to be printed on the plate; (3-20-20)

   b. Vehicles for which the designators “PRP” are required to be printed on the plate to identify the use; (3-20-20)

   c. Utility, horse, or enclosed car hauling trailers with RV facilities or boat trailers. (3-20-20)

03. Specific Requests. Requests for specific plate letters and/or numbers will be issued on a first come,
first served basis. In the event of a request for the same plate by more than one (1) individual, the request with the earliest postmark, e-mail transmission time, or fax transmission time will prevail. If the postmarks are the same, the date stamped upon arrival at the Department will prevail. Applications submitted at county assessors’ offices will be considered valid when date stamped in by the Department. Telephone requests will not be accepted.

04. Lack of Current Plates. When an applicant for personalized plates does not have current regular number plates:

(a) The Department may issue a thirty (30) day temporary registration to allow time for the billing process for personalized plates. The fee for each thirty (30) day temporary registration will be as required by Section 49-523, Idaho Code.

(b) The Department may, upon payment of all required fees, issue a proof of registration document as provided in Section 012 of these rules.

05. Credits. When personalized plates are issued before an applicant’s current registration is expired, credit will be given for unexpired registration fees only.

06. Renewing Plates. The applicant will have the choice of renewing existing personalized plates with validation stickers or ordering a new set of plates at the time of renewal. If new plates are requested, the plate fee will be charged in addition to all other fees that are due. New Personalized plates must will be purchased every seven (7) years as provided in reissued in accordance with Section 49-443, Idaho Code.

07. Transfer of Plates. When personalized plates are issued, the vehicle’s regular number plates may be transferred to another vehicle belonging to the owner. If registration credit is given from the regular number plates to the personalized, the regular number plate registration is canceled.

08. Acceptability of Plates Message. Acceptability of the personalized license plate message and issuance, denial or cancellation will be determined by the Department based on the following criteria:

(a) The combination of numbers and letters requested or combinations of same may not duplicate an existing combination in use, with the following exception. A duplication is allowed only when the combination of numbers and letters requested is the same on a small (ie: motorcycle sized plate) and a large (ie: passenger car) sized plate pursuant to Idaho Code.

(b) The message, in any language, may not carry a sexual connotation nor consist of a term that is considered to be one of obscenity, contempt, prejudice, hostility, insult, racial degradation, ethnic degradation, or profanity, or vulgarity, as defined in dictionaries of general use, including, but not limited to, Webster’s Unabridged Dictionary and the Harper & Row New Dictionary of American Slang.

(i) The message may not refer to any of the following: bodily functions, bodily fluids, or intimate body parts; sexual preference or orientation; acts of violence; illegal substances or the use thereof.

(ii) The message may not represent a club, membership, or gang that is commonly known to promote violence, illegal substances or illegal acts.

(c) The criteria in Paragraph 202.08.b. of these rules is not to be considered an exhaustive list. A compilation of offensive or obscene words, terms or letter/number combinations gathered from the experience of Idaho and other states may also be used as a guide. The Department may also rely on information obtained from law enforcement agencies within or outside of Idaho.

(d) When a complaint is received from the public concerning an issued plate, the name of the complainant will not be recorded nor, if known, revealed.

(e) Final determination regarding applications for questionable messages or cancellation of issued plates will be made by the Division of Motor Vehicles. The determination process will include a first review by technical staff, followed by a second review by supervisory and management staff. An applicant does, however, have
09. **Message Preferences.** Applicants may submit three (3) message preferences including the specific meaning of each. The first choice that is available and acceptable will be issued. If none of the preferences are available or acceptable, the applicant will be notified by return mail or email.

10. **Recalled Plates.** Personalized plates may be recalled by the Department for the following reasons:

   a. Error in manufacturing; or
   b. Clerical error.
   c. Unacceptable personalized messages as outlined in Paragraph 202.08.b. of these rules.

11. **Unexpired Fees.** If a set of personalized plates is recalled, the personalized plate program fee, unexpired portion of the registration fee, E.M.S. fee, plate fee, (if plates are returned to the Department), and all other applicable special plate fees, will be refunded or transferred to a new issue of personalized plates.

12. **Expired Plates.** Personalized plates that *are allowed to* have their registration expire will become immediately available for reissue to another applicant. There is no grace period.

**BREAK IN CONTINUITY OF SECTIONS**

204. **SURRENDER OF PLATES.**
Registered owners desiring to surrender their license plate numbers may do so at any time. Upon surrender, license plate numbers shall immediately become available for use by another, upon application and payment of applicable plate, registration, and program fees.

2045. -- 299. (RESERVED)
EFFECTIVE DATE: The effective date of the temporary rule is August 20, 2020.

AUTHORITY: In compliance with Sections 67-5221(1) and 67-5226, Idaho Code, notice is hereby given that this agency has adopted a temporary rule, and proposed rulemaking procedures have been initiated. The action is authorized pursuant to Sections 40-312, 49-201 & 49-326, Idaho Code.

PUBLIC HEARING SCHEDULE: Public hearing(s) concerning this rulemaking will be scheduled if requested in writing by twenty-five (25) persons, a political subdivision, or an agency, not later than October 21, 2020.

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

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

The changes being proposed to this rule are based on the passage of HB614-2020. The rule change will add a new violation for distracted driving and update the points table for motor vehicle moving violations and driver license assessed points. This rulemaking will ensure consistency between Idaho Code and the Idaho Administrative Procedures Act.

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

To reflect statutory changes made to Section 49-1401A, Idaho Code, during the 2nd Regular Session of the 65th Idaho Legislature (2020).

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

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

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(1), Idaho Code, negotiated rulemaking was conducted. The Notice of Intent to Promulgate Rules - Negotiated Rulemaking was published in the June 3, 2020, Idaho Administrative Bulletin, Volume 20-6, Pages 189-190.

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the temporary and proposed rule, please contact Brendan Floyd, DMV Program Specialist, at (208) 334-8474.

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 October 28, 2020.

Dated this 25th Day of August, 2020.

Ramón S. Hobdey-Sánchez, J.D.  Idaho Transportation Department
Office of Governmental Affairs 3311 W. State Street
Phone: (208) 334-8810 Boise, ID 83707-1129
ramon.hobdey-sanchez@itd.idaho.gov
39.02.71 – RULES GOVERNING DRIVER’S LICENSE VIOLATION POINT SYSTEM

000. LEGAL AUTHORITY.
Under authority of Sections 49-201 and 49-326, Idaho Code, the Idaho Transportation Board Department adopts the following rule for Violation Point Count System for drivers licensed in Idaho. (7-20-89) (8-20-20)

001. TITLE AND SCOPE.

01. Title. This rule is titled IDAPA 39.02.71, “Rules Governing Driver’s License Violation Point System.” (3-30-01)

02. Scope. It is the purpose of this rule to establish guidelines for the implementation of These rules establish a driver’s license violation point system for drivers convicted of moving traffic violations and convictions. (8-20-20)

002. – 099. (RESERVED)

100. VIOLATION POINT COUNT SYSTEM.

01. Points for Moving Traffic Violations. The Idaho Code authorizes and directs the Department to establish a violation point count system for drivers convicted of various moving traffic violations and infractions occurring either within the state of Idaho, or outside the state of Idaho. Moving traffic violations and infractions are violations that occur while operating a motor vehicle, hereinafter referred to collectively as traffic violations. Therefore, a schedule of violation points for moving traffic violations and infractions has been established. Moving traffic violations and infractions are violations that occur while operating a motor vehicle. (7-1-97) (8-20-20)

02. Violation Point Count List. The following violation point count list includes moving traffic violations and infractions in Idaho Code, and the appropriate code sections reference. Convictions of moving traffic violations and infractions not herein listed which are violations of a state law or municipal ordinance will receive three (3) violation points, except those for which mandatory suspension/revocation withdrawal of driving privileges is required by statute Idaho Code or the statute Idaho Code provides a point exemption. (1-1-14) (8-20-20)

03. Points Assessed. Each moving traffic violation conviction and infractions shall will be assessed from one (1) point for less serious violations to a maximum of four (4) points for more serious violations. The degree of seriousness of moving traffic violations and infractions has been determined by considering the possibility of bodily injury or property damage resulting from such violation. (7-1-97) (8-20-20)

04. Dual Violation. In cases where the driver is convicted of more than one (1) violation arising from one (1) occasion of arrest or citation, only one (1) conviction will be counted and assessed points against the driver’s record. The conviction counted will be the one with the greater amount of points. (1-1-14)

05. Speeding Violation. Drivers convicted of traveling sixteen (16) miles per hour or more over the posted maximum speed limit or exceeding the speed limit in a work zone will receive four (4) points. Driving convictions of other speeding violations will receive three (3) points. (1-1-14)
06. **Exemptions**

   **Distracted Driving** No points will be assessed to an Idaho driving record for texting as defined per Section 49-1401A(2), Idaho Code, and Safety Restraint Use as defined per Sections 49-673(3) and (4), Idaho Code. A first offense of Section 49-1401A, Idaho Code, will not be assessed points pursuant to code. Subsequent offenses will be assessed points as shown in Section 200. Third and subsequent offenses in a three-year period may also be subject to a court suspension.

101. -- 199. (RESERVED)

200. **LIST OF MOVING TRAFFIC CONVICTIONS AND OR VIOLATIONS POINT COUNT.**

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<tr>
<th>Idaho Code</th>
<th>Convictions Reported by Court</th>
<th>Point Count</th>
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<td>Starting Parked Vehicle</td>
<td>Two (2)</td>
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<td>49-604</td>
<td>Limitations on Backing</td>
<td>One (1)</td>
</tr>
<tr>
<td>49-605</td>
<td>Driving Upon Sidewalk</td>
<td>Three (3)</td>
</tr>
<tr>
<td>49-606</td>
<td>Coasting Prohibited</td>
<td>Two (2)</td>
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<td>One (1)</td>
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201. -- 299. (RESERVED)

300. SUSPENSION OF DRIVER LICENSE.

01. Twelve Points. When a driver accumulates twelve (12) or more points in any twelve (12) month period of time, the suspension period shall be for thirty (30) days. (7-20-89)

02. Eighteen Points. When a driver accumulates eighteen (18) or more points within any twenty-four (24) month period of time, the suspension period shall be for ninety (90) days. (7-20-89)

03. Twenty-Four Points. When a driver accumulates twenty-four (24) or more points within any thirty-six (36) month period of time, the suspension period shall be for six (6) months. (7-20-89)

301. -- 399. (RESERVED)

400. COMPLETION OF A DEFENSIVE DRIVING CLASS OR TRAFFIC SAFETY EDUCATION PROGRAM.

01. Removal of Points Upon Completion of Defensive Driving Class or Traffic Safety Education Program. Three (3) points may be removed from an Idaho driving record upon the driver’s completion of an approved defensive driving class or points may be removed from an infraction a traffic violation upon the driver’s completion of an approved traffic safety education program. Points may only be removed from a driver’s record once every three (3) years. This time restriction The three year period begins on the completion date of either a defensive driving class or traffic safety education program.

a. For completion of a defensive driving class, points are only removed from the violation point count total on the driving record. (1-1-14)

b. For completion of a traffic safety education program as provided in Section 50-336, Idaho Code, points are removed from the conviction for which the traffic safety education program was offered and taken. (1-1-14)

02. Driving Conviction Cannot Be Removed. A driver may not remove a driving traffic conviction from his their record by attending a defensive driving class or a traffic safety education program. (1-1-14)

03. Suspension for Excessive Points. Once the department has suspended a driver for excessive points, that driver may not waive have the suspension action rescinded by attending a defensive driving class or traffic safety education program. (1-1-14)

04. Driver May Not Reserve Point Reduction. When a driver completes a defensive driving class or traffic safety education program but has no violation points on his their driver record, he the driver may not reserve a point reduction for use on a future point-assessing traffic violation that points are assessed. (1-1-14)
AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Sections 20-223, 20-210A(3); 20-223(1)-(5); 20-224(2); 20-240A(4); and 20-240B(5), Idaho Code.

PUBLIC HEARING SCHEDULE: Public hearing(s) concerning this rulemaking will be scheduled if requested in writing by twenty-five (25) persons, a political subdivision, or an agency, not later than October 21, 2020.

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

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

150.03 Service of Process on Commissioners or Commission Staff
All service of summons, complaints, subpoenas and other legal process for any cause of action arising from or related to the actions, duties or employment of the Commission or any employee of the Commission, shall be made upon the deputy attorneys general assigned to the Commission in the manner and form required by state and federal rules of procedure.

500.01.d Self-Initiated Parole Reconsideration.
Removal of the text in Subsection 500.01(d) “unless otherwise stated by the Commission. The Commission will not consider SIPR petitions for offenders with a scheduled hearing in the next three (3) years,” a requirement added at sine die that have proven to be overly burdensome.

Additional stricken text is shown as follows, as this rule had a corresponding temporary rule that took effect (Vol. 20-3, March 4, 2020, pages 13 through 17) prior to this chapter becoming final before the 2020 regular legislature.

As offsets to the added language, the Commission is removing the definition of Reprieve as the language is outdated; removing Section 106, “Individual Polling of Commissioners,” as this is potentially contrary to the open meeting requirements; and removing Subsection 150.02(b), regarding staff professionalism.

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

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

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(2), Idaho Code, negotiated rulemaking was not conducted because this rule is for the privacy and protection of Commissioners and Commission staff from receiving service of process at their residential homes.

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Mary Schoeler at (208) 334-2520. Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before October 28, 2020.

Dated this 1st day of October, 2020.

Ashley Dowell, Executive Director
Phone: (208) 334-2520
Fax: (208) 334-3501

Commission of Pardons and Parole
3056 Elder Street
Boise, ID 83705
Pursuant to Section 67-5221(1), Idaho Code, this docket is being published as a proposed rule.

This docket has been previously published as a temporary rule. The temporary effective date of those changes were January 13, 2020.

The original text of the temporary rule was published in the Idaho Administrative Bulletin, Volume 20-3, March 4, 2020, pages 13 through 17.

THE FOLLOWING IS THE PROPOSED TEXT OF DOCKET NO. 50-0101-2001
(Only Those Sections With Amendments Are Shown.)

010. DEFINITIONS.

01. **Absconder.** An offender who has fled supervision, whose whereabouts are unknown, and for whom a warrant for a violation of supervision has been issued or requested. (3-21-18)

02. **Case Manager.** For purposes of reference, the case manager is an Idaho Department of Correction employee who is involved with assisting offenders regarding their problems, needs, and adjustments. Such case manager may have the title of psycho-social rehabilitation specialist, counselor, social worker, psych-tech, or clinician. (3-20-20)

03. **Commission.** The Idaho Commission of Pardons and Parole. (4-11-15)

04. **Commission Warrant.** Warrant of arrest for alleged parole violation issued by the Executive Director or a Commissioner. This warrant is a non-bondable warrant. (3-23-98)

05. **Commissioner.** A member of the Commission who is appointed by the Governor to carry out decision-making functions regarding parole, parole revocations, pardons, commutations, remission of fines, and firearm rights restoration. (3-21-18)

06. **Commutation.** Clemency powers granted to the Commission, or the Governor, or both, which allow for a sentence to be modified, including a final discharge from the remaining period of parole. (3-20-20)

07. **Concurrent Sentence.** Sentence served at the same time as another. (3-23-98)

08. **Conditions of Parole.** Conditions under which an offender is released to parole supervision. (4-11-15)

09. **Confidential.** Privileged from disclosure. (3-23-98)

10. **Consecutive Sentence.** Sentence served upon completion of another sentence or before beginning another sentence. (3-23-98)

11. **Decision.** A determination arrived at after consideration, a conclusion. (3-23-98)

12. **Detainer.** A document authorizing the detention of an offender in custody for a new felony crime or parole violation. Offender may be housed in a county jail or a correctional institution in state or out of state. (4-11-15)

13. **Determinate Sentence.** Fixed portion of the sentence. During this time period an offender is not eligible for release on parole. (4-11-15)
14. **Dispositional Hearing.** A hearing held before the Commissioners to render a decision whether to reinstate, modify, or revoke parole. (3-20-20)

15. **DOR.** Disciplinary Offense Report. A report describing rule violations, behavioral issues, or both, committed by an offender while incarcerated. (4-11-15)

16. **Escape.** Flight from confinement. (3-23-98)

17. **Executive Session.** Any meeting or part of a meeting of the Commission that is closed to the public for deliberation on certain matters, as set forth in Section 20-213A, Idaho Code. (4-11-15)

18. **File or Case Review.** Review of central file, Commission file, and/or additional information submitted, without testimony or interview of offender or parolee. (4-11-15)

19. **Full Term Release Date.** The date an offender completes the term of sentence. (3-20-20)

20. **Hearing.** The opportunity to be interviewed by the Commission, a Commissioner, or other designated Commission staff. (4-11-15)

21. **Hearing Officer.** An impartial person employed by the Commission and selected by the Executive Director to conduct an interview and take testimony from an offender regarding offender’s history, criminal record, social history, present condition of offender, and offense. (4-11-15)

22. **Hearing Session.** A series of hearings conducted by the Commission. (3-23-98)

23. **Indeterminate Sentence.** Portion of sentence following the determinate sentence, during which time an offender is eligible for release on parole. (4-11-15)

24. **Member or Members.** A member of the Commission, Commissioner, or Commissioners. (3-21-18)

25. **NCIC.** National Crime Information Center. (3-23-98)

26. **Non-Technical Violation.** Violation of parole by absconding or the commission of, and conviction for, a felony or misdemeanor offense. (3-20-20)

27. **Offender.** A person under the legal care, custody, supervision, or authority of the board of correction, including a person within or outside Idaho pursuant to agreement with another state or contractor. (3-20-20)

28. **On-Site Parole Violation Hearing.** Parole violation hearing to determine guilt or innocence of the alleged parole violator, which must be held reasonably near the site of the alleged violation(s). (3-21-18)

29. **Open Parole Date.** Tentative parole granted without setting an actual tentative release date and subject to release by Commission authorization; offender’s parole eligibility date has passed when a tentative parole date is granted. A tentative parole date will become an open parole date if the tentative parole date passes without the offender being released to an acceptable plan on the specific date. (4-11-15)

30. **Pardon.** Clemency powers granted to the Commission or the Governor that allows the applicant to be released from the consequences of conviction of a crime and restores the applicant’s civil rights. (3-21-18)

31. **Parole.** Conditional release from a penal institution under a contractual agreement between the Commission of Pardons and Parole and offender. Parole is not a right, but is a matter of grace. (4-11-15)

32. **Parole Eligibility Date.** The earliest date that an offender may be eligible for parole release, which coincides with the date that the indeterminate portion of the offender's sentence begins. In the event there are multiple
sentences, the sentence having the latest indeterminate begin date will be used as the offender's parole eligibility date. (4-11-15)

33. **Parole Hearing Interview.** An interview conducted by a hearing officer for the purpose of gathering information and testimony from the offender regarding the offender's history, criminal record, social history, present condition, instant offense, and other factors, when the offender is scheduled for a forthcoming parole consideration hearing. (4-11-15)

34. **Parole Violation Hearing.** A fact-finding hearing conducted by a hearing officer to determine a parolee’s guilt or innocence of alleged violations of parole. The hearings are conducted for both technical and non-technical violations, and may be held on-site, or at a location as determined by the Executive Director or the hearing officer. (3-21-18)

35. **Parolee.** Offender being supervised on parole. (4-11-15)

36. **Preliminary Hearing.** A hearing conducted by an objective representative of the supervising authority or an individual appointed by the Executive Director to determine if there is probable cause to believe the alleged violations of the parole contract occurred. (3-21-18)

37. **Reprieve.** Temporary suspension of the execution of sentence; delay a punishment. (3-23-98)

38. **Risk Assessment.** Validated tool developed to determine risk of recidivating based on offender criminogenic needs. (4-11-15)

39. **Self-Initiated Parole Reconsideration (SIPR).** A process in which an offender may request reconsideration of the last decision of the Commission. (3-20-20)

40. **Session.** See “Hearing Session.” (4-11-15)

41. **Supervising Authority.** The agency responsible for community supervision of parolees which is Idaho Department of Correction. (3-21-18)

42. **Technical Violation.** Violation of parole by not conforming to conditions of parole, but not to include absconding or a new criminal conviction. (3-8-16)

(BREAK IN CONTINUITY OF SECTIONS)

106. **INDIVIDUAL POLLING OF THE COMMISSION.** (RESERVED)

The executive director may conduct an individual poll of the commission to obtain a majority vote regarding a case or business matter in which a decision must be made prior to the next session or meeting. (3-23-98)

(BREAK IN CONTINUITY OF SECTIONS)

150. **COMMISSION AND STAFF.**

01. **Commission Members.** The Commission is composed of seven (7) members. (3-20-20)

02. **Commission Staff.** The Commission has delegated to the Executive Director the authority to approve recommended conditions of parole following the hearing process, issue Commission warrants, issue parole release documents, and all other official documents pertaining, but not limited to paroles, commutations, pardons, firearms rights restoration, and remissions of fines. (3-21-18)

a. The Executive Director assumes all authority and duties as may be delegated by the Commission.
and the governor. (3-30-01)

b. The Commission, the Executive Director, and all staff will maintain professional integrity in all matters of Commission business. (3-23-98)

03. Service of Process on Commissioners or Commission Staff. All service of summons, complaints, subpoenas and other legal process for any cause of action arising from or related to the actions, duties or employment of the Commission or any employee of the Commission, shall be made upon the deputy attorneys general assigned to the Commission in the manner and form required by state and federal rules of procedure.

(BREAK IN CONTINUITY OF SECTIONS)

500. SELF-INITIATED PAROLE RECONSIDERATION.

01. Petition. An incarcerated offender making a request for reconsideration of parole denial must initiate the process by submitting an application. (3-20-20)

a. The only acceptable form is the one provided by the Commission, and it must be signed by the offender and case manager. (3-20-20)

b. The petition must be typed and completed correctly, per the instructions on the form, or it will not be considered. (3-21-18)

c. The petition must state the reason reconsideration is requested and the circumstances that have changed since the last hearing. The offender must have had no disciplinary issues in the year prior to submitting the petition. (3-20-20)

d. The Commission will consider one (1) application from the offender who was denied parole one (1) year after the denial of parole. After the initial SIPR is heard, the Commission will consider applications once per year from the date of the initial SIPR denial unless otherwise stated by the Commission. The Commission will not consider SIPR petition for offenders with a scheduled hearing in the next three (3) years. (3-20-20)

e. Petitions must be received no later than the first day of the month prior to the next month’s hearing session. (3-8-16)

f. Review or deliberation on the petition by the Commission will be conducted in executive session. (3-23-98)

g. Any petition may be continued for additional information or for further consideration. (3-23-98)

h. The petitioner will be sent written notice of the decision. (3-23-98)

i. The petition is limited to four (4) pages; the petition will not be considered if the petition exceeds this number. (3-21-18)

02. Hearing. The scheduling of a hearing is at the complete discretion of the Commission. (3-23-98)
AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section 33-5402(1), Idaho Code, which authorizes the State College Savings Program Board to develop and implement the program in a manner consistent with this chapter through the adoption of rules, guidelines and procedures.

PUBLIC HEARING SCHEDULE: Public hearing(s) concerning this rulemaking will be scheduled if requested in writing by twenty-five (25) persons, a political subdivision, or an agency, not later than October 21, 2020.

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

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

The 2020 Idaho Legislature eliminated the requirement that certain aspects of the Idaho College Savings Program be contained in rule. With this new authority, the State College Savings Program Board seeks to repeal its administrative rules chapter. The Program’s existing administrative rules are redundant as all Program rules and requirements exist within the Program’s state code and its securities disclosure statement. The securities disclosure statement document serves as the contract between the individual account owner and the Program. As required by the securities laws, the disclosure statement is kept current with any changes to the Program.

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

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

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(2), Idaho Code, negotiated rulemaking was not conducted because of the simple nature of the rulemaking.

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Christine Stoll, Executive Director, at (208) 332-2935.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before October 28, 2020.

Dated this 25th day of August, 2020.

Christine Stoll, Executive Director
State College Savings Program
700 West Jefferson St., Ste. 126
Boise, Idaho 83720
(208) 332-2935

IDAPA 54.02.01 IS BEING REPEALED IN ITS ENTIRETY
AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section 59-1314, Idaho Code.

PUBLIC HEARING SCHEDULE: Public hearing(s) concerning this rulemaking will be scheduled if requested in writing by twenty-five (25) persons, a political subdivision, or an agency, not later than October 21, 2020.

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

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

The adoption of new Section 59-1303, Idaho Code, “Police Officer Member Status,” during the 2020 legislative session, requires the deletion of Rule Sections 59.01.01.151, 59.01.01.152, and 59.01.01.005 Subsections .13, .20, and .30. This new section no longer has the terms “Active Law Enforcement Service,” “Hazardous Law Enforcement Duties,” “Employed in the Same Position until Retired,” “Police Officer Member for Purposes of Retirement Eligibility” or “Same Position.” Because these terms are no longer used in the statute, there is no need for these terms to be part of the Rules. Rule Section 59.01.01.508 requires a change due to Federal Law Secure Act changing the age for Required Minimum Distribution.

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

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

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(1), Idaho Code, negotiated rulemaking was not conducted because negotiated rulemaking is not feasible because it would be inconsistent with the PERSI Board’s exclusive fiduciary responsibility for plan operation.

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Cheryl George (208) 287-9231.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before October 28, 2020.

Dated this 21st day of August, 2020.

Don Drum
Executive Director
Public Employee Retirement System of Idaho
607 N. 8th Street, Boise, ID 83702
P.O. Box 83720, Boise, ID 83720-0078
Phone: (208) 287-9230
Fax: (208) 334-3408
005.  DEFINITIONS.
The definitions in Section 59-1302, Idaho Code, and the following apply to this chapter: (3-20-20)

01.  Active Member. A member participates in the active member allocation only if they are active and have at least twelve (12) months of accrued membership service on the last day of the fiscal year. For purposes of allocating extraordinary gains, active members also include:

a.  Seasonal employees who have a pattern of employment that includes at least six (6) months of membership service in each of the preceding three (3) consecutive years; and (3-20-20)

b.  Employees who are on leave of absence on the last day of the fiscal year and either:

   i.  Return to active service for at least thirty (30) days before December 31 immediately following the end of the fiscal year; or (3-20-20)

ii.  Are entitled to benefits under the Uniformed Services Employment and Re-employment Rights Act of 1994 (USERRA). (3-20-20)

02.  Actuary. This is the actuary retained by the Board. (3-20-20)

03.  Administrator. The Board. (3-20-20)

04.  Applicant. “Applicant” means an applicant for disability retirement under Section 59-1352, Idaho Code, or an individual requesting resumption of a disability retirement allowance under Section 59-1354A, Idaho Code. (3-20-20)

05.  Base Plan or Account. This is the PERSI defined benefit plan not including gain sharing allocations or interest thereon, or the individual accounts therein. (3-20-20)

06.  Board. “Board” means the governing authority of the Public Employee Retirement System of Idaho as provided by Section 59-1304, Idaho Code, of the Firefighters’ Retirement Fund created by Chapter 14, Title 72, Idaho Code, and the Policeman’s Retirement Fund created by Chapter 15, Title 50, Idaho Code. (3-20-20)

07.  Choice Plan or Account. This includes two (2) elements:

   a.  The defined contribution component of the PERSI plan consisting of gain sharing allocations together with earnings thereon or the individual accounts therein; and (3-20-20)

   b.  The plan designated to receive voluntary and employer contributions as provided in Section 59-1308, Idaho Code, or the individual accounts therein. (3-20-20)

08.  Code. The Internal Revenue Code of 1986, as now in effect or as hereafter amended. All citations to sections of the IRS Code are to such sections as they may from time to time be amended or renumbered. (3-20-20)

09.  Compensation. “Compensation” as used in Section 59-1342(6), Idaho Code, means “salary” as defined by Section 59-1302(31), Idaho Code. (3-20-20)

10.  Court Security. “Court Security” as used in Section 59-1303(3)(g), Idaho Code, means the employee’s primary responsibilities are designated by court order to quell disturbances in the courthouse, to prevent the escape of prisoners, to exclude weapons from the courthouse, and to perform other related courthouse security
matters. (3-20-20)

11. Date of Retirement. “Date of retirement” means the effective date on which a retirement allowance becomes payable. (3-20-20)

12. Designated Beneficiary. The individual who is designated as the beneficiary under the Plan and is the designated beneficiary under section 401(a)(9) of the IRS Code and section 1.40l(a)(9)-4, Q&A-4, of the Treasury regulations. (3-20-20)

13. Employed In The Same Position Until Retired. As used in Section 59-1303(7), Idaho Code, “employed in the same position until retired” means the same job classification or position including continued employment in any revised job classification or new position title evolving from the same position as the result of personnel reclassification procedures provided the continued employment remains with the same state agency or within the same department of a political subdivision. (3-20-20)

14. Employer. “Employer” means the state of Idaho or any political subdivision or governmental entity, provided such subdivision or entity has elected to come into the system. Governmental entity means any organization composed of units of government of Idaho or organizations funded only by government or employee contributions or organizations who discharge governmental responsibilities or proprietary responsibilities that would otherwise be performed by government. A political subdivision and government entity also means an entity that meets each of the requirements of Paragraphs a. through c. of this definition, taking into account all of the facts and circumstances. Entities that may qualify as political subdivisions include, among others, general purpose governmental entities, such as cities and counties (whether or not incorporated as municipal corporations), and special purpose governmental entities, such as special assessment districts that provide for roads, water, sewer, gas, light, reclamation, drainage, irrigation, levee, school, harbor, port improvements, and other governmental purposes for a State or local governmental unit. (3-20-20)

a. Sovereign powers. Pursuant to a state or local law of general application, the entity has a delegated right to exercise a substantial amount of at least one (1) of the following recognized sovereign powers of a state or local governmental unit: The power of taxation, the power of eminent domain, and police power. (3-20-20)

b. Governmental purpose. The entity serves a governmental purpose. The determination of whether an entity serves a governmental purpose is based on, among other things, whether the entity carries out the public purposes that are set forth in the entity’s enabling legislation and whether the entity operates in a manner that provides a significant public benefit with no more than incidental private benefit. (3-20-20)

c. Governmental control. A state or local governmental unit exercises control over the entity. For this purpose, control is defined in Subparagraph 005.08.c.i. of this rule and a state or local governmental unit exercises such control only if the control is vested in persons described in Subparagraph 005.08.c.ii. of this rule. (3-20-20)

i. Definition of control. “Control” means an ongoing right or power to direct significant actions of the entity. Rights or powers may establish control either individually or in the aggregate. Among rights or powers that may establish control, an ongoing ability to exercise one or more of the following significant rights or powers, on a discretionary and non-ministerial basis, constitutes control: the right or power both to approve and to remove a majority of the governing body of the entity; the right or power to elect a majority of the governing body of the entity in periodic elections of reasonable frequency; or the right or power to approve or direct the significant uses of funds or assets of the entity in advance of that use. Procedures designed to ensure the integrity of the entity but not to direct significant actions of the entity are insufficient to constitute control of an entity. Examples of such procedures include requirements for submission of audited financial statements of the entity to a higher level state or local governmental unit, open meeting requirements, and conflicts of interest limitations. (3-20-20)

ii. Control vested in a state or local governmental unit or an electorate. Control is vested in persons described as a state or local governmental unit possessing a substantial amount of each of the sovereign powers and acting through its governing body or through its duly authorized elected or appointed officials in their official capacities or an electorate established under applicable state or local law of general application, provided the electorate is not a private faction. (3-20-20)
iii. Definition of “private faction.” A private faction is any electorate if the outcome of the exercise of control described in Subparagraph 005.08.c.i. of this rule is determined solely by the votes of an unreasonably small number of private persons. The determination of whether a number of such private persons is unreasonably small depends on all of the facts and circumstances, including, without limitation, the entity’s governmental purpose, the number of members in the electorate, the relationships of the members of the electorate to one another, the manner of apportionment of votes within the electorate, and the extent to which the members of the electorate adequately represent the interests of persons reasonably affected by the entity’s actions. For purposes of this definition, an electorate is a private faction if any three (3) private persons that are members of the electorate possess, in the aggregate, a majority of the votes necessary to determine the outcome of the relevant exercise of control. Provided however, an electorate is not a private faction if the smallest number of private persons who can combine votes to establish a majority of the votes necessary to determine the outcome of the relevant exercise of control is greater than ten (10) persons. For example, if an electorate consists of twenty (20) private persons with equal, five-percent (5%) shares of the total votes, that electorate is not a private faction because a minimum of eleven (11) members of that electorate is necessary to have a majority of the votes. By contrast, for example, if an electorate consists of twenty (20) private persons with unequal voting shares in which some combination of ten (10) or fewer members has a majority of the votes, then that electorate does not qualify for the safe harbor from treatment as a private faction under this subparagraph. The following rules apply for purposes of determining numbers of voters and voting control in Subparagraph 005.08.c.iii. of this rule, related parties (as defined in 26 CFR Section 1.150–1(b)) are treated as a single person; and in computing the number of votes necessary to determine the outcome of the relevant exercise of control, all voters entitled to vote in an election are assumed to cast all votes to which they are entitled. (3-20-20)

154. Employment. “Employment” as used in Section 59-1302(14)(B)(b), Idaho Code, shall mean the period of time from a member’s date of hire to the member’s succeeding date of separation from that state agency, political subdivision or government entity. Placing a member on leave of absence with or without pay shall not be considered as a separation from the employer. (3-20-20)

165. Firefighters’ Retirement Fund. “Firefighters’ Retirement Fund” or “FRF” is the retirement fund provided by Chapter 14, Title 72, Idaho Code. (3-20-20)

176. Gain Sharing. This refers to the process of allocating extraordinary gains from the base plan into the defined contribution component of the PERSI plan as permitted in Section 414(k) of the Internal Revenue Code and as provided by Section 59-1309, Idaho Code, and these rules. (3-20-20)

187. General Member. “General member” is a PERSI member not classified as a police officer, firefighter, or paid firefighter. (3-20-20)

198. Likely. For the purpose of Section 59-1302(12)(b), Idaho Code, “likely” means with reasonable medical certainty. (3-20-20)

2419. Normal Retirement Age. The age (or combination of age and years of service) at which a Member is entitled to an actuarially unreduced retirement benefit under the Plan. A Member will be fully vested upon attainment of Normal Retirement Age. (3-20-20)

2420. Occupational Hazard. “Occupational Hazard” means an injury or ailment solely resulting from the work an applicant does or from the environment in which an applicant works. (3-20-20)

221. Pension Protection Act Definitions. Solely for purposes of the implementation by PERSI of section 402(l) of the Internal Revenue Code, the following definitions apply:

a. Chaplain. Any individual serving as an officially recognized or designated member of a legally organized volunteer fire department or legally organized police department, or an officially recognized or designated public employee of a legally organized fire or police department who was responding to a fire, rescue, or police emergency. (3-20-20)

b. Eligible Retired Public Safety Officer. An individual who, by reason of disability or attainment of normal retirement age, is separated from service as a public safety officer with the state agency, political subdivision or government entity who maintains the eligible retirement plan from which distributions are made. (3-20-20)
c. Normal Retirement Age. The member’s age at the time that the member is eligible to retire with an unreduced benefit. (3-20-20)

d. Public Safety Officer. An individual serving a public agency in an official capacity, with or without compensation, as a law enforcement officer, as a firefighter, as a chaplain, or as a member of a rescue squad or ambulance crew. (3-20-20)

242. Permissive Service Credits. This includes all credits obtained through voluntary purchase but does not include service obtained through repayment of a separation benefit under Section 59-1363, Idaho Code. (3-20-20)

243. Police Officer. “Police officer” means an employee who is serving in a position as defined in Section 59-1303, Idaho Code. (3-20-20)

25. Police Officer Member For Purposes Of Retirement Eligibility. The words “will be deemed to be a police officer member for purposes of retirement eligibility,” as used in Section 59-1303(7), Idaho Code, means the member shall have a service retirement ratio of 1.000 provided for by Section 59-1341, Idaho Code. (3-20-20)

264. Primary Employer. The primary employer is the state agency, political subdivision or government entity from whom the employee receives the highest aggregate salary per month. (3-20-20)

265. Public Employee Retirement System of Idaho. “Public Employee Retirement System of Idaho” or “PERSI” is the retirement system created by Chapter 13, Title 59, Idaho Code. (3-20-20)

286. Required Beginning Date. The date specified in Section 508.02 of these rules. (3-20-20)

297. Retiree. Retiree includes any member, contingent annuitant, or surviving spouse, receiving regular monthly allowances at the close of the fiscal year. It also includes members receiving a monthly disability retirement allowance, surviving spouses who elected an annuity option under Section 59-1361(5), Idaho Code, and members who were inactive at the close of the fiscal year but retire on or before the first day of January following the end of the fiscal year, retroactive to the first day of June of the fiscal year or earlier. (3-20-20)

30. Same Position. “Same position” as set forth in Section 59-1303(7), Idaho Code, means the same job classification or position title including continued employment in any revised job classification or new position title evolving from that same position as the result of personnel reclassification procedures provided the continued employment remains within the same state agency or within the same department of a political subdivision. (3-20-20)

328. Service. For the purposes of Sections 536 and 539, “service” includes only service for which the member is normally in the administrative offices of the state agency, political subdivision or government entity or normally required to be present at any particular work station for the state agency, political subdivision or government entity. (3-20-20)

329. Surviving Spouse. “Surviving spouse” is a person as defined in Section 15-2-802, Idaho Code. (3-20-20)

340. Teacher. “Teacher” is defined as a school employee who is required to be certified. (3-20-20)

341. Transportation Of Prisoners. “Transportation of prisoners” as used in Section 59-1303(3)(g), Idaho Code, means the employee’s primary responsibility is designated by court order to move prisoners from one (1) place to another. (3-20-20)

(BREAK IN CONTINUITY OF SECTIONS)
151. DEFINITION OF ACTIVE LAW ENFORCEMENT SERVICE.

“Active law enforcement service” as used in Section 59-1303, Idaho Code, means the primary duties of an employee’s position requires the employee to investigate and arrest persons for criminal or suspected criminal violations or designate the employee to be responsible for the safekeeping and custody of persons held in a duly constituted confinement facility, actively participate in crime prevention or reduction, compel others to comply with the law, and must be able to prescribe and carry out the consequences of non-compliance.

152. HAZARDOUS LAW ENFORCEMENT DUTIES.

In applying Section 59-1303(4)(a)(i), Idaho Code, factors such as job conditions, physical exertion in apprehending suspects, and other required knowledge, skill, and physical ability will be considered. To qualify under Section 59-1303(4)(a)(ii), Idaho Code, job duties which are associated with life threatening situations must be an integral part of the job requirements. These duties are comparable to the job of patrol officer or detective. Pursuant to Section 59-1303(4)(a)(iii), Idaho Code, the major purpose of the position must be to compel others to comply with the law. The employee must be able to prescribe and carry out the consequences of non-compliance. All of Section 59-1303(4)(a), Idaho Code, must be met to be considered as hazardous law enforcement. PERSI staff is authorized to obtain all information pertinent to the position including questionnaires, job descriptions, interviews, and any other pertinent records in order to make a report to the Board.

151. -- 199. (RESERVED)

508. REQUIRED MINIMUM DISTRIBUTIONS.

01. Default Application of Federal Requirements. With respect to distributions under the Base Plan, and except as provided in Subsection 508.06, the Plan will apply the minimum distribution requirements of section 401(a)(9) of the IRS Code in accordance with a good faith interpretation of section 401(a)(9), notwithstanding any provision of the Base Plan to the contrary.

02. Required Beginning Date. Except as otherwise provided in Subsections 508.04 through 508.08, distributions under the Base Plan shall begin not later than April 1 following the later of (a) the commencement year or (b) the year in which the member retires. For purposes of Section 508, the “commencement year” is the calendar year in which the member reaches age seventy-two and one-half (70 1/2).

03. PERSI Selects Retirement Option. Any member required to take minimum distributions, as provided in this Section 508, and fails to complete and submit an approved retirement application and select either a regular or optional retirement allowance by April 1 following the later of (a) the commencement year or (b) the year in which the member retires shall be deemed to have made the following selection:

a. If single, a regular retirement allowance and no other selection shall be required or permitted.

b. If married, Option 1 and no other selection shall be required or permitted, unless proof is provided that spouse has no community property interest in the benefit.

04. Lifetime Distributions. Distribution shall be made over the life of the participant or the lives of the participant and his beneficiary; or over a period certain not extending beyond the life expectancy of the member or the joint life and last survivor expectancy of the member and his beneficiary.

05. Timing of Required Distributions. A required distribution shall be deemed to have been made during the commencement year if actually made by the following April 1, but such delayed distribution shall not change the amount of such distribution, and the distribution otherwise required during the subsequent calendar year shall be calculated as if the first distribution had been made on the last day of the commencement year.

06. Adjustment of Required Distributions. Benefits paid prior to the commencement year shall
reduce the aggregate amount subject to (but shall not otherwise negate) the minimum distribution requirements described herein. (3-20-20)

07. **Benefits Deferred Beyond Service Retirement.** The first payment of benefits of an inactive member following deferment beyond service retirement will be in a lump sum that includes payment for those months of service dating from the date of service retirement when a monthly retirement payment would have started through the current monthly payment. Subsequent payments will be for the monthly retirement allowance only. (3-20-20)

08. **Death Benefits.** All death benefits payable under the Base Plan will be distributed as soon as administratively practicable after request, but must in any event be distributed within fifteen (15) months of the member’s death, unless the identity of the beneficiary is not ascertainable. (3-20-20)
AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section 19-850(1)(a), Idaho Code.

PUBLIC HEARING SCHEDULE: The public hearing concerning this rulemaking will be held on Zoom and at the Joe R. Williams Office Building as follows:

<table>
<thead>
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<th>PUBLIC HEARING</th>
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<tr>
<td>Wednesday, October 14, 2020</td>
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<tr>
<td>12:00 noon to 3:00 p.m. (Mountain) / 11:00 a.m. - 2:00 p.m. (Pacific)</td>
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Joe R. Williams Office Building
West Conference Room
700 W. State Street, 1st Floor
Boise, ID 83702

Masks and Social Distancing are Required at Meeting Site

* Attendance via Zoom Meeting is Encouraged *

Use this link to register:
https://us02web.zoom.us/meeting/register/tZckdeirqDwjH9Ar2WAgaMMN6yhxd_FAWJB

We encourage you to attend the meeting via Zoom. Commissioners and staff will attend the meeting via Zoom with one Commissioner or the Director in attendance at the meeting site where masks and social distancing are required.

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

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking: The agency is repealing this rule as part of its rulemaking to rewrite all current rules to simplify and clarify them. The agency is repealing all current rules: 61.01.01, 61.01.02, 61.01.03, 61.01.04, 61.01.06, 61.01.07 and 61.01.08; and replacing them with proposed rules: 61.01.01, 61.01.02, 61.01.03, 61.01.04.

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

FISCAL IMPACT: The following is a specific description, if applicable, of any negative fiscal impact on the state general fund greater than ten thousand dollars ($10,000) during the fiscal year as a result of this rulemaking: This rule should have no fiscal impact.

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(1), Idaho Code, negotiated rulemaking was conducted. The Notice of Intent to Promulgate Rules - Negotiated Rulemaking was published in the July 1, 2020 Idaho Administrative Bulletin, Volume 20-7, page 546.

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A
ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Kathleen Elliott at (208) 332-1735.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before 5 pm Mountain Time on October 28, 2020.

Dated this 21st day of August, 2020.

Kathleen J. Elliott, Executive Director
Idaho State Public Defense Commission
816 W. Bannock, Suite 201
Mailing Address
Boise, Idaho 83702
Phone: (208) 332-1735
Fax: (208) 364-6147
Kathleen.Elliott@pdc.idaho.gov

IDAPA 61.01.01 IS BEING REPEALED IN ITS ENTIRETY
AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section 19-850(1)(a), Idaho Code.

PUBLIC HEARING SCHEDULE: The public hearing concerning this rulemaking will be held on Zoom and at the Joe R. Williams Office Building as follows:

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Masks and Social Distancing are Required at Meeting Site

* Attendance via Zoom Meeting is Encouraged *

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https://us02web.zoom.us/meeting/register/tZckdeirqDwjH9Ar2WAqbaMMN6yhx_FAWJB

We encourage you to attend the meeting via Zoom. Commissioners and staff will attend the meeting via Zoom with one Commissioner or the Director in attendance at the meeting site where masks and social distancing are required.

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

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking: This rule updates general information and the terms and their definitions applicable to all chapters.

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

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

This rule should have no fiscal impact.

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(1), Idaho Code, negotiated rulemaking was conducted. The Notice of Intent to Promulgate Rules - Negotiated Rulemaking was published in the July 1, 2020 Idaho Administrative Bulletin, Volume 20-7, page 546.

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Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before 5 pm Mountain Time on October 28, 2020.

Dated this 21st day of August, 2020.

Kathleen J. Elliott, Executive Director
Idaho State Public Defense Commission
816 W. Bannock, Suite 201
Mailing Address
Boise, Idaho 83702
Phone: (208) 332-1735
Fax: (208) 364-6147
Kathleen.Elliott@pdc.idaho.gov

THE FOLLOWING IS THE PROPOSED TEXT OF DOCKET NO. 61-0101-2002
(Chapter Re-Write/New Chapter)

IDAPA 61 – IDAHO STATE PUBLIC DEFENSE COMMISSION

61.01.01 – GENERAL PROVISIONS AND DEFINITIONS

000. LEGAL AUTHORITY.
This chapter is adopted under the legal authority of Section 19-850(1)(a), Idaho Code. ( )

001. TITLE AND SCOPE.
This chapter is titled “General Provisions and Definitions,” and contains general provisions and definitions applicable to IDAPA 61. ( )

002. ADMINISTRATIVE APPEALS.


02. Confidential Information Exempt From Public Records. Documents containing confidential information and submitted in any administrative proceeding must be redacted or filed under seal. ( )

003. FILING OF DOCUMENTS.
Unless otherwise set forth in a Notice of Rulemaking or Order of the Commission or Executive Director, all written communications and documents that are intended to be part of an official record for decision in a rulemaking or contested case must be filed with the Executive Director. No copies in addition to the original document need be filed with the agency unless requested by the Executive Director or Commission. ( )
010. **DEFINITIONS.**

01. **Active Case.** A Capital Case is active when it is not stayed. All other Cases are active when there is an appointment, appearance, filing or investigation in the reporting period or it is not stayed. ( )

02. **Annual Report.** The Defending Attorney report required by Section 19-864, Idaho Code, including CLEs, Caseloads, Workloads and other information requested for the October 1 through September 30 reporting period to complete the Annual Report form provided by PDC Staff. ( )

03. **Capital Case.** A case in which the state has given notice it will seek the death penalty or is legally entitled to seek the death penalty under Section 18-4004A, Idaho Code. ( )

04. **Capital Defending Attorney.** A Defending Attorney who meets the qualifications for and is on the Capital Defending Attorney Roster. ( )

05. **Capital Defending Attorney Roster.** The PDC’s list of Defending Attorneys eligible for appointment by a court to represent an Indigent Person in a Capital Case. Some attorneys on the Capital Defending Attorney Roster may not currently be employed or under contract with a county. ( )

06. **Case.** All related charges against an individual from a single incident, transaction or occurrence filed within a single case number. A probation violation or motion for contempt is counted as a separate Case. ( )

07. **Caseload.** A Defending Attorney’s total number of Active Cases during the applicable reporting period as counted under IDAPA 61.01.02, “Requirements and Procedures for Representing Indigent Persons,” Paragraph 060.05.c. A county’s total Caseload to determine compliance with Workload rules is calculated as the mean of the Felony Case Equivalent calculation for each of the preceding three (3) years. ( )

08. **Compliance Plan.** A county’s plan for meeting Public Defense Rules and curing any Deficiencies including detailed action items and completion dates. ( )

09. **Cost Analysis.** A detailed explanation of the expected expenses for the county to complete its Compliance Plan and how the county is proposing to pay for those expenses. ( )

10. **Defending Attorney.** Any attorney employed by a county or under contract with a county as an institutional Defending Attorney or a contract Defending Attorney to represent adults or juveniles at public expense. ( )

11. **Defending Attorney Roster.** The PDC’s list of Defending Attorneys eligible for appointment by a court to represent an Indigent Person in a non-capital Case. Some attorneys on the Defending Attorney Roster may not currently be employed or under contract with a county. ( )

12. **Deficiency.** The noncompliance with any Public Defense Rule by a county, Defending Attorney, employee, contractor, representative or other agent. ( )

13. **Executive Director.** PDC employee appointed by the Commission under Section 19-850(2)(a), Idaho Code. ( )

14. **Felony Case Equivalent (FCE).** The calculation after all Case types are converted to their felony equivalent to determine compliance with Caseload rules. ( )

15. **Financial Assistance.** The state funding a county may request and may be awarded under Section 19-862A, Idaho Code. ( )

16. **Indigent Person.** A person who, at the time his need is determined under Section 19-854, Idaho
Code, is unable to provide for the full payment of a Defending Attorney and all other necessary expenses of representation.

17. **Initial Appearance.** The first appearance of the defendant before any judge. In the event a defendant appears before more than one judge, the first appearance before the first judge constitutes the Initial Appearance.

18. **Material.** An action or failure to act that could have an immediate and significant negative impact on the effective representation of Indigent Persons or result in the misuse of state funds.


20. **PDC Staff.** Employees of the Commission who report to the Executive Director. References to PDC Staff include the Executive Director unless otherwise specified. Information reported to the PDC will be reported using available PDF forms.


22. **Vertical Representation.** The Defending Attorney who is appointed by a court to represent an Indigent Person shall continually and personally represent that client through trial proceedings and the preservation of issues for appeal. Limited exceptions can be made in the event of the appointed attorney’s illness, other unavoidable absence or for coverage on strictly procedural issues.

23. **Willful.** An action or failure to act that is deliberate and with knowledge.

24. **Workload.** A Defending Attorney’s Caseload adjusted to account for available support staff, Case complexity, and distribution through the reporting year and other duties such as supervision.

011. – 999. (RESERVED)
AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section 19-850(1)(a), Idaho Code.

PUBLIC HEARING SCHEDULE: The public hearing concerning this rulemaking will be held on Zoom and at the Joe R. Williams Office Building as follows:

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Joe R. Williams Office Building
West Conference Room
700 W. State Street, 1st Floor
Boise, ID 83702

Masks and Social Distancing are Required at Meeting Site

* Attendance via Zoom Meeting is Encouraged *

Use this link to register:
https://us02web.zoom.us/meeting/register/tZckdeirqDwjH9Ar2WAgaMMN6yhxd_FAWJB

We encourage you to attend the meeting via Zoom. Commissioners and staff will attend the meeting via Zoom with one Commissioner or the Director in attendance at the meeting site where masks and social distancing are required.

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

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking: The agency is repealing this rule as part of its rulemaking to rewrite all current rules to simplify and clarify them. The agency is repealing all current rules: 61.01.01, 61.01.02, 61.01.03, 61.01.04, 61.01.06, 61.01.07 and 61.01.08; and replacing them with proposed rules: 61.01.01, 61.01.02, 61.01.03 and 61.01.04.

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

FISCAL IMPACT: The following is a specific description, if applicable, of any negative fiscal impact on the state general fund greater than ten thousand dollars ($10,000) during the fiscal year as a result of this rulemaking: This rule should have no fiscal impact.

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(1), Idaho Code, negotiated rulemaking was conducted. The Notice of Intent to Promulgate Rules - Negotiated Rulemaking was published in the July 1, 2020 Idaho Administrative Bulletin, Volume 20-7, page 546.

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A
ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Kathleen Elliott at (208) 332-1735.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before 5 pm Mountain Time on October 28, 2020.

Dated this 21st day of August, 2020.

Kathleen J. Elliott, Executive Director
Idaho State Public Defense Commission
816 W. Bannock, Suite 201
Mailing Address
Boise, Idaho 83702
Phone: (208) 332-1735
Fax: (208) 364-6147
Kathleen.Elliott@pdc.idaho.gov

IDAPA 61.01.02 IS BEING REPEALED IN ITS ENTIRETY
IDAPA 61 – IDAHO STATE PUBLIC DEFENSE COMMISSION
61.01.02 – REQUIREMENTS AND PROCEDURES FOR REPRESENTING INDIGENT PERSONS
DOCKET NO. 61-0102-2002 (NEW CHAPTER)
NOTICE OF RULEMAKING – PROPOSED RULE

AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section 19-850(1)(a), Idaho Code.

PUBLIC HEARING SCHEDULE: The public hearing concerning this rulemaking will be held on Zoom and at the Joe R. Williams Office Building as follows:

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

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking: This rule simplifies and clarifies requirements counties and attorneys must meet for public defense. This rule consolidates information previously spread across chapters and resolves some duplication and inconsistencies.

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

FISCAL IMPACT: The following is a specific description, if applicable, of any negative fiscal impact on the state general fund greater than ten thousand dollars ($10,000) during the fiscal year as a result of this rulemaking: The rewrite of existing rules has no fiscal impact on either the State or the stakeholders. The rules negotiation of independence and resources equity have carried over from last year and we have implemented suggested changes made during the past two years. The PDC has worked with stakeholders to implement the general principles of the rules being negotiated this year. The financial assistance to improve public defense and meet workload limits have already improved resource equity and we anticipate the PDC will be able to cover additional costs using funds that would otherwise be reverted.

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A
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Fax: (208) 364-6147
Kathleen.Elliott@pdc.idaho.gov

THE FOLLOWING IS THE PROPOSED TEXT OF DOCKET NO. 61-0102-2002
(Chapter Re-Write/New Chapter)

IDAPA 61 – IDAHO STATE PUBLIC DEFENSE COMMISSION

61.01.02  – REQUIREMENTS AND PROCEDURES FOR REPRESENTING INDIGENT PERSONS

000.  LEGAL AUTHORITY.
This chapter is adopted under the legal authority of Section 19-850(1)(a), Idaho Code.

001.  TITLE AND SCOPE.
This chapter is titled “Requirements and Procedures for Representing Indigent Persons” and contains the minimum requirements for representation of Indigent Persons.

002. – 009.  (RESERVED)

010.  DEFINITIONS.
For the purposes of this chapter, the definitions in IDAPA 61.01.01, “General Provisions and Definitions,” apply.

011. – 019.  (RESERVED)

020.  ADEQUATELY RESOURCING PUBLIC DEFENSE BY COUNTIES TO ENSURE EFFECTIVE REPRESENTATION IS PROVIDED TO INDIGENT PERSONS.
Counties shall ensure effective representation is provided to Indigent Persons by adequately resourcing public defense as follows:

01. **Supported Defense Model.** Sufficiently fund the public defense model selected under Section 19-859, Idaho Code:
   
   a. Employ or contract attorneys from the Defending Attorney Roster or require the attorney to apply for the Roster under Subsection 070.03 of these rules;
   
   b. Employ or contract with qualified staff and contractors with professional certificates, licenses and permissions as required by applicable rules and laws; and
   

02. **Defending Attorney Resources.** Ensure Defending Attorneys have resources for carrying out the Defending Attorney’s responsibilities, including:
   
   a. Confidential office, jail and courthouse meeting rooms;
   
   b. Confidential servers and systems;
   
   c. Equipment, technology, supplies; and
   
   d. Other resources needed to provide effective and zealous representation.

03. **Contracting.** Counties and contract Defending Attorneys will enter into a contract for public defense services as required by Section 19-859, Idaho Code, which must include the following core terms:
   
   a. All parties will comply with Public Defense Rules;
   
   b. Description of services and Case types included in the contract;
   
   c. Prohibition of a single fixed fee for services and expenses;
   
   d. Fee structure and amount for services;
   
   e. The county will pay client related expenses and costs;
   
   f. Defending Attorney will safeguard and retain case files and records as necessary to protect Indigent Persons, and, at termination of their contract, transfer files to the successor contract Defending Attorney; proper safeguards will be put in place to ensure no file is transferred to an attorney who may have a conflict;
   
   g. All parties keep detailed records of their public defense services and expenditures;
   
   h. Defending Attorney will notify the county if the Idaho State Bar or other licensing organization files formal charges against a Defending Attorney or non-attorney staff; and
   
   i. Authorization for and disclosure of the contract to the PDC.

04. **Communication.** The County will frequently meet with the lead institutional or primary contracting Defending Attorneys who are the main providers of public defense services about the following:
   
   a. Review compliance with Public Defense Rules, including monitoring Workloads and Vertical Representation; and
b. Review county budget and expenditures for sufficient allocation of public defense resources and assess need for Financial Assistance.

020. – 029. (RESERVED)

030. PUBLIC DEFENSE INDEPENDENT OF POLITICAL AND JUDICIAL INFLUENCE.
Counties will ensure public defense is independent of political and judicial influence.

01. No Judicial, Political or Conflict Influences. The county’s selection and retention of Defending Attorneys will not involve judicial or political influences or other conflicts of interest.

02. Independent Committees.

a. The county will use an independent committee from within the county or region for recommendations to the Board of County Commissioners for the selection of the lead institutional Defending Attorney or primary contracting Defending Attorneys as the main providers of public defense services as set forth in Sections 19-859 and 19-860(2), Idaho Code; and

b. Each judicial district will establish an independent committee of one (1) attorney from each county who practices public defense in or who is familiar or will become familiar with public defense in the county and who is not a Defending Attorney for the appointing county and who is not a prosecutor, to act as a liaison in independence issues between Defending Attorneys and county stakeholders. The Administrative District Judge (ADJ) or Trial Court Administrator (TCA) will identify the members of the committee for their District, and if the ADJ or TCA does not, the Commission will identify committee members.

c. Information about an attorney’s fitness to represent Indigent Persons is confidential and exempt from Public Records Act under Section 74-105(18)(a), Idaho Code.

03. Independent Advocate. The county will not take action against a Defending Attorney for advocating for Indigent Persons.

04. Independence. The county will limit prosecutor involvement in public defense matters that may jeopardize the independence of any Defending Attorney or undermine the delivery of public defense.

05. Independent Contract Review. The county should engage independent legal counsel to review and negotiate Defending Attorney Contracts.

040. COUNTIES TO PROVIDE CONSISTENT RESOURCES FOR PUBLIC DEFENSE.
Counties will provide adequate and equitable resources for public defense consistent with a properly funded prosecutor.

01. Staff and Facilities. Defending Attorneys and prosecutors will have equal access to quality staff and facilities.

02. Pay. Defending Attorneys and their staff will receive similar compensation as a properly funded prosecutor and staff with similar experience.

03. Other Resources. Defending Attorneys and the prosecutor will have equal access to resources necessary for legal representation. This includes but is not limited to the independent investigation and evaluation of evidence.

04. Equity Review. The county will frequently review and assess equity between, and resource needs of, Defending Attorneys and prosecutors.

05. Budget for Equity. The county will frequently review resource needs with Defending Attorney
and adequately budget to meet those needs.

041. – 049. (RESERVED)

050. APPOINTMENT OF COMPETENT DEFENDING ATTORNEYS.
Courts will appoint defending attorneys who are competent to represent indigent persons.

01. Appointment from Roster. Courts will appoint a Defending Attorney from the applicable
Defending Attorney Roster.

02. Additional Requirements for Appointments in Capital Cases. When appointing a Defending
Attorney to a Capital Case the Court must also:
   a. Assess the Defending Attorney’s Workload to ensure compliance with the Public Defense Rules;
      and
   b. At or before the Initial Appearance in a Capital Case, appoint no less than two (2) qualified Capital
      Defending Attorneys, one (1) designated lead and the other(s) as co-counsel.

03. Appointment of Attorneys Who Are Not Engaged by County. Courts will not appoint a
Defending Attorney to a case in a county if the Defending Attorney is not employed or under contract to provide
public defense services for the county.
   a. The attorney will notify the Court if they are not employed by a county or do not have a contract
      with a county as required by Section 19-859(4), Idaho Code, and Public Defense Rules; and
   b. The Court will verify the attorney is employed by a county or has a contract with the county
      containing the terms in Subsection 020.03 of these rules, and is on the applicable Roster, prior to appointment and
      commencement of representation.

04. Conflicts of Interest. A Court shall not appoint a Defending Attorney to any case with a conflict of
interest in that case.

051. – 059. (RESERVED)

060. MINIMUM REQUIREMENTS FOR DEFENDING ATTORNEYS.
Defending attorneys shall meet the following minimum requirements for providing effective representation to
indigent persons.

01. Idaho State License. Be licensed to practice law in Idaho and comply with Idaho State Bar rules.


03. Qualifications. Have demonstrated ability, training, experience and understanding regarding
representing Indigent Persons and do the following:
   a. Apply laws, rules, procedures and practices to the case and perform thorough legal research and
      analysis;
   b. Protect client confidentiality, and if breached, notify the client and any other entities when
      necessary to preserve the client’s constitutional and statutory rights;
   c. Ensure Vertical Representation from the time a Defending Attorney is appointed in each Case.
      Defending Attorneys who are unable to comply with this rule will notify their supervisor, Board of County
      Commissioners or the Court and request appropriate resources;
d. Dedicate sufficient time to each Case; ( )
e. Promptly and independently investigate the Case; ( )
f. Request funds as needed to retain an investigator; ( )
g. Request the assistance of experts where it is reasonably necessary to prepare the defense and rebut the prosecution’s case; ( )
h. Continually evaluate the case for defense investigations or expert assistance; ( )
i. Be present at the initial appearance and available to the Indigent Person in person or via technology, and: ( )
i. Preserve the client’s constitutional and statutory rights; ( )
ii. Discuss the charges, case and potential and collateral consequences with the client; ( )
iii. Obtain information relevant to Idaho Criminal Rule 46 (bail or release on own recognizance) and if appropriate, seek release; ( )
iv. Encourage the entry of a not guilty plea at initial appearance except in extraordinary circumstances where a guilty plea is constitutionally appropriate; ( )
j. Work within Caseload or Workload limits, defined in Subsection 060.05 of these rules. If a Defending Attorney’s Caseload exceeds the numeric standard, the attorney must disclose this in the Annual Report. The Report must include the reasons for the excessive Caseload or Workload, and if and how the representation met constitutional standards; ( )
k. Have sufficient time and private space to confidentially meet with Indigent Persons; ( )
l. Have private and secure information systems to confidentially access and store Indigent Person’s confidential information; ( )
m. Identify and resolve conflicts of interests in compliance with Idaho Rules of Professional Conduct (IRCP) and other applicable laws and rules; ( )
n. Be familiar with and competent to identify or use: ( )
i. Forensic and scientific methods used in prosecution and defense; ( )
ii. Mental, psychological, medical, environmental issues and impacts; ( )
iii. Written and oral advocacy; ( )
iv. Motions practice to exhaust good faith procedural and substantive defenses; ( )
v. Evidence presentation and direct and cross examination; ( )
vi. Experts as consultants and witnesses and expert evidence; ( )
vii. Forensic investigations and evidence; ( )
viii. Mitigating factors and evidence; ( )
ix. Jury selection methods and procedures; ( )
x. Electronic filing, discovery and evidence and systems;

xi. Quality and zealous representation; and

xii. Understand their own professional limitations and seek the advice of experienced attorneys or decline appointments when necessary.

04. Additional Qualifications for Capital Cases. Capital Defending Attorneys must meet the following additional requirements:

a. Have advanced familiarity and competence with the above minimum requirements for Defending Attorneys; and

b. Have knowledge and experience in the following:

i. Capital laws, rules, procedures and practices;

ii. Capital mitigation;

iii. Use of mental health evaluations and evidence;

iv. Managing and litigating complex cases;

v. Assembling and leading a trial team;

vi. Capital jury selection methods and procedures; and

vii. Qualifications meeting or exceeding the American Bar Association Guidelines for the Appointment and Performance of Defense Counsel in Death Penalty Cases to extent they do not conflict with Idaho law;

c. Lead trial Defending Attorney in Capital Cases will meet or exceed the following experience levels:

i. Active trial practitioner with no less than ten (10) years in criminal defense litigation;

ii. Lead counsel in no less than ten (10) felony jury trial tried to verdict; and

iii. Lead or co-counsel in no less than one (1) Capital Case tried to verdict or capital sentencing;

d. Trial co-counsel Defending Attorney in Capital Cases who are not qualified as lead trial counsel will meet or exceed the following experience levels:

i. Active trial practitioner with no less than five (5) years in criminal defense litigation;

ii. Lead counsel in no less than five (5) felony jury trial tried to verdict; and

iii. Lead or co-counsel in no less than one (1) Capital Case tried to verdict or capital sentence;

e. Lead appellate/post-conviction Defending Attorney in Capital Cases will meet or exceed the following experience levels:

i. Active appellate/post-conviction attorney with no less than ten (10) years in criminal defense litigation; and

ii. Lead counsel in no less than one (1) Capital or federal capital habeas corpus Case;
f. Appellate/post-conviction co-counsel in Capital Cases who are not qualified as lead appellate or lead post-conviction counsel will meet or exceed the following experience levels:
   i. Active appellate and post-conviction practitioner with no less than five (5) years in criminal defense litigation; and
   ii. Attorney in no less than one (1) Capital or federal capital habeas corpus Case;

g. Lead appellate and post-conviction counsel who do not meet the numeric years of practice or numeric number of trials/cases will meet the following alternate requirements:
   i. Meet all the other minimum requirements to ensure their abilities, training, and experience are appropriate given the nature and complexity of a Capital Case, and
   ii. Demonstrate they are qualified to provide lead trial representation or appellate and post-conviction representation in a Capital Case, as applicable, despite their years in practice and trials/cases handled;

h. Minimum requirements for Capital Case defense teams:
   i. At least two (2) qualified Capital Defending Attorneys, one (1) designated lead and the other or others as co-counsel, appointed at or before the Initial Appearance;
   ii. Immediate assembly of a team by Capital Defending Attorneys consisting of no less than the following:
      (1) Fact investigator;
      (2) Mitigation specialist;
      (3) Person trained and professionally qualified to screen for mental and psychological screenings; and
      (4) Other persons needed to provide effective and zealous representation; and
      (5) Require ongoing training and compliance with standards.

05. Caseloads and Workloads. Defending Attorneys will have Caseloads and Workloads that are appropriately sized to permit effective representation as follows:

   a. Caseload standard. Maximum Caseloads by Active Case type shall not during the reporting period exceed:
      i. Two (2) Capital Cases at a time;
      ii. Two hundred ten (210) non-capital felony Cases;
      iii. Five hundred twenty (520) misdemeanor Cases;
      iv. Two hundred thirty-two (232) juvenile Cases;
      v. One hundred five (105) child protection or parent representation Cases;
      vi. Six hundred eight (608) civil contempt or mental health Cases; and
      vii. Thirty-five (35) non-capital substantive appeal Cases.
      viii. To determine maximum Caseloads for mixed Case types, add the percentage of the maximum
Caseload for each category and the sum of those percentages is not to exceed one hundred percent (100%); and adjust the Caseload downward when the Case assignments are weighted toward more serious offenses, complex Cases, or those requiring significant expenditure of time and resources.

b. Maximum Caseloads will remain in effect until April 30, 2023, unless otherwise addressed by the Commission prior to that date. In the absence of a numerical Caseload rule, Defending Attorneys and counties should use the National Advisory Commission (NAC) Caseload limits recognized by the American Bar Association as a guideline for assessment.

c. Case Counting.

i. A felony Case is counted as follows: ( )

(1) A Case filed as a felony is counted as one (1) felony, whether it is dismissed, remanded, pled, or tried to completion; ( )

(2) A Case filed as a misdemeanor that is later amended to a felony is counted as a felony; ( )

ii. A probation violation or motion for contempt is counted as a separate Case; ( )

iii. A Case that is conflicted or consolidated is counted by the Defending Attorney assigned to the conflicted or consolidated Case and not counted by the initial Defending Attorney; ( )

iv. A Case sent to a problem-solving court is counted once as initially filed as a felony, misdemeanor, or juvenile Case; ( )

v. A Case is counted as a Capital Case if, in any part of the reporting period, the state is legally entitled to seek the death penalty under Section 18-4004A, Idaho Code; ( )

vi. Post-judgment motions are not counted as a Case; ( )

d. Defending Attorneys who are unable to comply with the Caseload rules will notify their supervisor, Board of County Commissioners or the Court and request appropriate resources. ( )

e. Workloads. Caseloads maximums are based on the following considerations: ( )

i. Adequate support staff; ( )

ii. Cases of average complexity; ( )

iii. Reasonable distribution of Cases throughout the year; and ( )

iv. No supervisory duties; ( )

f. Defending Attorneys who are unable to comply with the Workload rules will notify their supervisor, Board of County Commissioners or the Court and request appropriate resources. ( )

061. – 069. (RESERVED)

070. ROSTER REQUIREMENTS AND PROCEDURES.

01. Defending Attorney Roster. ( )

a. For inclusion on the Defending Attorney Roster, attorneys must: ( )

i. Have an active license to practice law in Idaho; ( )
ii. Attest they are in compliance with the Public Defense Rules or will comply with the Rules when appointed and representing an Indigent Person; ( )

iii. New attorneys admitted to the Idaho State Bar within the previous year will name and be mentored by an experienced Defending Attorney on the Defending Attorney Roster; ( )

iv. Have completed the minimum continuing legal education (“CLE”) requirements in Paragraph 090.03 of these rules within the previous year of being placed on the Roster or within the next sixty (60) days; ( )

v. Have completed the Defending Attorney Roster application and authorization forms. ( )

vi. Attorneys on the Defending Attorney Roster will complete Annual Reports as set forth in IDAPA 61.01.03, “Records, Reporting and Review,” Paragraph 020.01.a. Attorneys who at the time of inclusion on the Defending Attorney Roster are not under contract with a county will promptly provide PDC Staff notice and copy of any county contracts entered after inclusion. ( )

b. The Executive Director will decide whether an attorney is included on the Defending Attorney Roster; ( )

c. Continuing Eligibility. To remain on the Defending Attorney Roster attorneys must comply with the Public Defense Rules and:

i. Have completed the minimum CLE requirements under Subsection 090.03 of these rules; and ( )

ii. Have completed an Annual Report. ( )

d. The Executive Director will remove attorneys who do not meet continuing eligibility requirements from the Defending Attorney Roster. ( )

02. Capital Defending Attorney Roster. ( )

a. For Inclusion on the Capital Defending Attorney Roster, a Defending Attorney must: ( )

i. Meet minimum qualifications under Subsection 060.04 of these rules; and ( )

ii. Have completed minimum CLE requirements under Paragraph 090.03.b. of these rules within two (2) years; ( )

iii. Have completed Capital Defending Attorney Roster application and authorization forms. ( )

b. PDC Staff or contractor investigates an applicant for initial inclusion on the Capital Defending Attorney Roster. The Commission appointed subcommittee reviews applications and PDC Staff reports and makes recommendations to the Commission. The Commission makes the final decision. ( )

c. Continuing Eligibility. To remain on the Capital Defending Attorney Roster Defending Attorneys must comply with the Public Defense Rules and:

i. Have completed the minimum CLE requirements under Subsection 090.03 of these rules; and ( )

ii. Have completed Capital Case reporting and authorization forms by November 1 every other year. ( )

d. PDC Staff or contractor investigates continuing eligibility to remain on the Capital Defending Attorney Roster. The Commission appointed subcommittee reviews continuing eligibility and PDC Staff reports and
makes recommendations to the Commission. The Commission makes the final decision. The Commission will remove attorneys who do not meet continuing eligibility requirements from the Capital Defense Roster.

03. **Attorneys Engaged Prior to Roster Membership.** Attorneys who are not on the Roster at the time of employment or contract to provide public defense services must apply for Roster membership within thirty (30) days from the date of their employment or contract. Attorneys who are not approved for inclusion on the applicable Roster are not eligible to represent Indigent Persons.

04. **Confidentiality.** Information about an attorney’s fitness to represent Indigent Persons is confidential and exempt from the Public Records Act under Section 74-105(18)(a), Idaho Code.

071. – 079. (RESERVED)

080. **REVIEW OF ROSTER DECISIONS.**

01. **Denial of Initial Inclusion on the Defending Attorney Roster.**

a. An attorney may appeal a denial of initial inclusion on the Defending Attorney Roster by submitting a notice of appeal within twenty-one (21) days of the date of the Executive Director’s notice of denial.

b. The Commission will review a timely appeal and issue a final agency order affirming or reversing the Executive Director's decision, or take other action deemed appropriate by the Commission.

02. **Denial of initial inclusion on the Capital Defending Attorney Roster.**

a. A Defending Attorney may appeal a denial of initial inclusion on the Capital Defending Attorney Roster by submitting a notice of appeal within twenty-one (21) days of the date of the Commission’s notice of denial.

b. A hearing officer appointed by the Commission will review a timely appeal and issue a recommended order to the Commission.

c. The Commission will issue a final agency order adopting or rejecting the hearing officer’s recommended order, or take other action deemed appropriate by the Commission.

03. **Emergency Removal of an Attorney from the Defending Attorney Roster or Capital Defending Attorney Roster.**

a. The Executive Director will take immediate action to remove an attorney from the Roster to prevent or avoid immediate danger, and the Commission may act through an emergency proceeding under Section 67-5247, Idaho Code, when:

i. The attorney’s Idaho license to practice law is suspended;

ii. The attorney is disbarred in Idaho;

iii. The attorney’s Idaho license status is inactive; or

iv. The attorney is convicted of a serious crime as defined in IRPC 501(p).

b. The Executive Director will notify the attorney and Commission upon issuance of the order which will include a statement of the immediate danger and is effective immediately.

c. An attorney may appeal their emergency removal by submitting a notice of appeal and all supporting documentation within fourteen (14) days of the date of the Executive Director’s order.
d. The Commission will review a timely appeal and issue a decision within twenty-eight (28) days of receipt of timely filed notice and materials.

e. The Commission may base its decision on a written record or elect to hold a hearing.

04. Removal of an attorney from the Defending Attorney Roster or Capital Defending Attorney Roster for Other Reasons.

a. An attorney removed from a Roster for reasons other than set forth in Subsection 080.03 of these rules, may appeal their removal by submitting a notice of appeal and all supporting documentation within twenty-one (21) days of the Executive Director’s order of removal.

b. The Commission will review a timely appeal and issue a final agency order affirming or reversing the Executive Director’s decision, or take other action deemed appropriate by the Commission.

05. Confidentiality. Information about an attorney’s fitness to represent Indigent Persons is confidential and exempt from Public Records Act under Section 74-105(18)(a), Idaho Code.

081. – 089. (RESERVED)

090. CONTINUING LEGAL EDUCATION. Roster members must complete the minimum continuing public defense legal education requirements as follows.

01. Approval. Approval of the Executive Director is required for CLE credits to count toward minimum requirements and courses completed without pre-approval may be disapproved.

02. Idaho Law. Legal education must directly relate to Idaho substantive or procedural law and the Defending Attorney’s public defense practice to count toward minimum requirements, and will not be approved if not substantially related.

03. Minimum Number and Type of CLEs Required for Each Roster.

a. Defending Attorney Roster – Minimum of seven (7) CLE credits by September 30 each year;

b. Capital Defending Attorney Roster – Minimum of twelve (12) CLE credits with at least ten (10) from a nationally recognized and well-established capital trial training program, by September 30 every other year. Attorneys on both Rosters may count capital CLE credits toward the seven (7) CLE credits.

c. Defending Attorneys with supervisory or management duties – Additional minimum of two (2) CLE credits each year in leadership skills, attorney management, or mentoring.

091. – 999. (RESERVED)
AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section 19-850(1)(a), Idaho Code.

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We encourage you to attend the meeting via Zoom. Commissioners and staff will attend the meeting via Zoom with one Commissioner or the Director in attendance at the meeting site where masks and social distancing are required.

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

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking: The agency is repealing this rule as part of its rulemaking to rewrite all current rules to simplify and clarify them. The agency is repealing all current rules: 61.01.01, 61.01.02, 61.01.03, 61.01.04, 61.01.06, 61.01.07 and 61.01.08; and replacing them with proposed rules: 61.01.01, 61.01.02, 61.01.03 and 61.01.04.

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

FISCAL IMPACT: The following is a specific description, if applicable, of any negative fiscal impact on the state general fund greater than ten thousand dollars ($10,000) during the fiscal year as a result of this rulemaking: This rule should have no fiscal impact.

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(1), Idaho Code, negotiated rulemaking was conducted. The Notice of Intent to Promulgate Rules - Negotiated Rulemaking was published in the July 1, 2020 Idaho Administrative Bulletin, Volume 20-7, page 546.

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A
ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Kathleen Elliott at (208) 332-1735.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before 5 pm Mountain Time on October 28, 2020.

Dated this 21st day of August, 2020.

Kathleen J. Elliott, Executive Director
Idaho State Public Defense Commission
816 W. Bannock, Suite 201
Mailing Address
Boise, Idaho 83702
Phone: (208) 332-1735
Fax: (208) 364-6147
Kathleen.Elliott@pdc.idaho.gov

IDAPA 61.01.03 IS BEING REPEALED IN ITS ENTIRETY
AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section 19-850(1)(a), Idaho Code.

PUBLIC HEARING SCHEDULE: The public hearing concerning this rulemaking will be held on Zoom and at the Joe R. Williams Office Building as follows:

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Masks and Social Distancing are Required at Meeting Site

* Attendance via Zoom Meeting is Encouraged *

Use this link to register:
https://us02web.zoom.us/meeting/register/tZckdeirqDwjH9Ar2WAgbaMMN6yhxd_FAWJB

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

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking: This rule simplifies and clarifies record keeping and reporting by counties and defending attorneys about public defense services and expenditures, and PDC's review of this information. This rule consolidates information previously spread across chapters and resolves some duplication and inconsistencies.

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

FISCAL IMPACT: The following is a specific description, if applicable, of any negative fiscal impact on the state general fund greater than ten thousand dollars ($10,000) during the fiscal year as a result of this rulemaking: This rule should have no fiscal impact

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(1), Idaho Code, negotiated rulemaking was conducted. The Notice of Intent to Promulgate Rules - Negotiated Rulemaking was published in the July 1, 2020 Idaho Administrative Bulletin, Volume 20-7, page 546.

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Dated this 21st day of August, 2020.

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Kathleen.Elliott@pdc.idaho.gov

THE FOLLOWING IS THE PROPOSED TEXT OF DOCKET NO. 61-0103-2002
(Chapter Re-Write/New Chapter)

IDAPA 61 – IDAHO STATE PUBLIC DEFENSE COMMISSION

61.01.03 RECORDS, REPORTING, AND REVIEW

000. LEGAL AUTHORITY.
This chapter is adopted under the legal authority of Section 19-850(1)(a), Idaho Code.

001. TITLE AND SCOPE.
This chapter is titled “Records, Reporting, and Review,” and contains minimum public defense recordkeeping and reporting requirements and PDC’s review of this information.

002. – 009. (RESERVED)

010. DEFINITIONS.
For the purposes of this chapter, the definitions in IDAPA 61.01.01, “General Provisions and Definitions,” apply.

011. – 019. (RESERVED)

020. INFORMATION REPORTED AND RETAINED BY ROSTER MEMBERS.
Roster members must keep and report information about representation of Indigent Persons and their eligibility to remain on the roster.

01. Compliance.
<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>a.</td>
<td>All information regarding compliance with Public Defense Rules;</td>
</tr>
<tr>
<td>b.</td>
<td>Annual Report;</td>
</tr>
<tr>
<td>c.</td>
<td>Public defense contracts;</td>
</tr>
<tr>
<td>d.</td>
<td>Line item public defense expenditures of county funds and Financial Assistance; and</td>
</tr>
<tr>
<td>e.</td>
<td>Resource and Financial Assistance needs;</td>
</tr>
<tr>
<td>02.</td>
<td><strong>Changes to Information.</strong> Notify the PDC of any change in address, employer or county contracts for public defense services within thirty (30) days of the change.</td>
</tr>
<tr>
<td>03.</td>
<td><strong>Confidential Information.</strong></td>
</tr>
<tr>
<td>a.</td>
<td>Information reported to the PDC, the county, or administrative district judge must not include any records containing information protected or exempted from disclosure under the rules adopted by the Idaho Supreme Court, attorney work product, attorney-client privileged communication, or other confidential information.</td>
</tr>
<tr>
<td>b.</td>
<td>Requests for and expenditures of Extraordinary Litigation Fund shall only be disclosed to the PDC.</td>
</tr>
<tr>
<td>021. – 029.</td>
<td>(RESERVED)</td>
</tr>
<tr>
<td>030.</td>
<td><strong>INFORMATION REPORTED AND RETAINED BY COUNTIES.</strong> Counties must keep and report information about how the county provides public defense.</td>
</tr>
<tr>
<td>01.</td>
<td><strong>Compliance.</strong></td>
</tr>
<tr>
<td>a.</td>
<td>All information regarding a county’s compliance with Public Defense Rules;</td>
</tr>
<tr>
<td>b.</td>
<td>Public defense contracts;</td>
</tr>
<tr>
<td>02.</td>
<td><strong>Changes to Public Defense Model or Defending Attorneys.</strong> Notify the PDC of any change to the county’s public defense model or the attorneys employed or contracted by the county within thirty (30) days of the change.</td>
</tr>
<tr>
<td>03.</td>
<td><strong>Financial Information.</strong></td>
</tr>
<tr>
<td>b.</td>
<td>Extraordinary Litigation Fund reimbursements.</td>
</tr>
<tr>
<td>c.</td>
<td>Annual financial reporting to the Commission.</td>
</tr>
<tr>
<td>i.</td>
<td>Appropriation, budget, and expenditures for the immediately preceding county fiscal year identifying county funds, Financial Assistance, and other funds.</td>
</tr>
<tr>
<td>ii.</td>
<td>The County’s annual financial report to the PDC is due by December 31 each year.</td>
</tr>
<tr>
<td>031. – 039.</td>
<td>(RESERVED)</td>
</tr>
<tr>
<td>040.</td>
<td><strong>DETERMINATION OF COMPLIANCE.</strong> PDC staff may request, review, and audit county records to determine compliance with Public Defense Rules and Financial Assistance.</td>
</tr>
</tbody>
</table>
01. **Financial.** County budget and expenditures.  
02. **Contracts.** Public defense contracts.  
03. **Records.** Public defense records including Case names and numbers.  
04. **Annual Reports.** Information reported in Annual Reports.  
05. **Other.** Other information requested by PDC Staff or the Commission.

041. – 049. (RESERVED)

050. **DEFICIENCY REPORTING, REVIEW, AND RESPONSE.**

01. **Reporting.**  
   a. Counties and Defending Attorneys have a duty to report Deficiencies to PDC Staff.  
   b. Deficiencies may be reported by Indigent Persons, PDC Staff, or others.

02. **Review and Response.** PDC Staff will review reported Deficiencies and may work directly with a county and Defending Attorney to resolve, make a report to the Commission, or both.

03. **Non-Material Deficiencies.** If a Deficiency may be readily resolved with the assistance of PDC Staff, the Executive Director may ask the county to submit a plan to cure the Deficiency with proposed detailed action items and completion dates. If the plan is not submitted or not completed, or the Deficiency not cured according to the deadlines set by the Executive Director, the Non-Material Deficiency will be deemed Material.

04. **Material but Non-Willful Deficiencies.** If the Commission determines a Deficiency is Material following review by PDC Staff and recommendation of the Executive Director or if a non-material Deficiency is not cured by the set deadline:
   a. The county must consult with PDC Staff on a Compliance Plan and timely apply for Financial Assistance, if necessary;  
   b. The Compliance Plan must include timeframe to become compliant and progress reports from the county to PDC Staff;  
   c. If compliance is not achieved by the deadline set by the Executive Director, the Commission may designate the Material Deficiency as Willful.

05. **Material and Willful Non-Compliance.**
   a. If the Commission determines a Deficiency is Material and Willful following review by PDC Staff and recommendation of the Executive Director, and  
   b. The Commission gives notice of its intent to remedy specific Deficiencies to the extent necessary to comply with Public Defense Rules at the county’s expense:  
      i. Within fourteen (14) days of the date of said notice, the Commission and the county or their designees shall meet to attempt resolve the issues of the Material and Willful Deficiency;  
      ii. If the Commission and the county are unable to resolve the Deficiency by meeting, and  
      iii. The Commission determines it must take immediate action under Subsection 060.01 of these rules, the Commission may contract with contract Defending Attorneys or other resources as deemed appropriate to
remediate at the county’s expense; or

iv. If the Commission does not proceed under Subsection 060.01 of these rules, the Commission and the county or their designees must agree on a mediator and a date for mediation within twenty-eight (28) days, with the cost of mediation to be paid equally by the parties;

v. If after mediation the Commission and the county are unable to come to a resolution, the Commission shall provide written notice of its decision to remedy specific Deficiencies and may with contract Defending Attorneys or other resources as deemed appropriate to remediate at the county’s expense;

06. Application to Resume Public Defense. If the Commission remedies specific Deficiencies to the extent necessary to comply with Public Defense Rules at the county’s expense, the county may make application to resume public defense upon showing the county is able to do so in compliance with Public Defense Rules.

051. – 059. (RESERVED)

060. REVIEW OF WILLFUL AND MATERIAL DEFICIENCY DECISIONS.

01. Emergency Action. The Commission will take immediate action and contract with appropriate resources to remedy Willful and Material Deficiencies to avoid immediate danger and may act through an emergency proceeding under Section 67-5247, Idaho Code, when:

a. A county is using a Defending Attorney who has been removed from the applicable PDC Roster for the reasons set forth in IDAPA 61.01.02, “Requirements and Procedures for Representing Indigent Persons,” Subsection 080.03; or

b. A county has not complied with or responded to a notice of Deficiency within thirty (30) days of the date of such notice;

c. If the Commission issues an emergency order to remedy Willful and Material Deficiencies, the Commission will notify the county of its order. The Commission’s order will include a statement of the immediate danger and is effective immediately;

d. A county may challenge the Commission’s emergency order to remedy Willful and Material Deficiencies hereunder by submitting a notice of appeal and all supporting documentation within fourteen (14) days of the date of the Commission’s order;

e. The Commission will review any timely challenge and issue an emergency decision within twenty-eight (28) days of receipt of timely filed notice and materials. The Commission may base its decision on a written record or elect to hold a hearing.

02. Action for Other Reasons.

a. If the county is subject to a Commission order to remedy Willful and Material Deficiencies for reasons other than set forth in Subsection 060.01 of these rules, the county may appeal the order by submitting a notice of appeal and all supporting documentation within twenty-one (21) days of the Commission’s order.

b. A hearing officer appointed by the Commission will review a timely appeal and issue a recommended order to the Commission.

c. The Commission will issue a final agency order adopting or rejecting the recommended order, or take other action deemed appropriate by the Commission.

061. – 999. (RESERVED)
AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section 19-850(1)(a), Idaho Code.

PUBLIC HEARING SCHEDULE: The public hearing concerning this rulemaking will be held on Zoom and at the Joe R. Williams Office Building as follows:

**PUBLIC HEARING**

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Joe R. Williams Office Building  
West Conference Room  
700 W. State Street, 1st Floor  
Boise, ID 83702

Masks and Social Distancing are Required at Meeting Site

* Attendance via Zoom Meeting is Encouraged *

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INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A
ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Kathleen Elliott at (208) 332-1735.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before 5 pm Mountain Time on October 28, 2020.

Dated this 21st day of August, 2020.

Kathleen J. Elliott, Executive Director
Idaho State Public Defense Commission
816 W. Bannock, Suite 201
Mailing Address
Boise, Idaho 83702
Phone: (208) 332-1735
Fax: (208) 364-6147
Kathleen.Elliott@pdc.idaho.gov

IDAPA 61.01.04 IS BEING REPEALED IN ITS ENTIRETY
IDAPA 61 – IDAHO STATE PUBLIC DEFENSE COMMISSION
61.01.04 – FINANCIAL ASSISTANCE AND TRAINING RESOURCES
DOCKET NO. 61-0104-2002 (NEW CHAPTER)
NOTICE OF RULEMAKING – PROPOSED RULE

AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section 19-850(1)(a), Idaho Code.

PUBLIC HEARING SCHEDULE: The public hearing concerning this rulemaking will be held on Zoom and at the Joe R. Williams Office Building as follows:

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DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking: This rule simplifies and clarifies information about financial assistance and training resources available to counties and attorneys. This rule consolidates information previously spread across chapters and resolves some duplication and inconsistencies.

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

FISCAL IMPACT: The following is a specific description, if applicable, of any negative fiscal impact on the state general fund greater than ten thousand dollars ($10,000) during the fiscal year as a result of this rulemaking: This rule should have no fiscal impact.

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INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A
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Kathleen.Elliott@pdc.idaho.gov

THE FOLLOWING IS THE PROPOSED TEXT OF DOCKET NO. 61-0104-2002
(Chapter Re-Write/New Chapter)

IDAPA 61 – IDAHO STATE PUBLIC DEFENSE COMMISSION

61.01.04 – FINANCIAL ASSISTANCE AND TRAINING RESOURCES

000. LEGAL AUTHORITY.
This chapter is adopted under the legal authority of Section 19-850(1)(a), Idaho Code.

001. TITLE AND SCOPE.
This chapter is titled “Financial Assistance and Training Resources,” and contains requirements for public defense financial assistance and trainings offered through the PDC.

002. – 009. (RESERVED)

010. DEFINITIONS.
For the purposes of this chapter, the definitions in IDAPA 61.01.01, “General Provisions and Definitions,” apply.

011. – 019. (RESERVED)

020. FINANCIAL ASSISTANCE FOR COUNTIES TO PROVIDE PUBLIC DEFENSE IN COMPLIANCE WITH PUBLIC DEFENSE RULES.

01. Information for Application. Counties making application for Financial Assistance to continue complying with Public Defense Rules or cure any Deficiency must provide the following information:
a. Compliance Plan and Cost Analysis; 

b. Compliance attestation required by Section 19-862A, Idaho Code; 

c. Itemization of the County’s public defense; 

i. Expenditures for the prior county fiscal year; 

ii. Budget for the current county fiscal year; and 

iii. Anticipated budget for the upcoming county fiscal year; 

d. Information from Defending Attorneys necessary for the Compliance Plan and application; and 

e. Other information requested by PDC Staff or the Commission.

02. Preference. Financial Assistance is subject to the availability for funds, with preference given:

a. First, to counties that need assistance to cure Deficiencies; 

b. Second, to counties that need assistance to continue complying with Public Defense Rules; and 

c. Third, to counties for other improvements to public defense.

03. Financial Assistance for Workload. The Commission may award Financial Assistance for counties to pay for resources needed to meet the Workload rules in IDAPA 61.01.02, “Requirements and Procedures for Representing Indigent Persons,” Subsection 060.05 (“Workload Financial Assistance”) of these rules, which is subject to the following additional requirements:

a. Workload Financial Assistance can only be used for attorneys, staff, and other resources to comply with the Workload rules; 

b. A county must specifically state in the Financial Assistance application all proposed designated uses for Workload Financial Assistance; 

c. A county can only use Workload Financial Assistance for the designated uses approved by the Commission; 

d. If Caseload or Workload maximums are being exceeded and the county has timely requested and not received Financial Assistance to pay for resources needed to comply with Caseload or Workload rules, the county’s failure to comply with Caseload or Workload rules will not be deemed a Deficiency.

04. Financial Assistance for Joint Offices. The Commission may award additional Financial Assistance to counties that have established a joint office of public defender under Section 19-859(2), Idaho Code.

05. Review. PDC Staff will review county applications for Financial Assistance. The Executive Director or appointed subcommittee of the Commission will make recommendations to the Commission. The Commission will determine the type, terms, and amount of Financial Assistance.

06. Extraordinary Litigation Fund (“ELF”). The Executive Director or the Commission may award Financial Assistance for extraordinary litigation costs necessary for representation in a public defense case when such costs are a financial hardship on the county or when requesting from the court or the county may undermine an Indigent Person’s case.
a. Defending Attorney applicants may apply exclusively for prospective litigation costs and any request seeking reimbursement for services already rendered or expenses already paid will be rejected. ( )

b. Counties may request ELF Financial Assistance for reimbursement of extraordinary litigation costs paid and the application may only seek reimbursement for services rendered within the same state fiscal year. ( )

c. Information provided in support of an ELF application is confidential and exempt from the Public Records Act under Section 74-105(18)(b), Idaho Code. ( )

d. The Executive Director will approve or disapprove and will determine the amount of ELF assistance for costs other than attorney fees. The Commission will approve or disapprove and determine the amount of ELF assistance for attorney fees. ( )

07. Independence. Counties applying for Financial Assistance must limit prosecutor involvement in the Financial Assistance process that may jeopardize the independence of any Defending Attorney or undermine the delivery of public defense. ( )

021. – 029. (RESERVED)

030. TRAINING RESOURCES FOR DEFENDING ATTORNEYS ON THE DEFENDING ATTORNEY ROSTER, AND THEIR STAFF WHO DIRECTLY SUPPORT THE DEFENDING ATTORNEY’S PUBLIC DEFENSE PRACTICE.

01. PDC Training. The PDC may partner with outside organizations to present free or reduced cost training. ( )

02. Scholarships. The PDC may award training scholarships for approved non-PDC training. ( )

03. Non-Roster Attorneys. Attorneys not on a Roster and their staff are not eligible for PDC training or scholarships but may participate through a partner organization, if applicable. ( )

04. Preference and Conditions. Training and scholarship funds are limited and subject to the following: ( )

a. Preference is given to qualified applicants whose experience levels and compliance needs best fit the particular training program, and who did not attend a free or discounted training within the previous year; ( )

b. Approved applicants must immediately notify PDC Staff if they cannot attend or fully participate in any training; and ( )

c. Approved applicants who, without timely notifying PDC Staff, were absent from or failed to fully participate in a previous training, will not get preference and may not be eligible for training and scholarship benefits for the next twelve (12) months. ( )

031. – 999. (RESERVED)
AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section 19-850(1)(a), Idaho Code.

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INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A
ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Kathleen Elliott at (208) 332-1735.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before 5 pm Mountain Time on October 28, 2020.

Dated this 21st day of August, 2020.

Kathleen J. Elliott, Executive Director
Idaho State Public Defense Commission
816 W. Bannock, Suite 201
Mailing Address
Boise, Idaho 83702
Phone: (208) 332-1735
Fax: (208) 364-6147
Kathleen.Elliott@pdc.idaho.gov

IDAPA 61.01.06 IS BEING REPEALED IN ITS ENTIRETY
IDAPA 61 – IDAHO STATE PUBLIC DEFENSE COMMISSION
61.01.07 – RULES GOVERNING STANDARDS FOR DEFENDING ATTORNEYS THAT UTILIZE
IDAHO’S PRINCIPLES OF AN INDIGENT DEFENSE DELIVERY SYSTEM
DOCKET NO. 61-0107-2001 (CHAPTER REPEAL)
NOTICE OF RULEMAKING – PROPOSED RULE

AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has
initiated proposed rulemaking procedures. The action is authorized pursuant to Section 19-850(1)(a), Idaho Code.

PUBLIC HEARING SCHEDULE: The public hearing concerning this rulemaking will be held on Zoom and at the
Joe R. Williams Office Building as follows:

<table>
<thead>
<tr>
<th>PUBLIC HEARING</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wednesday, October 14, 2020</td>
</tr>
<tr>
<td>12:00 noon to 3:00 p.m. (Mountain) / 11:00 a.m. - 2:00 p.m. (Pacific)</td>
</tr>
</tbody>
</table>

Joe R. Williams Office Building
West Conference Room
700 W. State Street, 1st Floor
Boise, ID 83702

Masks and Social Distancing are Required at Meeting Site

* Attendance via Zoom Meeting is Encouraged *

Use this link to register:
https://us02web.zoom.us/meeting/register/tZckdeirqDwjH9Ar2WAgbaMMN6yhxd_FAWJB

We encourage you to attend the meeting via Zoom. Commissioners and staff will attend the meeting via Zoom
with one Commissioner or the Director in attendance at the meeting site where masks and social distancing are
required.

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

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the
proposed rulemaking: The agency is repealing this rule as part of its rulemaking to rewrite all current rules to simplify
and clarify them. The agency is repealing all current rules: 61.01.01, 61.01.02, 61.01.03, 61.01.04, 61.01.06, 61.01.07
and 61.01.08; and replacing them with proposed rules: 61.01.01, 61.01.02, 61.01.03 and 61.01.04.

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

FISCAL IMPACT: The following is a specific description, if applicable, of any negative fiscal impact on the state
general fund greater than ten thousand dollars ($10,000) during the fiscal year as a result of this rulemaking: This rule
should have no fiscal impact.

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(1), Idaho Code, negotiated rulemaking was
conducted. The Notice of Intent to Promulgate Rules - Negotiated Rulemaking was published in the July 1, 2020

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief
synopsis of why the materials cited are being incorporated by reference into this rule: N/A
ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Kathleen Elliott at (208) 332-1735.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before 5 pm Mountain Time on October 28, 2020.

Dated this 21st day of August, 2020.

Kathleen J. Elliott, Executive Director
Idaho State Public Defense Commission
816 W. Bannock, Suite 201
Mailing Address
Boise, Idaho 83702
Phone: (208) 332-1735
Fax: (208) 364-6147
Kathleen.Elliott@pdc.idaho.gov

IDAPA 61.01.07 IS BEING REPEALED IN ITS ENTIRETY
AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section 19-850(1)(a), Idaho Code.

PUBLIC HEARING SCHEDULE: The public hearing concerning this rulemaking will be held on Zoom and at the Joe R. Williams Office Building as follows

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Masks and Social Distancing are Required at Meeting Site

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DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking: The agency is repealing this rule as part of its rulemaking to rewrite all current rules to simplify and clarify them. The agency is repealing all current rules: 61.01.01, 61.01.02, 61.01.03, 61.01.04, 61.01.06, 61.01.07 and 61.01.08; and replacing them with proposed rules: 61.01.01, 61.01.02, 61.01.03 and 61.01.04.

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

FISCAL IMPACT: The following is a specific description, if applicable, of any negative fiscal impact on the state general fund greater than ten thousand dollars ($10,000) during the fiscal year as a result of this rulemaking: This rule should have no fiscal impact.

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(1), Idaho Code, negotiated rulemaking was conducted. The Notice of Intent to Promulgate Rules - Negotiated Rulemaking was published in the July 1, 2020 Idaho Administrative Bulletin, Volume 20-7, page 546.

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A
ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Kathleen Elliott at (208) 332-1735.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before 5 pm Mountain Time on October 28, 2020.

Dated this 21st day of August, 2020.

Kathleen J. Elliott, Executive Director
Idaho State Public Defense Commission
816 W. Bannock, Suite 201
Mailing Address
Boise, Idaho 83702
Phone: (208) 332-1735
Fax: (208) 364-6147
Kathleen.Elliott@pdc.idaho.gov

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Division of Financial Management
Office of the Governor
July 1, 1993 – Present

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This index provides a history of all agency rulemakings beginning with the first Administrative Bulletin in July 1993 to the most recent Bulletin publication. It tracks all rulemaking activities on each chapter of rules by the rulemaking docket numbers and includes negotiated, temporary, proposed, pending and final rules, public hearing notices, vacated rulemaking notices, notice of legislative actions taken on rules, and executive orders of the Governor.

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Division of Financial Management

March 20, 2020 – October 7, 2020

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02-0303-2001 Notice of Intent to Promulgate a Rule (New Chapter) – Negotiated Rulemaking, Bulletin Vol. 20-6

02.04.14, Rules Governing Dairy Byproduct
### Office of the Administrative Rules Coordinator

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<td>Rules of the Idaho Hop Growers Commission – Notice of Omnibus Rulemaking – Adoption of Temporary (Fee) Rule – Reauthorizes Title 07, Chapter 01 – Bulletin Vol. 20-4SE (eff. 3-20-20)T</td>
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<td>24-0000-2000</td>
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<tr>
<td>07-0000-2000F</td>
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**(MOVED AND REDESIGNATED)** 07.01.01, Rules of the Idaho Electrical Board

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**(MOVED AND REDESIGNATED)** 07.02.02, Rules Governing Plumbing

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39-0000-2000F  Rules of the Idaho Transportation Department – Notice of Omnibus Rulemaking – Adoption of Temporary (Fee) Rule –
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24-0000-2000  IDAPA 24 – DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSES  – Notice of Legislative and Executive Action Affecting Certain Boards and Commissions Under the Department of Self-Governing Agencies – House Bill 318, Session Law 96, and Executive Order 2020-10 and Assignment of New IDAPA Designation Number Under the Division of Occupational and Professional Licenses – Redesignated as IDAPA 24, Title 38, Chapter 01 – Bulletin Vol. 20-7 (eff. 7-1-20)

46-0101-2000F  Rules of the Idaho Board of Veterinary Medicine  – Notice of Omnibus Rulemaking – Adoption of Temporary (Fee) Rule –
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58.01.01, Rules for the Control of Air Pollution in Idaho

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### 58.01.02, Water Quality Standards
- **58-0102-2001** Notice of Meeting of the Idaho Board of Environmental Quality, Bulletin Vol. 20-9

### 58.01.03, Individual/Subsurface Sewage Disposal Rules and Rules for Cleaning of Septic Tanks

### 58.01.04, Rules for Administration of Wastewater Treatment Facility Grants
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- **58-0104-1901** Proposed Rulemaking (Chapter Repeal), Bulletin Vol. 19-11 (*Repeals and Consolidates into 58.01.22*)

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### 58.01.12, Rules for Administration of Water Pollution Control Loans
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- **58-0112-1901** Proposed Rulemaking**, Bulletin Vol. 19-11 (**Consolidates 58.01.20 into this chapter**)
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### 58.01.19, Rules for the Design and Construction of Phosphogypsum Stacks

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- **58-0000-2000F** Rules of the Department of Environmental Quality – Notice of Omnibus Rulemaking – Adoption of Temporary (Fee) Rule – Reauthorizes Title 01, Chapter 20 – Bulletin Vol. 20-4SE (eff. 3-20-20)T
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58.01.25, Rules Regulating the Idaho Pollutant Discharge Elimination System Program


58-0000-2000F Rules of the Department of Environmental Quality – Notice of Omnibus Rulemaking – Adoption of Temporary (Fee) Rule – Reauthorizes Title 01, Chapter 25 – Bulletin Vol. 20-4SE (eff. 3-20-20)T


IDAPA 59 – PUBLIC EMPLOYEE RETIREMENT SYSTEM OF IDAHO (PERSI)

59.01.01, Rules for the Public Employee Retirement System of Idaho (PERSI)


IDAPA 60 – IDAHO STATE SOIL AND WATER CONSERVATION COMMISSION

60.05.01, Rules of the Idaho State Soil and Water Conservation Commission


60-0501-2000F Rules of the Idaho State Soil and Water Conservation Commission – Notice of Omnibus Rulemaking – Adoption of Temporary (Fee) Rule – Reauthorizes Title 05, Chapter 01 – Bulletin Vol. 20-4SE (eff. 3-20-20)T

IDAPA 61 – STATE PUBLIC DEFENSE COMMISSION

Omnibus Rulemaking – Consolidation and Reorganization of Chapters Under the Direction of ISPDC Chapters 61.01.01, through 61.01.08


61.01.01, General Provisions and Definitions

61-0101-2002 Proposed Rulemaking (New Chapter), Bulletin Vol. 20-10


61.01.01, Rules Governing Training Requirements for Defending Attorneys and the Administration of Training Funds

61-0101-2001 Proposed Rulemaking (Chapter Repeal), Bulletin Vol. 20-10


61.01.02, Requirements and Procedures for Representing Indigent Persons

61-0102-2002 Proposed Rulemaking (New Chapter), Bulletin Vol. 20-10


61.01.02, Rules Governing Uniform Data Reporting Requirements and Forms for Defending Attorney Annual Reports

61-0102-2001 Proposed Rulemaking (Chapter Repeal), Bulletin Vol. 20-10

61.01.03, Records, Reporting, and Review  
61-0103-2002 Proposed Rulemaking (New Chapter), Bulletin Vol. 20-10  

61.01.03, Rules Governing Contracts and Core Requirements for Contracts Between Counties and Private Attorneys for the Provision of Indigent Defense Services  
61-0103-2001 Proposed Rulemaking (Chapter Repeal), Bulletin Vol. 20-10  

61.01.04, Financial Assistance and Training Resources  
61-0104-2002 Proposed Rulemaking (New Chapter), Bulletin Vol. 20-10  

61.01.04, Rules Governing Procedures and Forms for the Application and Disbursement of Indigent Defense Financial Assistance  
61-0104-2001 Proposed Rulemaking (Chapter Repeal), Bulletin Vol. 20-10  

61.01.06, Rules Governing Procedures for the Oversight, Implementation, Enforcement, and Modification of Indigent Defense Standards  
61-0106-2001 Proposed Rulemaking (Chapter Repeal), Bulletin Vol. 20-10  

61.01.07, Rules Governing Standards for Defending Attorneys that Utilize Idaho’s Principles of an Indigent Defense Delivery System  
61-0107-2001 Proposed Rulemaking (Chapter Repeal), Bulletin Vol. 20-10  

61.01.08, Rules Governing the Administration of Idaho's Indigent Defense Delivery Systems - Rule Definitions  
61-0108-2001 Proposed Rulemaking (Chapter Repeal), Bulletin Vol. 20-10  
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 latest publication of the state Administrative Bulletin.

The proposed rule public hearing request deadline is October 21, 2020, unless otherwise posted.
The proposed rule written comment submission deadline is October 28, 2020, unless otherwise posted.
(Temp & Prop) indicates the rulemaking is both Temporary and Proposed.
(*PH) indicates that a public hearing has been scheduled.

IDAPA 08 – STATE BOARD OF EDUCATION
PO Box 83720, Boise, ID 83720-0037
08-0201-2001, Rules Governing Administration. (Temp & Prop) Establishes a methodology for reporting student enrollment, to include virtual or blended instruction; removes high school equivalency certificate application requirement; and technical corrections pertaining to funding and student counts. (eff. 8-26-20)T

08-0202-2002, Rules Governing Uniformity. References new Advanced Professional Endorsement to align rule with state law; and sets provisions for career technical educator degree based certification to comport with new legislation.

08-0501-2001, Rules Governing Seed and Plant Certification. Chapter repealed to conform to legislative action.

IDAPA 16 – DEPARTMENT OF HEALTH AND WELFARE
PO Box 83720, Boise, ID 83720-0036
16.03.09 – Medicaid Basic Plan Benefits
*16-0309-2002, (*PH) Removes references to federal exclusion of Institutions for Mental Disease (IMD) to allow Medicaid reimbursement for services delivered to eligible adults in an IMD setting.
*16-0309-2004, (*PH) Waives clearance requirements for Peer Support and Recovery Coaching service providers; implementation of an Electronic Visit Verification system to comply with federal law; and simplify procedures for Home Health services.

*16-0310-2002, Medicaid Enhanced Plan Benefits. (*PH) Complying with federal law by implementing an Electronic Visit Verification system for Personal Care Services requiring in-home visit; and increases current Behavioral Care Unit census requirement to 30% for new providers.

IDAPA 35 – STATE TAX COMMISSION
PO Box 36, Boise, ID 83722-0036

IDAPA 39 – IDAHO TRANSPORTATION DEPARTMENT
3311 W State St, Boise, ID 83707-1129
39-0271-2001, Rules Governing Driver’s License Violation Point System. (Temp & Prop) Per enacted law, adds new violation and driver’s license assessed points for distracted driving. (eff. 8-20-20)T

IDAPA 50 – COMMISSION OF PARDONS AND PAROLE
3056 Elder St, Boise, ID 83705
50-0101-2001, Rules of the Commission of Pardons and Parole. Requires service of legal documents on commissioners or agency staff to be processed by assigned deputy attorney general.
IDAPA 54 – OFFICE OF THE STATE TREASURER
700 W Jefferson St, Ste. 126, Boise, ID 83720
54-0201-2001, Rules Governing the College Savings Program. Chapter repealed to conform to legislative action.

IDAPA 59 – PUBLIC EMPLOYEE RETIREMENT SYSTEM OF IDAHO (PERSI)
PO Box 83720, Boise, ID 83720-0078
59-0101-2001, Rules for the Public Employee Retirement System of Idaho (PERSI). Omission of certain terms due to enacted legislation for “Police Officer Member Status”; and changing an age requirement per federal law.

IDAPA 61 – IDAHO STATE PUBLIC DEFENSE COMMISSION
816 W Bannock, Ste 201, Boise, ID 83702
*61-0101-2002, General Provisions and Definitions. (*PH) New Chapter contains general provisions and definitions applicable to PDC.
*61-0103-2002, Records, Reporting and Review. (*PH) New Chapter contains minimum public defense recordkeeping and reporting requirements and PDC’s review of this information.
*61-0104-2002, Financial Assistance and Training Resources. (*PH) New Chapter contains requirements for public defense financial assistance and trainings offered through the PDC.

NOTICE OF ADOPTION OF TEMPORARY RULE ONLY
IDAPA 24 – DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSES
24-2001-2002, Rules of the Division of Occupational and Professional Licenses (eff. 8-7-20)T

IDAPA 39 – IDAHO TRANSPORTATION DEPARTMENT
39-0000-2000F, Omnibus Rulemaking – Amendment to Temporary Rule – Amends Title 02, Chapter 60 (eff. 1-1-21)T

NOTICE OF PROCLAMATION
IDAPA 13 – IDAHO FISH AND GAME COMMISSION / DEPARTMENT OF FISH AND GAME
13.01.11 – Rules Governing Fish. 13-0111-1901AAAAAAP (Amended), 13-0111-2003P.
Please refer to the Idaho Administrative Bulletin October 7, 2020, Volume 20-10, for the notices and text of all rulemakings, proclamations, negotiated rulemaking and public hearing information and schedules, executive orders of the Governor, and contact information.

Issues of the Idaho Administrative Bulletin can be viewed at www.adminrules.idaho.gov/

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