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Executive Orders

EXECUTIVE ORDER JBE 22-19

Equitably Coordinating Louisiana's
Statewide Infrastructure Investments

WHEREAS, on November 15, 2021, President Joseph R. Biden signed into law the federal Infrastructure Investment and Jobs Act (hereinafter, the "IIJA");

WHEREAS, alongside the IIJA, President Biden issued Executive Order 14052 on November 15, 2021, which stressed that in implementing the IIJA, all federal agencies should effectively coordinate with state, local, and tribal governments in implementing these critical investments equitably;

WHEREAS, Louisiana has already received and will continue to receive both formula allocations and discretionary awards of federal funds authorized by the IIJA for much-needed infrastructure improvements in the transportation, clean energy, broadband, water, environmental remediation, and resilience sectors;

WHEREAS, on January 27, 2021, President Biden issued Executive Order 14008, which announced the Justice40 Initiative ("Justice40"), setting a goal that at least 40% of the benefits of certain federal programs be realized in disadvantaged communities;

WHEREAS, to comply with Justice40, federal agencies have begun to identify Justice40 covered programs, many of which are part of the IIJA;

WHEREAS, the IIJA presents a generational opportunity to Louisiana communities where infrastructure will be developed and to businesses in the infrastructure sector, including small businesses and those that are minority, women, or veteran-owned or disadvantaged; and

WHEREAS, in order to ensure that IIJA programs benefit all the citizens of Louisiana and comply with the federal Justice40 mandate where applicable, it is crucial to coordinate statewide planning efforts with a wide and diverse array of stakeholders from communities throughout our State.

NOW THEREFORE, I, JOHN BEL EDWARDS, Governor of the State of Louisiana, by virtue of the authority vested by the Constitution and laws of the State of Louisiana, do hereby order and direct as follows:

SECTION 1: By December 15, 2022, all agencies, departments, and public bodies within the executive department of the State of Louisiana shall, to the extent that they apply for funding under the federal Infrastructure Investment and Jobs Act (IIJA), develop and submit to the Governor's Infrastructure Implementation Coordinator and the State Planning Manager in the Office of Planning and Budget of the Division of Administration action plans to:

A. Increase access to the contract selection process for small, minority, women and veteran-owned, and disadvantaged business enterprises for all federal IIJA-funded contracts; and

B. Engage with local and tribal governments, nonprofits, and other community organizations to increase access to IIJA funding opportunities.

SECTION 2: The contract selection process provided for in the action plans under this Order shall include deliverables for all contractors engaged in the performance of IIJA-funded projects, including, but not limited to, all of the following:

A. Submission of utilization plans to agencies, which include methods of acquiring and utilizing small, minority, women and veteran-owned, and disadvantaged business enterprises in the performance and completion of these contracts; and

B. Presentation to agencies of monthly utilization reports every thirty days after the initial approval of the utilization plans; and

C. Demonstration to agencies of methods to hire or employ as many local residents or businesses as is consistent with providing efficient and effective services under the contract(s).

SECTION 3: This Order is effective upon signature and shall continue in effect until amended, modified, terminated, or rescinded by the Governor, or terminated by operation of law.

IN WITNESS WHEREOF, I have set my hand officially and caused to be affixed the Great Seal of the State of Louisiana in the City of Baton Rouge, on this 15th day of November, 2022.

John Bel Edwards
Governor

ATTEST BY
THE GOVERNOR
R. Kyle Ardoin
Secretary of State
2212#062

EXECUTIVE ORDER JBE 22-20

Bond Allocation 2022 Ceiling

WHEREAS, Section 146 of the Internal Revenue Code of 1986 (hereafter the "Act"), as amended (hereafter the "Code"), restricts the total principal amount of certain private activity bonds (hereafter the "Bonds") that exclude interest from gross income for federal income tax purposes under Section 103 of the Code;

WHEREAS, Act No. 51 of the 1986 Regular Session of the Louisiana Legislature (hereafter "Act No. 51 of 1986") authorizes the Governor to allocate the volume limit applicable to the Bonds (hereafter the "ceiling") among the State and its political subdivisions in such a manner as the Governor deems to be in the best interest of the State of Louisiana;

WHEREAS, pursuant to the Act and Act No. 51 of 1986, Executive Order Number JBE 2016-35 was issued to establish:

(a) the manner in which the ceiling shall be determined,

(b) the method to be used in allocating the ceiling,

(c) the application procedure for obtaining an allocation of Bonds subject to such ceiling, and

(d) a system of record keeping for such allocations; and

WHEREAS, the Louisiana Housing Corporation (hereafter the "Corporation") has applied for an allocation of the 2022 ceiling to be used in connection with its Single Family Mortgage Revenue Bonds (Homeownership Program) Series 2022B (Non-AMT) (Social Bonds) in the amount of \$37,000,000 ("Series 2022B Bonds") and paying for costs of issuance.

NOW THEREFORE, I, JOHN BEL EDWARDS, Governor of the State of Louisiana, by virtue of the authority vested by the Constitution and laws of the State of Louisiana, do hereby order and direct as follows:

SECTION 1: The bond issue, as described in this Section, shall be and is hereby granted an allocation from the 2022 ceiling in the amount shown:

Amount of Allocation	Name of Issuer	Name of Project
\$37,000,000	Louisiana Housing Corporation	Single Family Mortgage Revenue Bonds (Home Ownership Program) Series 2022B (Non-AMT)

SECTION 2: The allocation granted herein shall be used only for the bond issue described in Section 1 and for the general purpose set forth in the "Application for Allocation of a Portion of the State of Louisiana's Private Activity Volume Cap" submitted in connection with the bond issue described in Section 1.

SECTION 3: The allocation granted herein shall be valid and in full force and effect through December 31, 2022.

SECTION 4: This Order is effective upon signature and shall remain in effect until amended, modified, terminated, or rescinded by the Governor, or terminated by operation of law.

IN WITNESS WHEREOF, I have set my hand officially and caused to be affixed the Great Seal of the State of Louisiana in the City of Baton Rouge, on this 30th day of November, 2022.

John Bel Edwards
Governor

ATTEST BY
THE GOVERNOR
R. Kyle Ardoin
Secretary of State
2212#063

Emergency Rules

DECLARATION OF EMERGENCY

Department of Children and Family Services Division of Child Welfare

State Central Registry (LAC 67.V.1103)

The Department of Children and Family Services (DCFS) has exercised the emergency provisions of the Administrative Procedure Act, R.S. 49:953 (B) to amend LAC 67:V, Subpart 3, Chapter 11, Section 1103 State Central Registry. This Emergency Rule shall be effective November 14, 2022, and shall remain in effect for a period of 180 days.

Section 1103 is being amended to allow DCFS to disclose information regarding perpetrators of child abuse and/or neglect listed on the SCR for any current or prospective employee or volunteer of a service provider who is obligated by contract with DCFS to conduct SCR checks prior to performing contracted duties in the Child Protective Services, Family Services or Foster Care programs within the department.

The department considers emergency action necessary to ensure safety of children and/or families receiving services from the department.

Title 67

SOCIAL SERVICES

Part V. Child Welfare

Subpart 3. Child Protective Services

Chapter 11. Administration and Authority

§1103. State Central Registry

A. - F.2. ...

G. DCFS is authorized to release information maintained on the SCR in limited circumstances. This information will be released according to the following provisions.

1. - 13. ...

14. DCFS will disclose information regarding perpetrators of child abuse and/or neglect listed on the SCR for any current or prospective employee or volunteer of a service provider who is obligated by contract with DCFS to conduct SCR checks prior to performing contracted duties in the child protective services, family services or foster care programs within the department.

AUTHORITY NOTE: Promulgated in accordance with the Children's Code, title VI, articles 615 and 616 and title XII, article 1173, R.S. 14:403(H), R.S. 46:51.2(A), R.S. 46:56, R.S. 46:1414.1, 42 USC 15601 et seq., 28 CFR 115.6., 42 USC 9858f and R.S. 40:2008.10.

HISTORICAL NOTE: Promulgated by the Department of Social Services, Office of Community Services, LR 18:79 (January 1992), amended LR 20:198 (February 1994), LR 21:583 (June 1995), LR 23:590 (May 1997), LR 26:790 (April 2000), LR 31:1609 (July 2005), LR 36:838 (April 2010), amended by the Department of Children and Family Services, Division of Programs, Child Welfare Section, LR 42:862 (June 2016), amended by the Department of Children and Family Services, Division of Child Welfare, LR 44:998 (June 2018), effective July 1, 2018, amended LR 45:217 (February 2019), amended LR 45:1053

(August 2019), LR 46:14 (January 2020), effective February 1, 2020, LR 49:

Terri Ricks
Acting Secretary

2212#001

DECLARATION OF EMERGENCY

Office of the Governor Division of Administration Tax Commission

Ad Valorem Taxation

(LAC 61:V. 103, 203, 211, 213, 303, 304, 307, 703, 705, 901, 903, 905, 907, 1001, 1003, 1005, 1007, 1103, 1307, 1503, 2501, 2503, 3101, 3103, and 3507)

The Tax Commission exercised the provisions of the Administrative Procedure Act, R.S. 49:953(B), and pursuant to its authority under R.S. 47:1837, adopted the following additions, deletions and amendments to the Real/Personal Property Rules and Regulations. This rule is hereby adopted on the day of promulgation.

This Emergency Rule is necessary in order for ad valorem tax assessment tables to be disseminated to property owners and local tax assessors no later than the statutory valuation date of record of January 2023. Cost indexes required to finalize these assessment tables are not available to this office until late October 2022. The effective date of this Emergency Rule is January 2023.

Pursuant to the Administrative Procedure Act, this Emergency Rule shall be in effect for a maximum of 120 days or until adoption of the final Rule or another Emergency Rule, whichever occurs first.

Title 61

REVENUE AND TAXATION

Part V. Ad Valorem Taxation

Chapter 1. Constitutional and Statutory Guides to Property Taxation

§103. Exempt Property

A. In addition to the homestead exemption provided for in Section 20 of Article VII of the constitution, the following property and no other shall be exempt from ad valorem taxation:

1. public lands; other public property used for public purposes;

2. property of a nonprofit corporation or association organized and operated exclusively for religious, dedicated places of burial, charitable, health, welfare, fraternal, or educational purposes, no part of the net earnings of which inure to the benefit of any private shareholder or member and which is declared to be exempt from federal or state income tax:

a. medical equipment leased for a term exceeding five years to such a nonprofit corporation or association which owns or operates a small, rural hospital and which

uses the equipment solely for health care purposes at the hospital, provided that the property shall be exempt only during the term of the lease to such corporation or association, and further provided that "small, rural hospital" shall mean a hospital which meets all of the following criteria:

i. it has less than 50 Medicare-licensed acute care beds; and

ii. it is located in a municipality with a population of less than 10,000 which has been classified as an area with a shortage of health manpower by the United States Health Service;

3. property of a bona fide labor organization representing its members or affiliates in collective bargaining efforts; and

4. property of an organization such as a lodge or club organized for charitable and fraternal purposes and practicing the same, and property of a nonprofit corporation devoted to promoting trade, travel, and commerce, and also property of a trade, business, industry or professional society or association, if that property is owned by a nonprofit corporation or association.

a. The exemption should be allowed only if it is determined that the requesting organization has met all of the constitutional requirements for exemption. Assessors may request the following information from the taxpayer in order to make a determination of exemption:

i. completed LTC Form TC-80, Application for Exemption—Real Estate Taxes;

ii. certified copy of the articles of incorporation of the organization;

iii. certified copy of the by-laws of the organization;

iv. copy of the Internal Revenue Service letter granting the organization tax-exempt status;

v. audited financial statements for the preceding three years, along with an affidavit from the organization's CPA and/or treasurer that the financial statements are true and correct;

vi. federal tax returns filed for the preceding three years; and

vii. affidavit from the president or other duly appointed officer stating:

(a). the price paid for each share of stock issued by the organization for the past five years;

(b). whether or not over the previous five years any dividends have been paid or interest accrued on the value of the stock of the organization; and

(c). whether or not any part of the net earnings of the organization inure to the benefit of any member of the organization;

NOTE: See Louisiana Constitution of 1974, Article VII, Section 21.B, for specific conditions of authorization.

b. none of the property listed in §103.A.2, 3, and 4 shall be exempt if owned, operated, leased or used for commercial purposes unrelated to the exempt purposes of the corporation or association;

5. cash on hand or deposit;

6. stocks and bonds, except bank stocks, the tax on which shall be paid by the banking institution;

7. obligations secured by mortgage on property located in Louisiana and the notes or other evidence thereof;

8. loans by life insurance companies to policyholders, if secured solely by their policies;

9. the legal reserve of domestic life insurance companies;

10. loans by a homestead or building and loan association to its members, if secured solely by stock of the association;

11. debts due for merchandise or other articles of commerce or for services rendered;

12. obligations of the state or its political subdivisions;

13. personal property used in the home or on loan in a public place;

14. irrevocably dedicated places of burial held by individuals for purposes of burial of themselves or members of their families;

15. agricultural products while owned by the producer, agricultural machinery and other implements used exclusively for agricultural purposes (including crop dusting aircraft), animals on the farm, and property belonging to an agricultural fair association (also see R.S. 47:1707);

16. property used for cultural, Mardi Gras carnival, or civic activities and not operated for profit to the owners;

17. rights-of-way granted to the state Department of Highways (DOTD);

18. boats using gasoline as motor fuel;

19. commercial vessels used for gathering seafood for human consumption;

20. ships and oceangoing tugs, towboats and barges engaged in international trade and domiciled in Louisiana ports: a. however, this exemption shall not apply to harbor, wharf, shed, and other port dues or to any vessel operated in the coastal trade of the states of the United States;

21. materials, boiler fuels, and energy sources used by public utilities to fuel the generation of electricity;

22. all incorporeal movables of any kind or nature whatsoever, except public service properties, bank stocks, and credit assessments on premiums written in Louisiana by insurance companies and loan and finance companies. (See Louisiana Civil Code of 1870, as amended, and R.S. 47:1709);

23. raw materials, goods, commodities, articles and personal property imported into this state from outside the states of the United States or, held in storage while in transit through this state which are moving in interstate commerce;

NOTE: See Louisiana Constitution, Article VII, Section 21.D; and, R.S. 47:1951.1, R.S. 47:1951.2 and R.S. 47:1951.3 for specific conditions of authorization. Property described in §103.A.23, whether or not entitled to exemption, shall be reported to the proper taxing authorities on the forms required by law.

24. motor vehicles used on the public highways of this state, from state, parish, municipal, and special ad valorem taxes;

25. new manufacturing establishments and additions to existing manufacturing establishments to the extent tax exempt by virtue of an approved contract with the State Board of Commerce and Industry, as authorized by Article VII, Section 21.F of the Louisiana Constitution of 1974;

26. coal or lignite stockpiled in Louisiana for use in Louisiana for industrial or manufacturing purposes or for boiler fuel, gasification, feedstock, or process purposes;

27. value of enhancements to certain structures located in downtown, historic, or economic development districts to be granted a limited exemption by the State Board of

Commerce and Industry, if approved by the governor and the local governing authority, as authorized by Article VII, Section 21.H of the Louisiana Constitution of 1974;

28. goods held in inventory by distribution centers, to be granted tax exemptions by the parish economic development or governing authority, with the approval of each affected tax recipient body in the parish, as authorized by Article VII, Section 21.I of the Louisiana Constitution of 1974.

AUTHORITY NOTE: Promulgated in accordance with the Louisiana Constitution of 1974, Article VII, §21.

HISTORICAL NOTE: Promulgated by the Department of Revenue and Taxation, Tax Commission, LR 8:102 (February 1982), amended LR 12:36 (January 1986), LR 15:1097 (December 1989), LR 17:1213 (December 1991), amended by the Department of Revenue, Tax Commission, LR 24:478 (March 1998), LR 32:426 (March 2006), LR 34:675 (April 2008), LR 49:

Chapter 2. Policies and Procedures for Assessment and Change Order Practices

§203. Change Order Requests

A. General Provision

1. A change order request may be made to correct an error in assessment if the change does not increase the taxpayer's tax liability or the taxpayer expressly consents to the change. A change to an assessment that increases the taxpayer's tax liability is governed by R.S. 47:1966.

2. Change order requests shall be submitted via the LTC website (www.latax.state.la.us).

3. All change order requests shall comply with Louisiana Law and the Real/Personal Property Rules and Regulations of the LTC.

4. All change order requests shall require that the actual physical address of the property be identified. In the event that there is no actual physical street address, the assessor's office shall furnish the street/highway location and a brief location description.

5. Change order batches should not exceed a total of 50 change order requests, in order to facilitate speedy transmission.

6. Change order requests are subject to audit by the LTC.

7. All change order requests should be submitted to the LTC no later than noon on Thursday of each week in order to be considered on the next public meeting docket of the LTC.

8. All change order requests are subject to review by LTC staff for approval or denial by the commission at their regularly scheduled Open Meetings.

9. The assessor shall certify that the affected taxpayer(s) have been notified of the change order request that has been submitted to the LTC.

B. - F. ...

AUTHORITY NOTE: Promulgated in accordance with the Louisiana Constitution of 1974, Article VII, Section 20. (A)(1); R.S. 47:1703, R.S. 47:1703A., R.S. 47:1703.1.B., R.S. 47:1835, R.S. 47:1837, R.S. 47:1952, R.S. 47:1966, R.S. 47:1990, and R.S. 47:1991.

HISTORICAL NOTE: Promulgated by the Department of Revenue, Tax Commission, LR 31:700 (March 2005), LR 32:426 (March 2006), amended by the Division of Administration, Tax Commission, LR 48:1518 (June 2022), LR 49:

§211. Industrial Exemption Properties

A. All property of manufacturing establishments with contracts for the exemption from ad valorem taxes with the State Board of Commerce and Industry, or its successor, with the approval of the governor and administered by the Department of Economic Development (DED), shall be listed as exempt at the appropriate exempt percentage, until such time as the contract has expired or is terminated.

B. Any property of manufacturing establishments subject to a contract for the exemption from ad valorem taxes with the State Board of Commerce and Industry, or its successor, shall be assessed under a separate/unique assessment number.

C. Property of manufacturing establishments subject to a contract for the exemption from ad valorem taxes with the Board of Commerce and Industry, or its successor, shall be reported on the applicable reporting forms, and must include the following information:

1. contract number;
2. start and end dates of the contract;
3. penalty years (if applicable);
4. percent of exemption;
5. original contract amount;
6. revised contract amount (if applicable);
7. millages subject to exemption.

D. Assessors' offices shall review all Industrial Exemption applications and DED contracts issued to determine proper exempt status for ad valorem taxation purposes.

1. If an assessor determines that any portion of an Industrial Exemption is not eligible for ad valorem tax exemption, pursuant to Article VII, Section 21(F) of the Louisiana Constitution of 1974 and rules of the Industrial Tax Exemption Program, the assessor shall informally address concerns to the DED Manager of the Industrial Tax Exemption Program. If informal communication does not satisfactorily answer the assessor's concerns, formal notice shall immediately be submitted to DED, with written ineligibility reasons given.

2. All contract status reports submitted to the assessors' offices by DED and the taxpayer's annual LAT 5-A reports shall be reviewed for accuracy. Any inaccuracies noted shall be reported, in writing, to DED immediately upon discovery.

3. Assessors' offices shall review and confirm contract expiration dates and immediately notify DED, in writing, of any disparity identified. If any exempted manufacturing business is determined to have ceased its operations (business closed) during a contracted exemption period, the assessors' office should provide notice to DED of such cessation.

4. Assessors are urged to obtain rules for the Industrial Tax Exemption Program available at www.lded.state.la.us/come-to-louisiana/business-resources/state-business-incentives/industrial-tax-exemption-program.aspx or by contacting DED's Business Incentives Division.

5. The filing of an advance notice or application for an Industrial Exemption does not exempt property from ad valorem taxes.

AUTHORITY NOTE: Promulgated in accordance with the Louisiana Constitution of 1974, Article VII, Section 21(F), R.S. 47:1837, R.S. 47:4301, et seq.

HISTORICAL NOTE: Promulgated by the Department of Revenue, Tax Commission, LR 31:702 (March 2005), LR 32:427 (March 2006), LR 34:677 (April 2008), LR 49:

§213. Assessment Policies and Procedures

A. - D. ...

E. The assessors shall submit applicable reporting forms to all taxpayers located within their parish, whether taxable or exempt, to ensure equity and uniformity in the assessment and valuation of all properties utilizing proper reporting data. Reporting forms should include the items outlined in §211.C for property subject to an ITEP contract. If a taxpayer fails to report or files a false report, the assessors should apply those penalties provided for in state law.

F. - I. ...

NOTE: Also see, Chapter 1, §111.D thru D.3 and Chapter 3, §303.C.4 through C.4.c.

AUTHORITY NOTE: Promulgated by the Department of Louisiana Constitution of 1974, Article VII, Section 18, et seq., R.S. 47:1703, R.S. 47:1703.1, R.S.47:1703.C., R.S. 47:1837, R.S. 47:1951, et seq., R.S. 47:1952, R.S. 47:1953, R.S. 47:1955, R.S. 47:1956, R.S. 47:1957, R.S. 47:1959, R.S. 47:1961, R.S. 47:1971, R.S. 47:1972, R.S. 47:2306, R.S. 47:2323, R.S. 47:2324, R.S. 47:2325, R.S. 47:2329, R.S. 47:2330, and R.S. 47:2331.

HISTORICAL NOTE: Promulgated by the Department of Revenue, Tax Commission, LR 31:703 (March 2005), LR 34:678 (March 2008), amended by the Office of the Governor, Division of Administration, Tax Commission, LR 43:649 (April 2017), LR 46:560 (April 2020), LR 48:1519 (June 2022), LR 49:

Chapter 3. Real and Personal Property

§303. Real Property

A. In making appraisals of any real property, including but not limited to residential, commercial and industrial land

C. Electronic Tax Roll Export Specifications

Assessment Information (Assmt.txt) (Required)				
Field Name	Field Type	Field Length	Required	Comments
tax_year	Numeric	4	Yes	Tax year submitting (ex. 1999, 2000) ***
assessment_status	Character	2	Yes	“AC” = Active, “AJ” = Adjudicated, “EX” = Exempt/Tax Free, “IE” = Industrial Exemption, “RS” = Restoration and “OT” = Other NOTE: Effective 1-1-24, the LTC plans to consolidate these categories
homestead_exempt	Numeric	1	Yes	0 = None (default), 1 = homestead exemption, 2 = 100% Disabled Veteran and 3 = Surviving Spouse ***
restoration_tax_exempt	Character	1	Yes	Restoration Tax Abatements on historical property, N = No (Default), Y = Yes
other_exempt_types	Numeric	1	No	4 = Industrial, 5 = Restoration, 6 = Agricultural Buildings, 7 = Institutional (School and Government), 8 = Religious and 9 = Non-Profit; NOTE: Effective 1-1-24, the LTC plans to make this a Required Field
other_exempt_percent	Numeric	6.2	No	Other Exemption percentage to be applied to assessment (Format: 100.00 (Default), “Y” = yes; NOTE: Effective 1-1-24, the LTC plans to make this a Required Field
tax_acct	Numeric	6	No	Tax account number is required for grouping tax assessments together ***
usufruct	Character	1	Yes	“N” = No (default) and “Y” = Yes

Assessment Value Information (Avalue.txt) (Required)				
Field Name	Field Type	Field Length	Required	Comments
tax_year	Numeric	4	Yes	Tax year submitting (ex. 1999, 2000) ***
market_value	Numeric	12	Yes	Fair Market Value.
total_value	Numeric	10	Yes	Total assessed value of the property. (total of taxpayer’s share and the homestead credit, other exemption and non-taxable assessed value added together.) ***

and improvements, the assessors shall follow the criteria and requirements in §111 of the Tax Commission’s Rules and Regulations.

B. The following procedure shall be used for assessing, listing and placing transferred property and property upon which improvements have been made after the date of the reappraisal as set by the Tax Commission:

1. Improvements shall be added to the rolls based upon the condition of things existing on January 1 of each year. The value of the improvements shall be in accordance with the uniform valuation date and quadrennial reappraisal cycle as determined by the Tax Commission.

C. - E. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1837 and R.S. 47:2323.

HISTORICAL NOTE: Promulgated by the Louisiana Tax Commission, LR 7:44 (February 1981), amended by the Department of Revenue and Taxation, Tax Commission, LR 9:69 (February 1983), LR 12:36 (January 1986), LR 13:764 (December 1987), LR 16:1063 (December 1990), LR 17:611 (June 1991), LR 21:186 (February 1995), amended by the Department of Revenue, Tax Commission, LR 25:312 (February 1999), LR 26:506 (March 2000), LR 29:367 (March 2003), LR 30:487 (March 2004), LR 34:678 (April 2008), LR 35:492 (March 2009), LR 36:765 (April 2010), amended by the Division of Administration, Tax Commission, LR 38:799 (March 2012), LR 39:487 (March 2013), LR 42:745 (May 2016), LR 43:650 (April 2017), LR 44:577 (March 2018), LR 45:532 (April 2019), LR 46:560 (April 2020), LR 48:1521 (June 2022), LR 49:

§304. Electronic Change Order Specifications, Property Classification Standards and Electronic Tax Roll Export Specifications

A. - B. ...

Assessment Value Information (Avalue.txt) (Required)				
Field Name	Field Type	Field Length	Required	Comments
other_exempt_value	Numeric	10	No	Assessed value to be credited by other exemptions (e.g. Industrial, Agricultural, Institutional, Religious, Non-profit); NOTE: Effective 1-1-24, the LTC plans to make this a Required Field
taxpayer_value	Numeric	10	Yes	Assessed value to be paid by Taxpayer. * * *

Assessment Millage Information (Amillage.txt) (Required)				
Field Name	Field Type	Field Length	Required	Comments
tax_year	Numeric	4	Yes	Tax year submitting (ex. 1999, 2000) * * *
percent	Numeric	6.2	Yes	Percent of assessed value applicable to the millage. (Applies to split district millages, use 100.00 as default value if percent is not applied.)
taxing_body_approval	Numeric	1	Yes	Indicates if local taxing body related to the millage approved an exemption (or did not vote). 0 = voted to deny exemption, 1 = voted to approve exemption/NA.
total_tax	Numeric	11.2	Yes	Total taxes assessed to the property. (Format:99999999.99)
homestead_credit	Numeric	11.2	Yes	Homestead exemption share of taxes credited. (Format: 99999999.99)
other_exempt_taxes	Numeric	11.2	No	Other exemption share of taxes credited. (Format: 99999999.99); NOTE: Effective 1-1-24, the LTC plans to make this a Required Field
taxpayer_tax	Numeric	11.2	Yes	Tax payer's taxes owed. (Format: 99999999.99)

* * *

Tax Exemption Program Information (TEP.txt)				
Field Name	Field Type	Field Length	Required	Comments
tax_year	Numeric	4	Yes	Tax year submitting (ex. 2017, 2018) * * *
contract_end_date	Character	10	No	Date contract ends (Format 01/01/1999)
penalty_years	Numeric	12	Yes	Specifies the number of penalty years assessed by the Board of Commerce and Industry, if applicable. (Default: 0)
contract_status_type	Character	2	Yes	"IE" = Industrial Exemption, "RS" = Restoration
industrial_exemption_type	Numeric	1	Yes	1 = Industrial Exemption subject to 80% cap, 2 = Industrial Exemption megaproject subject to 93% cap, 3 = Legacy Industrial Exemption not subject to cap
original_contract_amt	Numeric	12	Yes	Value of the original contract * * *

Summary Information (SUM.txt)				
Field Name	Field Type	Field Length	Required	Comments
tax_year	Numeric	4	No	Tax year submitting (ex. 2017, 2018)
fips_code	Numeric	5	No	Parish FIPS code
taxpayer_name	Character	50	No	Taxpayer's name
market_value	Numeric	12	No	Fair market value
assessed_value	Numeric	10	No	Total assessed value of the property
exempt_value	Numeric	6	No	Exempt assessed value
taxpayer_value	Numeric	10	No	Assessed value to be paid by Taxpayer
exempt_percent	Numeric	6.2	No	Exemption percentage to be applied to assessment. Format: 100.00 (Default)
total_tax	Numeric	11.2	No	Total taxes assessed to the property. (Format: 99999999.99)
exempt_tax	Numeric	11.2	No	Taxes subject to exemption. (Format: 99999999.99)
taxpayer_tax	Numeric	11.2	No	Taxpayer's taxes owed. (Format: 99999999.99)

AUTHORITY NOTE: Promulgated in accordance with the Louisiana Constitution of 1974, Article VII, §18 and R.S. 47:1837.

HISTORICAL NOTE: Promulgated by the Department of Revenue, Tax Commission, LR 31:703 (March 2005), LR 32:427 (March 2006), LR 36:765 (April 2010), amended by the Division of Administration, Tax Commission, LR 38:799 (March 2012), LR 39:487 (March 2013), LR 40:529 (March 2014), LR 41:672 (April 2015), LR 42:745 (May 2016), LR 43:651 (April 2017), LR 44:578 (March 2018), LR 45:532 (April 2019), LR 48:1522 (June 2022), LR 49:

§307. Personal Property Report Forms

A. The appropriate self-reporting Personal Property Report Form, is to be forwarded each year, on or before February 15 in the year in which the property is to be appraised, to each person in whose name the property is

assessed. Upon completion, the property owner shall return the form to the assessor by the first day of April of that year or 45 days after receipt, whichever is later. Prior to the deadline for filing a complaint with the Board of Review provided for in R.S. 47:1992, the property owner shall also submit to the assessor, or the designee contracted by the assessor, any and all additional documentation and information the property owner believes is relevant to the determination of fair market value of the reported property. Nothing in these Rules prohibits a taxpayer/property owner from arguing that the tables fail to achieve fair market value in a particular appeal or that another approach to value is appropriate to achieve fair market value in a particular appeal. It is the party seeking a deviation from the tables or

for a reduction for its property based on obsolescence who has the burden of producing sufficient data and information to substantiate its claim. The assessor shall legitimately consider all evidence and information submitted or publicly available to the assessor, including the consideration of functional and/or economic obsolescence. The assessor shall request additional documentation from the taxpayer if the assessor determines that the documentation submitted by the taxpayer is insufficient. The assessor shall promptly respond to a taxpayer's request for a reduction in value and/or obsolescence. Both the assessors and taxpayers are expected and ordered to act in good faith on issues concerning personal property renditions and requests for a fair market value reduction based on obsolescence. On appeal to the Tax Commission, the assessor shall be prepared to offer an articulated analysis for the assessor's determination of value, including the consideration of functional and/or economic obsolescence, and shall be prepared to offer an articulated analysis for the assessor's evaluation of the sufficiency of the taxpayer's documentation.

1. - 5. ...

6. LAT Form 10, Brine Operations Property Form, should be furnished to all brine operation companies doing business in the parish or taxing district.

7. LAT Form 11, Watercraft, should be sent to owners of watercraft domiciled in the parish and to all owners operating watercraft out of the parish on the assessment date. This form should be used as a supplement to LAT 5 for companies that own such property but are not interstate towing or barge line companies, whose watercraft are assessed by the Tax Commission as public service properties.

A.7.a. - B.3. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1837, R.S. 47:2324 and R.S. 47:2326.

2. Floating Equipment—Motor Vessels

HISTORICAL NOTE: Promulgated by the Tax Commission, LR 2:358 (November 1976), amended by the Department of Revenue and Taxation, Tax Commission, LR 8:102 (February 1982), LR 13:764 (December 1987), LR 16:1063 (December 1990), LR 21:186 (February 1995), amended by the Department of Revenue, Tax Commission, LR 33:489 (March 2007), amended by the Office of the Governor, Division of Administration, Tax Commission, LR 45:533 (April 2019), LR 48:1522 (June 2022), LR 49:

Chapter 7. Watercraft

§703. Tables—Watercraft

A. Motorized Floating Equipment

1. Floating Equipment—Motor Vessels

Table 703.A.1 Floating Equipment—Motor Vessels				
Cost Index (Average)		Average Economic Life 12 Years		
Year	Index	Effective Age	Percent Good	Composite Multiplier
2022	0.956	1	94	.90
2021	1.123	2	87	.98
2020	1.222	3	80	.98
2019	1.228	4	73	.90
2018	1.272	5	66	.84
2017	1.316	6	58	.76
2016	1.342	7	50	.67
2015	1.331	8	43	.57
2014	1.343	9	36	.48
2013	1.361	10	29	.39
2012	1.372	11	24	.33
2011	1.411	12	22	.31
2010	1.455	13	20	.29

Table 703.A.2 Floating Equipment—Motor Vessels						
Vessel Type/Size	Day Rate	Base Cost	2021 - 2017	2016 - 2012	2011 - 2007	2006 and Earlier
Cost Index			0.92349	0.68481	0.32732	0.3125
Research Vessel						
110'-139'	4000	\$3,000,000	\$2,770,470	\$2,054,430	\$981,960	\$865,771.88
140'-179'	4500	\$2,500,000	\$2,308,725	\$1,712,025	\$818,300	\$781,250
180'-199'	6800	\$4,000,000	\$3,693,960	\$2,739,240	\$1,309,280	\$1,250,000
200'-219'	8500	\$6,000,000	\$5,540,940	\$4,108,860	\$1,963,920	\$1,875,000
220'-279'	10000	\$9,500,000	\$8,773,155	\$6,505,695	\$3,109,540	\$2,968,750
280'-299'	12000	\$12,000,000	\$11,081,880	\$8,217,720	\$3,927,840	\$3,750,000
300'-319'	16000	\$18,000,000	\$16,622,820	\$12,326,580	\$5,891,760	\$5,625,000
320'+	18000	\$20,000,000	\$18,469,800	\$13,696,200	\$6,546,400	\$6,250,000
Dive Vessel						
110'-139'	4000	\$3,000,000	\$2,770,470	\$2,054,430	\$981,960	\$937,500
140'-179'	4500	\$3,000,000	\$2,770,470	\$2,054,430	\$981,960	\$937,500
180'-199'	5000	\$4,000,000	\$3,693,960	\$2,739,240	\$1,309,280	\$1,250,000
200'-219'	6500	\$6,000,000	\$5,540,940	\$4,108,860	\$1,963,920	\$1,875,000
220'-279'	7500	\$9,500,000	\$8,773,155	\$6,505,695	\$3,109,540	\$2,968,750
280'-299'	8500	\$6,500,000	\$6,002,685	\$4,451,265	\$2,127,580	\$2,031,250
300'-319'	9000	\$8,000,000	\$7,387,920	\$5,478,480	\$2,618,560	\$2,500,000
320'+	10000	\$9,500,000	\$8,773,155	\$6,505,695	\$3,109,540	\$2,968,750
Pollution Control Vessel						
110'-139'	4000	\$2,400,000	\$2,216,376	\$1,643,544	\$785,568	\$750,000
140'-179'	4500	\$2,400,000	\$2,216,376	\$1,643,544	\$785,568	\$750,000

Table 703.A.2 Floating Equipment—Motor Vessels						
Vessel Type/Size	Day Rate	Base Cost	2021 - 2017	2016 - 2012	2011 - 2007	2006 and Earlier
Cost Index			0.92349	0.68481	0.32732	0.3125
180'-199'	6800	\$3,200,000	\$2,955,168	\$2,191,392	\$1,047,424	\$1,000,000
200'-219'	8500	\$4,800,000	\$4,432,752	\$3,287,088	\$1,571,136	\$1,500,000
220'-279'	10000	\$7,600,000	\$7,018,524	\$5,204,556	\$2,487,632	\$2,375,000
280'-299'	12000	\$9,600,000	\$8,865,504	\$6,574,176	\$3,142,272	\$3,000,000
300'-319'	16000	\$14,400,000	\$13,298,256	\$9,861,264	\$4,713,408	\$4,500,000
320'+	18000	\$16,000,000	\$14,775,840	\$10,956,960	\$5,237,120	\$5,000,000
Platform Supply Vessel						
110'-139'	4000	\$3,000,000	\$2,770,470	\$2,054,430	\$981,960	\$937,500
140'-179'	4500	\$3,000,000	\$2,770,470	\$2,054,430	\$981,960	\$937,500
180'-199'	6800	\$4,000,000	\$3,693,960	\$2,739,240	\$1,309,280	\$1,250,000
200'-219'	8500	\$6,000,000	\$5,540,940	\$4,108,860	\$1,963,920	\$1,875,000
220'-279'	10000	\$9,500,000	\$8,773,155	\$6,505,695	\$3,109,540	\$2,968,750
280'-299'	12000	\$12,000,000	\$11,081,880	\$8,217,720	\$3,927,840	\$3,750,000
300'-319'	16000	\$18,000,000	\$16,622,820	\$12,326,580	\$5,891,760	\$5,625,000
320'+	18000	\$20,000,000	\$18,469,800	\$13,696,200	\$6,546,400	\$6,250,000
Jack Up Vessel						
60'-89'	N/A	\$3,500,000	\$3,232,215	\$2,396,835	\$1,145,620	\$1,093,750
90'-109'	N/A	\$3,800,000	\$3,509,262	\$2,602,278	\$1,243,816	\$1,187,500
110'-139'	N/A	\$4,500,000	\$4,155,705	\$3,081,645	\$1,472,940	\$1,406,250
140'-174'	N/A	\$5,200,000	\$4,802,148	\$3,561,012	\$1,702,064	\$1,625,000
175'-219'	N/A	\$6,500,000	\$6,002,685	\$4,451,265	\$2,127,580	\$2,031,250
220'-239'	N/A	\$8,400,000	\$7,757,316	\$5,752,404	\$2,749,488	\$2,625,000
240'+	N/A	\$9,500,000	\$8,773,155	\$6,505,695	\$3,109,540	\$2,968,750
Inland Tugs						
50-60'X25-35' 600 HP	2000	\$1,000,000	\$923,490	\$684,810	\$327,320	\$312,500
50-60'X25-45' 900 HP	2400	\$1,200,000	\$1,108,188	\$821,772	\$392,784	\$375,000
60-70'X30-45' 1200 HP	2600	\$1,400,000	\$1,292,886	\$958,734	\$458,248	\$437,500
60-70'X30-55' 1500 HP	2850	\$1,500,000	\$1,385,235	\$1,027,215	\$490,980	\$468,750
70-80'X30-55' 1800 HP	3000	\$1,800,000	\$1,662,282	\$1,232,658	\$589,176	\$562,500
80-100'X30-50' 2400 HP	4000	\$2,800,000	\$2,585,772	\$1,917,468	\$916,496	\$875,000
80-100'X30-60' 3000 HP	4200	\$3,500,000	\$3,232,215	\$2,396,835	\$1,145,620	\$1,093,750
100-120'X45-55' 4200 HP	4300	\$3,800,000	\$3,509,262	\$2,602,278	\$1,243,816	\$1,187,500
110-150'X30-75' 6000 HP	4800	\$5,000,000	\$4,617,450	\$3,424,050	\$1,636,600	\$1,562,500
Offshore Tugs						
60-80'X25-35' 1800 HP	3500	\$3,200,000	\$2,955,168	\$2,191,392	\$1,047,424	\$1,000,000
75-90'X25-35' 2400 HP	3800	\$3,500,000	\$3,232,215	\$2,396,835	\$1,145,620	\$1,093,750
95-105'X30-40' 3000 HP	4000	\$3,800,000	\$3,509,262	\$2,602,278	\$1,243,816	\$1,187,500
100-120'X35-50' 4200 HP	4250	\$4,500,000	\$4,155,705	\$3,081,645	\$1,472,940	\$1,406,250
120-140'X40-60' 6000 HP	4500	\$4,800,000	\$4,432,752	\$3,287,088	\$1,571,136	\$1,500,000
140-160'X35-60' 10,000 HP	5000	\$5,000,000	\$4,617,450	\$3,424,050	\$1,636,600	\$1,562,500
Push Boats						
50-60'X25-35' 600 HP	2000	\$1,000,000	\$923,490	\$684,810	\$327,320	\$312,500
50-60'X25-45' 900 HP	2400	\$1,200,000	\$1,108,188	\$821,772	\$392,784	\$375,000
60-70'X30-45' 1200 HP	2600	\$1,400,000	\$1,292,886	\$958,734	\$458,248	\$437,500
60-70'X30-55' 1500 HP	2850	\$1,500,000	\$1,385,235	\$1,027,215	\$490,980	\$468,750
70-80'X30-55' 1800 HP	3000	\$1,800,000	\$1,662,282	\$1,232,658	\$589,176	\$562,500
80-100'X30-50' 2400 HP	4000	\$2,800,000	\$2,585,772	\$1,917,468	\$916,496	\$875,000
80-100'X30-60' 3000 HP	4200	\$3,500,000	\$3,232,215	\$2,396,835	\$1,145,620	\$1,093,750
100-120'X45-55' 4200 HP	4300	\$3,800,000	\$3,509,262	\$2,602,278	\$1,243,816	\$1,187,500
110-150'X30-75' 6000 HP	4800	\$5,000,000	\$4,617,450	\$3,424,050	\$1,636,600	\$1,562,500
Model Bow Boats						
50-60'X25-35' 600 HP	N/A	\$2,200,000	\$2,031,678	\$1,506,582	\$720,104	\$687,500
50-60'X25-45' 900 HP	N/A	\$2,800,000	\$2,585,772	\$1,917,468	\$916,496	\$875,000
60-70'X30-45' 1200 HP	N/A	\$3,200,000	\$2,955,168	\$2,191,392	\$1,047,424	\$1,000,000
75-90'X25-35' 2400 HP	N/A	\$6,500,000	\$6,002,685	\$4,451,265	\$2,127,580	\$2,031,250
95-105'X30-40' 3000 HP	N/A	\$8,200,000	\$7,572,618	\$5,615,442	\$2,684,024	\$2,562,500
100-120'X35-50' 4200 HP	N/A	\$10,500,000	\$9,696,645	\$7,190,505	\$3,436,860	\$3,281,250

Table 703.A.2 Floating Equipment—Motor Vessels						
Vessel Type/Size	Day Rate	Base Cost	2021 - 2017	2016 - 2012	2011 - 2007	2006 and Earlier
Cost Index			0.92349	0.68481	0.32732	0.3125
120-140'X40-60' 6000 HP	N/A	\$13,500,000	\$12,467,115	\$9,244,935	\$4,418,820	\$4,218,750
140-160'X35-60' 10,000 HP	N/A	\$20,000,000	\$18,469,800	\$13,696,200	\$6,546,400	\$6,250,000
Skiff						
Under 20'	50	\$90,000	\$83,114.10	\$61,632.90	\$29,458.80	\$25,973.16
20'-40'	150	\$180,000	\$166,228.20	\$123,265.80	\$58,917.60	\$56,250
40'-60'	200	\$220,000	\$203,167.80	\$150,658.20	\$72,010.40	\$68,750
Steamboat						
120X30	200	\$250,000	\$230,872.50	\$171,202.50	\$81,830	\$78,125
140X40	400	\$450,000	\$415,570.50	\$308,164.50	\$147,294	\$140,625
180X54	600	\$900,000	\$831,141	\$616,329	\$294,588	\$281,250
250X72 Non Class	400	\$1,800,000	\$1,662,282	\$1,232,658	\$589,176	\$562,500
250X72 Class	600	\$2,900,000	\$2,678,121	\$1,985,949	\$949,228	\$906,250
260X72 Non Class	400	\$1,900,000	\$1,754,631	\$1,301,139	\$621,908	\$593,750
260X72 Class	800	\$3,000,000	\$2,770,470	\$1,301,139	\$981,960	\$937,500
300X100 Non Class	1200	\$3,200,000	\$2,955,168	\$2,191,392	\$1,047,424	\$1,000,000
300X100 Class	2400	\$6,400,000	\$5,910,336	\$4,382,784	\$2,094,848	\$2,000,000
400X100 Non Class	3000	\$6,000,000	\$5,540,940	\$4,108,860	\$1,963,920	\$1,875,000
400X100 Class	6000	\$12,000,000	\$11,081,880	\$8,217,720	\$3,927,840	\$3,750,000
Riverboat Casino						
120X30	200	\$250,000	\$230,872.50	\$171,202.50	\$81,830	\$78,125
140X40	400	\$450,000	\$415,570.50	\$308,164.50	\$147,294	\$140,625
180X54	600	\$900,000	\$831,141	\$616,329	\$294,588	\$281,250
250X72 Non Class	400	\$1,800,000	\$1,662,282	\$1,232,658	\$589,176	\$562,500
250X72 Class	600	\$2,900,000	\$2,678,121	\$1,985,949	\$949,228	\$906,250
260X72 Non Class	400	\$1,900,000	\$1,754,631	\$1,301,139	\$621,908	\$593,750
260X72 Class	800	\$3,000,000	\$2,770,470	\$2,054,430	\$981,960	\$937,500
300X100 Non Class	1200	\$3,200,000	\$2,955,168	\$2,191,392	\$1,047,424	\$1,000,000
300X100 Class	2400	\$6,400,000	\$5,910,336	\$4,382,784	\$2,094,848	\$2,000,000
400X100 Non Class	3000	\$6,000,000	\$5,540,940	\$4,108,860	\$1,963,920	\$1,875,000
400X100 Class	6000	\$12,000,000	\$11,081,880	\$8,217,720	\$3,927,840	\$3,750,000

B. Non-Motorized Floating Equipment

1. Floating Equipment—Barges (Non-Motorized)
Cost Index

Table 703.B.1 Floating Equipment—Barges (Non-Motorized)				
Cost Index Average		Average Economic Life 20 Years		
Year	Index	Effective Age	Percent Good	Composite Multiplier
2022	0.956	1	97	.93
2021	1.123	2	93	1.04
2020	1.222	3	90	1.10
2019	1.228	4	86	1.06
2018	1.272	5	82	1.04
2017	1.316	6	78	1.03
2016	1.342	7	74	.99
2015	1.331	8	70	.93
2014	1.343	9	65	.87

Table 703.B.1 Floating Equipment—Barges (Non-Motorized)				
Cost Index Average		Average Economic Life 20 Years		
Year	Index	Effective Age	Percent Good	Composite Multiplier
2013	1.361	10	60	.82
2012	1.372	11	55	.75
2011	1.411	12	50	.71
2010	1.455	13	45	.65
2009	1.444	14	40	.58
2008	1.486	15	35	.52
2007	1.545	16	31	.48
2006	1.629	17	27	.44
2005	1.704	18	24	.41
2004	1.833	19	22	.40
2003	1.896	20	21	.40
2002	1.928	21	20	.39

2. Floating Equipment—Barges (Non-Motorized)

Table 703.B.2 Floating Equipment—Barges (Non-Motorized)								
Barge Type/Size	Day Rate	Base Cost	2021 - 2017	2016 - 2012	2011 - 2007	2006 - 2002	2001 - 1997	1996 & Earlier
Cost Index			0.95328	0.92395	0.74816	0.68218	0.51552	0.51552
Deck								
120x30	100	\$250,000	\$238,320	\$230,987.50	\$187,040	\$170,545	\$128,880	\$128,880
140X40	250	\$450,000	\$428,976	\$415,777.50	\$336,672	\$306,981	\$231,984	\$231,984
180X54	350	\$900,000	\$857,952	\$831,555	\$673,344	\$613,962	\$463,968	\$463,968
250X72 Non Class	400	\$1,800,000	\$1,715,904	\$1,663,110	\$1,346,688	\$1,227,924	\$927,936	\$927,936
250X72 Class	600	\$2,900,000	\$2,764,512	\$2,679,455	\$2,169,664	\$1,978,322	\$1,495,008	\$1,495,008
260X72 Non Class	400	\$1,900,000	\$1,811,232	\$1,755,505	\$1,421,504	\$1,296,142	\$979,488	\$979,488
260X72 Class	700	\$3,000,000	\$2,859,840	\$2,771,850	\$2,244,480	\$2,046,540	\$1,546,560	\$1,546,560
300X100 Non Class	1200	\$3,200,000	\$3,050,496	\$2,956,640	\$2,394,112	\$2,182,976	\$1,649,664	\$1,649,664
300X100 Class	1800	\$6,400,000	\$6,100,992	\$5,913,280	\$4,788,224	\$4,365,952	\$3,299,328	\$3,299,328
400X100 Non Class	2500	\$6,000,000	\$5,719,680	\$5,543,700	\$4,488,960	\$4,093,080	\$3,093,120	\$3,093,120
400X100 Class	6000	\$12,000,000	\$11,439,360	\$11,087,400	\$8,977,920	\$8,186,160	\$6,186,240	\$6,186,240
Dredge								
8" Cutter	N/A	\$425,000	\$405,144	\$392,678.75	\$317,968	\$289,926.50	\$219,096	\$219,096
10" Cutter	N/A	\$650,000	\$619,632	\$600,567.50	\$486,304	\$443,417	\$335,088	\$335,088
14" Cutter	N/A	\$950,000	\$905,616	\$877,752.50	\$710,752	\$648,071	\$489,744	\$489,744
16" Cutter	N/A	\$1,100,000	\$1,048,608	\$1,016,345	\$822,976	\$750,398	\$567,072	\$567,072
20" Cutter	N/A	\$3,600,000	\$3,431,808	\$3,326,220	\$2,693,376	\$2,455,848	\$1,855,872	\$1,855,872
24" Cutter	N/A	\$4,500,000	\$4,289,760	\$4,157,775	\$3,366,720	\$3,069,810	\$2,319,840	\$2,319,840
Transport								
120X30	200	\$250,000	\$238,320	\$230,987.50	\$187,040	\$170,545	\$128,880	\$128,880
140X40	400	\$450,000	\$428,976	\$415,777.50	\$336,672	\$306,981	\$231,984	\$231,984
180X54	600	\$900,000	\$857,952	\$831,555	\$673,344	\$613,962	\$463,968	\$463,968
250X72 Non Class	400	\$1,800,000	\$1,715,904	\$1,663,110	\$1,346,688	\$1,227,924	\$927,936	\$927,936
250X72 Class	600	\$2,900,000	\$2,764,512	\$2,679,455	\$2,169,664	\$1,978,322	\$1,495,008	\$1,495,008
260X72 Non Class	400	\$1,900,000	\$1,811,232	\$1,755,505	\$1,421,504	\$1,296,142	\$979,488	\$979,488
260X72 Class	800	\$3,000,000	\$2,859,840	\$2,771,850	\$2,244,480	\$2,046,540	\$1,546,560	\$1,546,560
300X72 Non Class	1200	\$3,200,000	\$3,050,496	\$2,956,640	\$2,394,112	\$2,182,976	\$1,649,664	\$1,649,664
300X72 Class	2400	\$6,400,000	\$6,100,992	\$5,913,280	\$4,788,224	\$4,365,952	\$3,299,328	\$3,299,328
400X100 Non Class	3000	\$6,000,000	\$5,719,680	\$5,543,700	\$4,488,960	\$4,093,080	\$3,093,120	\$3,093,120
400X100 Class	6000	\$12,000,000	\$11,439,360	\$11,087,400	\$8,977,920	\$8,186,160	\$6,186,240	\$6,186,240
Crane								
120X30	250	\$1,800,000	\$1,715,904	\$1,663,110	\$1,346,688	\$1,227,924	\$927,936	\$927,936
150X50	400	\$2,200,000	\$2,097,216	\$2,032,690	\$1,645,952	\$1,500,796	\$1,134,144	\$1,134,144
180X60	450	\$2,600,000	\$2,478,528	\$2,402,270	\$1,945,216	\$1,773,668	\$1,340,352	\$1,340,352
250X72	600	\$3,000,000	\$2,859,840	\$2,771,850	\$2,244,480	\$2,046,540	\$1,546,560	\$1,546,560
300X100	750	\$4,000,000	\$3,813,120	\$3,695,800	\$2,992,640	\$2,728,720	\$2,062,080	\$2,062,080
Oil								
10K	300	\$2,000,000	\$1,906,560	\$1,847,900	\$1,496,320	\$1,364,360	\$1,031,040	\$1,031,040
30K	800	\$4,000,000	\$3,813,120	\$3,695,800	\$2,992,640	\$2,728,720	\$2,062,080	\$2,062,080
80K	2000	\$6,500,000	\$6,196,320	\$6,005,675	\$4,863,040	\$4,434,170	\$3,350,880	\$3,350,880
120K	3000	\$12,000,000	\$11,439,360	\$11,087,400	\$8,977,920	\$8,186,160	\$6,186,240	\$6,186,240
Spar (Holds)								
175X26 (1000 Tons)	200	\$2,000,000	\$1,906,560	\$1,847,900	\$1,496,320	\$1,364,360	\$1,031,040	\$1,031,040
195X35 (2200 Tons)	250	\$2,200,000	\$2,097,216	\$2,032,690	\$1,645,952	\$1,500,796	\$1,134,144	\$1,134,144
290X35 (3000 Tons)	400	\$4,500,000	\$4,289,760	\$4,157,775	\$3,366,720	\$3,069,810	\$2,319,840	\$2,319,840
Shugart								
10X5X2	50	\$50,000	\$47,664	\$46,197.50	\$37,408	\$34,109	\$25,776	\$25,776
20X10X4	50	\$50,000	\$47,664	\$46,197.50	\$37,408	\$34,109	\$25,776	\$25,776
40X12X5	100	\$60,000	\$57,196.80	\$55,437	\$44,889.60	\$40,930.80	\$30,931.20	\$30,931.20
Spud								
110x30	250	\$300,000	\$285,984	\$277,185	\$224,448	\$204,654	\$154,656	\$154,656
120X30	250	\$1,400,000	\$1,334,592	\$1,293,530	\$1,047,424	\$955,052	\$721,728	\$721,728

**Table 703.B.2
Floating Equipment—Barges (Non-Motorized)**

Barge Type/Size	Day Rate	Base Cost	2021 - 2017	2016 - 2012	2011 - 2007	2006 - 2002	2001 - 1997	1996 & Earlier
Cost Index			0.95328	0.92395	0.74816	0.68218	0.51552	0.51552
140X40	400	\$1,600,000	\$1,525,248	\$1,478,320	\$1,197,056	\$1,091,488	\$824,832	\$824,832
140X45	400	\$1,600,000	\$1,525,248	\$1,478,320	\$1,197,056	\$1,091,488	\$824,832	\$824,832
180X54	500	\$2,000,000	\$1,906,560	\$1,847,900	\$1,496,320	\$1,364,360	\$1,031,040	\$1,031,040
200x60	800	\$3,500,000	\$3,336,480	\$3,233,825	\$2,618,560	\$2,387,630	\$1,804,320	\$1,804,320
250X72	900	\$3,800,000	\$3,622,464	\$3,511,010	\$2,843,008	\$2,592,284	\$1,958,976	\$1,958,976
Pile Driver								
120X30	150	\$1,800,000	\$1,715,904	\$1,663,110	\$1,346,688	\$1,227,924	\$927,936	\$927,936
150X50	250	\$2,200,000	\$2,097,216	\$2,032,690	\$1,645,952	\$1,500,796	\$1,134,144	\$1,134,144
180X60	375	\$2,600,000	\$2,478,528	\$2,402,270	\$1,945,216	\$1,773,668	\$1,340,352	\$1,340,352
250X72	450	\$3,000,000	\$2,859,840	\$2,771,850	\$2,244,480	\$2,046,540	\$1,546,560	\$1,546,560
300X100	575	\$4,000,000	\$3,813,120	\$3,695,800	\$2,992,640	\$2,728,720	\$2,062,080	\$2,062,080
Hopper (Holds)								
175X26 (1000 Tons)	200	\$2,000,000	\$1,906,560	\$1,847,900	\$1,496,320	\$1,364,360	\$1,031,040	\$1,031,040
195X35 (2200 Tons)	250	\$2,200,000	\$2,097,216	\$2,032,690	\$1,645,952	\$1,500,796	\$1,134,144	\$1,134,144
290X35	400	\$4,500,000	\$4,289,760	\$4,157,775	\$3,366,720	\$3,069,810	\$2,319,840	\$2,319,840
Tank								
10K	400	\$1,600,000	\$1,525,248	\$1,478,320	\$1,197,056	\$1,091,488	\$824,832	\$824,832
30K	800	\$3,200,000	\$3,050,496	\$2,956,640	\$2,394,112	\$2,182,976	\$1,649,664	\$1,649,664
80K	1700	\$5,200,000	\$4,957,056	\$4,804,540	\$3,890,432	\$3,547,336	\$2,680,704	\$2,680,704
120K	3500	\$9,600,000	\$9,151,488	\$8,869,920	\$7,182,336	\$6,548,928	\$4,948,992	\$4,948,992
Pressure								
250X50 (16,000 Barrels)	1500	\$3,200,000	\$3,050,496	\$2,956,640	\$2,394,112	\$2,182,976	\$1,649,664	\$1,649,664
Keyway								
120X30	200	\$200,000	\$190,656	\$184,790	\$149,632	\$136,436	\$103,104	\$103,104
140X40	400	\$360,000	\$343,180.80	\$332,622	\$269,337.60	\$245,584.80	\$185,587.20	\$185,587.20
180X54	500	\$720,000	\$686,361.60	\$665,244	\$538,675.20	\$491,169.60	\$371,174.40	\$371,174.40
250X72 Non Class	400	\$1,440,000	\$1,372,723.20	\$1,330,488	\$1,077,350.40	\$982,339.20	\$742,348.80	\$742,348.80
250X72 Class	600	\$2,320,000	\$2,211,609.60	\$2,143,564	\$1,735,731.20	\$1,582,657.60	\$1,196,006.40	\$1,196,006.40
260X72 Non Class	400	\$1,520,000	\$1,448,985.60	\$1,404,404	\$1,137,203.20	\$1,036,913.60	\$783,590.40	\$783,590.40
260X72 Class	800	\$2,560,000	\$2,440,396.80	\$2,365,312	\$1,915,289.60	\$1,746,380.80	\$1,319,731.20	\$1,319,731.20
300X72 Non Class	1200	\$2,560,000	\$2,440,396.80	\$2,365,312	\$1,915,289.60	\$1,746,380.80	\$1,319,731.20	\$1,319,731.20
300X72 Class	2400	\$5,120,000	\$4,880,793.60	\$4,730,624	\$3,830,579.20	\$3,492,761.60	\$2,639,462.40	\$2,639,462.40
400X100 Non Class	3000	\$4,800,000	\$4,575,744	\$4,434,960	\$3,591,168	\$3,274,464	\$2,474,496	\$2,474,496
400X100 Class	6000	\$9,600,000	\$9,151,488	\$8,869,920	\$7,182,336	\$6,548,928	\$4,948,992	\$4,948,992
Industrial								
120X30	200	\$250,000	\$238,320	\$230,987.50	\$187,040	\$170,545	\$128,880	\$128,880
140X40	400	\$450,000	\$428,976	\$415,777.50	\$336,672	\$306,981	\$231,984	\$231,984
180X54	600	\$900,000	\$857,952	\$831,555	\$673,344	\$613,962	\$463,968	\$463,968
250X72 Non Class	400	\$1,800,000	\$1,715,904	\$1,663,110	\$1,346,688	\$1,227,924	\$927,936	\$927,936
250X72 Class	600	\$2,900,000	\$2,764,512	\$2,679,455	\$2,169,664	\$1,978,322	\$1,495,008	\$1,495,008
260X72 Non Class	400	\$1,900,000	\$1,811,232	\$1,755,505	\$1,421,504	\$1,296,142	\$979,488	\$979,488
260X72 Class	800	\$3,000,000	\$2,859,840	\$2,771,850	\$2,244,480	\$2,046,540	\$1,546,560	\$1,546,560
300X72 Non Class	1200	\$3,200,000	\$3,050,496	\$2,956,640	\$2,394,112	\$2,182,976	\$1,649,664	\$1,649,664
300X72 Class	2400	\$6,400,000	\$6,100,992	\$5,913,280	\$4,788,224	\$4,365,952	\$3,299,328	\$3,299,328
400X100 Non Class	3000	\$6,000,000	\$5,719,680	\$5,543,700	\$4,488,960	\$4,093,080	\$3,093,120	\$3,093,120
400X100 Class	6000	\$12,000,000	\$11,439,360	\$11,087,400	\$8,977,920	\$8,186,160	\$6,186,240	\$6,186,240
Pontoon								
30X11X2	50	\$7,000	\$6,672.96	\$6,467.65	\$5,237.12	\$4,775.26	\$3,608.64	\$3,608.64
60X15X3	100	\$15,000	\$14,299.20	\$13,859.25	\$11,222.40	\$10,232.70	\$7,732.80	\$7,732.80
40X12X3	100	\$12,000	\$11,439.36	\$11,087.40	\$8,977.92	\$8,186.16	\$6,186.24	\$6,186.24
Dry Dock								
100'	N/A	\$1,800,000	\$1,715,904	\$1,663,110	\$1,346,688	\$1,227,924	\$927,936	\$927,936
200'	N/A	\$2,500,000	\$2,383,200	\$2,309,875	\$1,870,400	\$1,705,450	\$1,288,800	\$1,288,800
300'	N/A	\$4,000,000	\$3,813,120	\$3,695,800	\$2,992,640	\$2,728,720	\$2,062,080	\$2,062,080
500'	N/A	\$6,500,000	\$6,196,320	\$6,005,675	\$4,863,040	\$4,434,170	\$3,350,880	\$3,350,880

Table 703.B.2 Floating Equipment—Barges (Non-Motorized)								
Barge Type/Size	Day Rate	Base Cost	2021 - 2017	2016 - 2012	2011 - 2007	2006 - 2002	2001 - 1997	1996 & Earlier
Cost Index			0.95328	0.92395	0.74816	0.68218	0.51552	0.51552
Quarter								
10 Person	100	\$40,000	\$38,131.20	\$36,958	\$29,926.40	\$27,287.20	\$20,620.80	\$20,620.80
25 Person	250	\$50,000	\$47,664	\$46,197.50	\$37,408	\$34,109	\$25,776	\$25,776
50 Person	300	\$100,000	\$95,328	\$92,395	\$74,816	\$68,218	\$51,552	\$51,552
300 Person	1000	\$2,000,000	\$1,906,560	\$1,847,900	\$1,496,320	\$1,364,360	\$1,031,040	\$1,031,040
500 Person	2000	\$4,000,000	\$3,813,120	\$3,695,800	\$2,992,640	\$2,728,720	\$2,062,080	\$2,062,080
Utility								
30X11X2	50	\$7,000	\$6,672.96	\$6,467.65	\$5,237.12	\$4,775.26	\$3,608.64	\$3,608.64
40X12X3	100	\$12,000	\$11,439.36	\$11,087.40	\$8,977.92	\$8,186.16	\$6,186.24	\$6,186.24

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1837 and R.S. 47:2323.

HISTORICAL NOTE: Promulgated by the Department of Revenue and Taxation, Tax Commission, LR 8:102 (February 1982), amended LR 10:924 (November 1984), LR 12:36 (January 1986), LR 13:188 (March 1987), LR 13:764 (December 1987), LR 14:872 (December 1988), LR 15:1097 (December 1989), LR 16:1063 (December 1990), LR 17:1213 (December 1991), LR 19:212 (February 1993), LR 20:198 (February 1994), LR 21:186 (February 1995), LR 22:117 (February 1996), LR 23:204 (February 1997), amended by the Department of Revenue, Tax Commission, LR 24:479 (March 1998), LR 25:312 (February 1999), LR 26:506

(March 2000), LR 27:425 (March 2001), LR 28:518 (March 2002), LR 29:368 (March 2003), LR 30:487 (March 2004), LR 31:715 (March 2005), LR 32:430 (March 2006), LR 33:490 (March 2007), LR 34:678 (April 2008), LR 35:492 (March 2009), LR 36:772 (April 2010), amended by the Division of Administration, Tax Commission, LR 37:1394 (May 2011), LR 38:802 (March 2012), LR 39:490 (March 2013), LR 40:530 (March 2014), LR 41:673 (April 2015), LR 42:746 (May 2016), LR 43:652 (April 2017), LR 44:579 (March 2018), LR 45:533 (April 2019), LR 46:560 (April 2020), LR 47:460 (April 2021), LR 48:1522 (June 2022), LR 49:

§705. Tables—Vessels

Table 705.A Vessels								
Vessel Type/Size	Base Cost	Day Rate	Multiplier	2021 - 2017	2016 - 2012	2011 - 2007	2006 - 2002	2001 and Earlier
Cost Index				0.86	0.72	0.58	0.44	0.3
Crew								
60'-70'	\$1,450,000	1800	1.1	\$1,371,700	\$1,148,400	\$925,100	\$701,800	\$478,500
71'-99'	\$1,750,000	2000	1.13	\$1,700,650	\$1,423,800	\$1,146,950	\$870,100	\$593,250
100'-119'	\$2,000,000	2200	1.33	\$2,287,600	\$1,915,200	\$1,542,800	\$1,170,400	\$798,000
120'-140'	\$2,500,000	2400	1.23	\$2,644,500	\$2,214,000	\$1,783,500	\$1,353,000	\$922,500
141'-165'	\$3,250,000	2800	1.17	\$3,270,150	\$2,737,800	\$2,205,450	\$1,673,100	\$1,140,750
165'+	\$3,500,000	3000	1.17	\$3,521,700	\$2,948,400	\$2,375,100	\$1,801,800	\$1,228,500
Supply								
140'-159'	\$2,500,000	2500	1.43	\$3,074,500	\$2,574,000	\$2,073,500	\$1,573,000	\$1,072,500
160'-179'	\$2,800,000	3200	1.43	\$3,443,440	\$2,882,880	\$2,322,320	\$1,761,760	\$1,201,200
180'-199'	\$3,300,000	4000	1.43	\$4,058,340	\$3,397,680	\$2,737,020	\$2,076,360	\$1,415,700
200'-219'	\$4,500,000	4800	1.64	\$6,346,800	\$5,313,600	\$4,280,400	\$3,247,200	\$2,214,000
220'-230'	\$6,000,000	5000	2.5	\$12,900,000	\$10,800,000	\$8,700,000	\$6,600,000	\$4,500,000
231'+	\$6,000,000	5000	2.83	\$14,602,800	\$12,225,600	\$9,848,400	\$7,471,200	\$5,094,000
OSV								
110'-139'	\$2,000,000	3000	1.14	\$1,960,800	\$1,641,600	\$1,322,400	\$1,003,200	\$684,000
140'-159'	\$2,200,000	3500	1.14	\$2,156,880	\$1,805,760	\$1,454,640	\$1,103,520	\$752,400
160'-179'	\$2,200,000	3500	1.21	\$2,289,320	\$1,916,640	\$1,543,960	\$1,171,280	\$798,600
180'-199'	\$2,800,000	4000	1.43	\$3,443,440	\$2,882,880	\$2,322,320	\$1,761,760	\$1,201,200
200'-219'	\$3,500,000	5200	1.71	\$5,147,100	\$4,309,200	\$3,471,300	\$2,633,400	\$1,795,500
220'-230'	\$5,000,000	5700	1.93	\$8,299,000	\$6,948,000	\$5,597,000	\$4,246,000	\$2,895,000
231'-279'	\$5,000,000	5700	2.11	\$9,073,000	\$7,596,000	\$6,119,000	\$4,642,000	\$3,165,000
280'-299'	\$6,000,000	9000	2.11	\$10,887,600	\$9,115,200	\$7,342,800	\$5,570,400	\$3,798,000
300'-319'	\$8,000,000	10500	2.11	\$14,516,800	\$12,153,600	\$9,790,400	\$7,427,200	\$5,064,000
320'+	\$9,000,000	10800	2.11	\$16,331,400	\$13,672,800	\$11,014,200	\$8,355,600	\$5,697,000
Utility								

Table 705.A Vessels								
Vessel Type/Size	Base Cost	Day Rate	Multiplier	2021 - 2017	2016 - 2012	2011 - 2007	2006 - 2002	2001 and Earlier
Cost Index				0.86	0.72	0.58	0.44	0.3
100'-119'	\$2,200,000	2500	1.27	\$2,402,840	\$2,011,680	\$1,620,520	\$1,229,360	\$838,200
120'-139'	\$2,500,000	2800	1.13	\$2,429,500	\$2,034,000	\$1,638,500	\$1,243,000	\$847,500
140'-165'	\$2,800,000	3200	1.17	\$2,817,360	\$2,358,720	\$1,900,080	\$1,441,440	\$982,800
165' +	\$4,000,000	3600	1.17	\$4,024,800	\$3,369,600	\$2,714,400	\$2,059,200	\$1,404,000

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1837 and R.S. 47:2323.

HISTORICAL NOTE: Promulgated by the Department of Revenue, Tax Commission, LR 33:490 (March 2007), LR 35:493 (March 2009), amended by the Office of the Governor, Division of Administration, Tax Commission, LR 47:465 (April 2021), LR 49:

Chapter 9. Oil and Gas Properties

§901. Guidelines for Ascertaining the Fair Market

Value of Oil and Gas Properties

A. The assessment of oil and gas properties shall be made in accordance with the Louisiana Constitution of 1974, Article VII, Section 18; Louisiana Constitutional Amendment 2 concerning Article VII, Section 4(B), approved November 3, 2020; and in accordance with guidelines adopted by the Tax Commission and applied uniformly throughout the state.

B. The Well

1. The well includes all of the equipment and any other taxable property located below the wellhead, as well as the casinghead, wellhead and/or xmas tree.

2. For assessment purposes, the well shall also be construed to include surface equipment items more or less permanently attached to the well necessary for the oil and gas and related hydrocarbons to be produced and reach the point of custody transfer or first point of sale or gathering operation (i.e. leasehold equipment or "production train", see Explanations below).

3. Each well/lease/field is assessed in accordance with guidelines establishing "fair market value".

C. Explanations

Ad Valorem Tax Allowance—the estimated tax rate levied by local taxing bodies on the taxable value of property, expressed as a percentage deduction from the DCF.

Additional Equipment—equipment on a well site not typical for production of similar wells.

Annualized—the conversion of a short-term figure or calculation into an annual or yearly rate.

Average Depth—the simple average of the depth of the wells included in the LAT-12 filing.

Capital Expense (Capex)—the major investments a company incurs to either maintain, restore, or increase production or efficiency (see Workover). Capex is generally considered non-recurring in nature because it is not a direct operating expense that affects net operating income. Instead, capital expenditures are capitalized into a depreciable asset for accounting purposes. However, capex, or some portion thereof, can be included in a DCF appraisal to the extent deemed necessary for the operator to achieve a forecasted production amount. Otherwise, capex is solely a past expense that shouldn't be explicitly recognized in a forecast

of future net income. See discussion of expense forecast in §907.B.3 below.

Custody Transfer—in the oil and gas industry, refers to the passing of oil or gas from one entity to another for the other's immediate charge or control, accomplished for example by a custody transfer meter for gas and a lease automatic custody transfer (LACT) unit for oil or other liquids, installed downstream of the wellhead or central gathering location such as a tank battery.

Decline Curve Analysis—a common means of predicting future oil well or gas well production based on past production history utilizing empirical reservoir engineering equations which assume production decline is proportional to reservoir pressure decline. When used in conjunction with DCF appraisal methodology which considers the economics of this potential future production, a well's expected ultimate recovery (EUR) and remaining reserves can be reliably estimated.

Discounted Cash Flow (DCF) Analysis—discounted cash flow (DCF) is a valuation method used to analyze the economics and current or potential value of an investment based on its expected future cash flows. Although technically different from an accounting perspective, net operating income can be used as a proxy for cash flow. As a widely accepted technique of the income approach to value, DCF analysis is most useful when past and expected future cash flows will vary over time, either up or down, as opposed to the direct capitalization technique which assumes a stabilized income is available or can be estimated. A DCF appraisal involves the interaction of four basic parameters: production, price, expense, and discount rate. The first three parameters combine to create a forecasted net income stream, whereas the fourth parameter converts this future net income to a present worth equal to estimated fair market value. Cash flow projection in a DCF can proceed along any chosen time increments; yearly ("year-by-year") projections are mathematically convenient and widely used for long-lived assets related to oil and gas production.

Discount Rate—the discount rate refers to the rate of interest used in a discounted cash flow (DCF) analysis to determine the present value of predicted future cash flows. Because these cash flows are non-guaranteed, the rate should include not only the time cost of money but also all components of risk that relate to the valuation in the marketplace for oil and gas assets. The discount rate typically exceeds the weighted average cost of capital (WACC) which is the minimum rate needed to justify the cost of a new venture, because future cash flows from a project or investment must meet or exceed the capital outlay

needed to fund the project or investment in the present. See discussion of discount rate in §907.B.4 below.

Disposal Well—well used for injection of waste fluids or solids into an underground formation for more or less permanent storage.

Economic Limit—in a year-by-year DCF appraisal, describes the future point in time in which forecasted net income becomes negative due to allowed direct costs of operation (not counting capital expense, if any) exceeding forecasted revenues. Economic limit can vary between properties and is most often considered a result of each property's DCF appraisal, not a known input parameter itself.

Field—the general geographic region situated over one or more subsurface oil and gas reservoirs or “pools.” Fields can abut or even overlay each other if two or more vertically aligned reservoirs are assigned separate field names by the state's regulatory body.

Flowing Well—a well that produces oil and/or gas to the surface by its own reservoir pressure instead of utilizing mechanical inducement such as a downhole pump, pumping unit, compressor or gas lift.

Gathering Line/System—small to medium diameter pipelines that transport oil or gas from a central point of receipt to a transmission line or mainline. A gathering system can include compression and treatment facilities.

Inactive Wells—wells that are non-producing or “shut-in.” Shut-in status becomes effective on the date the application for shut-in status is filed, consistent with the Louisiana Office of Conservation requirements.

Injection Wells—wells completed as single or wells reclassified by the Louisiana Office of Conservation after a conversion of another well. Injection wells are used for gas and water injection oil and gas formation for production purposes, as well as, disposal wells.

Lease—a legal instrument or agreement between the operator (lessee) and a landowner (lessor) which gives the operator the right to explore for and produce mineral resources such as oil and gas. Also, the term often used interchangeable with property.

Lease/Flow Lines—typically smaller diameter pipelines that directly connect one or more wells to a central accumulation point, manifold, or process equipment including all check, safety, and allocation meters up to the point of custody transfer such as a LACT unit or sales meter.

Lease Operating Expense (LOE)—the costs incurred after drilling and completion activities have ended and production activities have begun. In a DCF appraisal, LOE represents all costs deemed necessary and reasonably prudent for a property to produce oil and/or gas in the amounts desired. Allowed LOE includes direct recurring costs for items such as labor, contract services, equipment, materials and supplies, treatment and processing of gases and fluids to the point of custody transfer, and overhead. LOE can also include capital expenditures when appropriate. See discussion of expense forecast in §907.B.3 below.

LUW Code—an identification code assigned to a well by the Louisiana Office of Conservation located on a particular lease, unit, or a gas lease well.

Multiple Completions—wells consisting of more than one producing zone. Deepest or primary completion may or

may not be the base well number depending upon the Louisiana Office of Conservation permits and classification.

Number of Wells—the total well count included in the DCF appraisal.

Price Adjustment Factor—the factor derived to adjust the prior year average price to a more current market price, as of the assessment date.

Primary Product—the permitted majority product (oil or gas) produced from a well.

Production—the yield or amount of hydrocarbons of an oil or gas well as reported to the Louisiana Office of Conservation. In a DCF appraisal, production is the manufactured product that is projected to be sold and create a future revenue stream. See *Decline Curve Analysis*.

Production Depth—is the depth from the surface to the active lower perforation in each producing zone in which the well is completed. As an example: a well completed in three separate zones is a triple completion and will have three different production depths as determined by the depth of the active lower perforation for each completion.

Production Rate Decline—the rate at which the production level of oil and gas assets change (typically reduce) over time. See *Decline Curve Analysis*.

Production Train—the production train includes all the leasehold equipment on site, including the oil and gas wells themselves, required for the production of oil, gas, and related water assets, subject to ad valorem taxation. Simply identified, it is all the tangible equipment from the lowest active completion through the first sales meter before gathering or pipeline entry. The production train includes, but is not limited to, water supply wells, disposal wells, platforms, pad sites, tanks, process facilities such as separators, heater treaters, amine units, etc., injection wells for oil and gas production purposes, and all improvements directly related to production activities. The production train can include inactive equipment but not ancillary equipment not directly related to production of the oil and gas wells being appraised.

Pumping Well—a well which is not a flowing well and from which oil is produced by use of any type of artificial lifting method such as a pump. Pumps are required when the formation pressure is not sufficient to allow fluids to flow to the surface.

Recompletion—any downhole operation to an existing oil or gas well that is conducted to establish production of oil or gas from any geological interval not currently completed or producing in said existing oil or gas well.

Royalty Interest—royalty interest in the oil and gas industry refers to ownership of a portion of a resource or the revenue it produces. A company or person that owns a royalty interest does not bear any operational costs needed to produce the resource, yet they still own a portion of the resource or revenue it produces.

Sales Meter—sales meter is a meter at which custody transfer takes place.

Salvage Leasehold Equipment Value—the estimated net cash value of the equipment included in the production train either when production ceases or becomes uneconomic to produce commercially.

Severance Tax Allowance—the estimated tax rate levied by the state on removal (severance) of oil and gas from the ground, expressed as a percentage deduction from the DCF.

Single Completions—

- a. well originally completed as a single;
- b. well reclassified by the Louisiana Office of Conservation after a conversion of multiple completed well to a single producing zone.

Start Rate—the daily average production level of oil or gas at the beginning of the appraisal. The start rate can be the average of a brief period of time surrounding the assessment date (January 1 of the current tax year) or the actual daily production rate as of January 1. The rate should be based on all information known and related to the actual expected production as of the assessment date. See discussion of production forecast in §907.B.1 below.

Starting Price—the actual average price received by the well/LUW/field in the immediately prior year or available 12 months. See discussion of price forecast in §907.B.2 below.

Tax Year—the year of assessment as of January 1 of any annual period.

Typical Equipment—See *Production Train*.

Water Wells—wells used for production purposes only, both fresh and salt water supply.

Well Serial Number—in Louisiana, the permanent identification number assigned to a well by Department of Natural Resources upon approval of the Application for (or to Renew) Permit to Drill for Minerals (MD-10R).

Working Interest (WI)—the estate or rights created from a lease agreement that grants oil and gas companies the right to explore for, drill, and produce natural resources such as oil and gas from a designated area of land. The owners of a lease's working interest (typically, the operator and contractually related parties) incur all expenses of a well's physical creation and operation and therefore own the well, as opposed to royalty interest owners who do not own any portion of the well. For DCF purposes described in this chapter, WI is the sum of all working interest net revenue interest decimals included in the LAT-12 reporting, well/LUW/field. It will be a number less than 1.0 in most cases.

Workovers—major repairs or modifications which restore or enhance production from a well. An example of a typical workover is cleaning out a well that has sanded up whereas the tubing is pulled and the casing and bottom of the hole is washed out with mud. Workovers can also involve more complex recompletion procedures such as re-drilling or hydraulic fracturing (fracking) of the oil or gas formation. Workovers often involve an operator incurring capital expenditures (capex) which may or may not be applicable to a forecast of future net income. See discussion of expense forecast in §907.B.3 below.

D. Well Fair Market Value Classifications. LUW (Lease, Unit, or Well) code is a six-digit code assigned by the Office of Conservation for the purpose of recording production. Each individual well must be listed separately by ward, field name and Louisiana Office of Conservation field code number, location (Sec.-Twp.-Range), lease name, well serial number, lease well number, well type and production depth (active lower perforation of each zone), in accordance with guidelines established by the Tax Commission.

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1837 and R.S. 47:2323.

HISTORICAL NOTE: Promulgated by the Louisiana Tax Commission, LR 2:359 (November 1976), amended by the

Department of Revenue and Taxation, Tax Commission, LR 8:102 (February 1982), LR 9:69 (February 1983), LR 17:1213 (December 1991), LR 19:212 (February 1993), LR 31:717 (March 2005), LR 33:492 (March 2007), LR 35:495 (March 2009), LR 36:773 (April 2010), amended by the Office of the Governor, Division of Administration, Tax Commission, LR 43:652 (April 2017), LR 49:

§903. Instructions for Reporting Oil and Gas Properties

A. A separate LAT-12 form is used for each well lease or facility represented by a LUW (Lease, Unit, or Well) code, a six-digit code assigned by the Office of Conservation for the purpose of recording production. An attachment in lieu of the form is permitted only if information is in the same sequence. The LAT-12 form may be reproduced and used as an attachment; however, all attachments must be properly identified and attached to the original.

1. Wells under the same assessment number are required to be listed in serial number order.

2. All additional supporting documentation is recommended to be attached to the LAT-12 in an order that allows for ease of review by the assessor.

B. The following data is useful in performing the DCF appraisal of the well(s) and leasehold equipment (production train) and is recommended to be provided with the LAT-12. The detail level will be based on the reporting level of the LAT-12 (well, lease, LUW, field, facility).

1. Primary product (oil or gas), total working interest (WI) decimal, total number of wells included, average depth, prior year average price for oil and gas received, operating expense for prior year, capital expense used to enhance production, decline rate, production rate, and any data to support limits or inhibitors to the asset.

2. Decline curves for field averages over time ("type curves") are a useful tool in forecasting future production levels for individual wells/leases/LUW codes.

3. Any additional information that provides the anticipated performance of the assets included in the production train or the associated production should be considered.

C. Operators shall furnish a statement of lease operating expenses for the previous calendar year. This statement should correspond as closely as possible with the LAT 12 form(s) for each lease or facility (as stated above) and be in sufficient enough detail to indicate the extent and monthly timing of incurrence of various major categories of expense such as labor, power and fuel, salt water disposal, chemicals, materials and supplies, repair and maintenance, workovers, and district overhead.

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1837 and R.S. 47:2326.

HISTORICAL NOTE: Promulgated by the Department of Revenue and Taxation, Tax Commission, LR 8:102 (February 1982), amended LR 16:1063 (December 1990), LR 19:212 (February 1993), LR 22:117 (February 1996), amended by the Office of the Governor, Division of Administration, Tax Commission, LR 48:1523 (June 2022), LR 49:

§905. Reporting Procedures

A. Oil, Gas, Associated Wells, and Related Production Equipment (Production Train), see guidelines adopted by the Louisiana Tax Commission and report in accordance with form requirements or as otherwise outlined in this chapter.

1. A data template corresponding to a DCF model as adopted by the Louisiana Tax Commission shall be completed by the operator with the following information:

- a. level of detail being provided (well/lease/LUW, etc.) and appropriate identifying name(s), number(s), LUW codes, etc;
- b. primary product being produced (oil or gas);
- c. total decimal ownership of the working interest (WI) in the assets to be assessed (typically +/- 0.75000);
- d. total number of wells to be represented in the DCF;
- e. average total depth of the wells represented in the DCF;
- f. previous year average price (dollars per barrel for oil or dollars per mcf for gas);
- g. severance tax rate(s) being assessed against the well(s) by the Louisiana Department of Revenue;
- h. recurring direct operating expense commensurate to the level of detail (well/lease/LUW) represented in the DCF;
- i. amount of capital expenditures (capex) anticipated to be incurred as of the assessment date (January 1) and cause and timing thereof;
- j. salvage value of specialized leasehold equipment, if any, not considered part of a typical production train.

B. Surface Equipment

1. See guidelines adopted by the Louisiana Tax Commission regarding the use of Table 907.E-7 regarding depreciable life and Table 907.D-4 regarding depreciation rate. The detail of typical equipment included in the production train need not be listed on or with the LAT-12. For additional or ancillary equipment not considered as part of the production train, various sizes, items, etc. may not be commingled into one category or value. Property must be grouped, totaled and included in summary according to the following property classes:

2. Property Class #1—Oil and Gas Equipment - major items of oil and gas equipment not included and assessed as part of the well are shown as a schedule item. For other equipment (not included as a schedule item), year of construction or purchase, original cost and composite multiplier must be shown and used to determine fair market value. Refer to composite multipliers in the general business section (Chapter 25) of these guidelines.

3. Property Class #2—Tanks—see schedule for type, size, unit cost, etc.

4. Property Class #3—Inventories

a. may be reported as a total accumulated cost in the fair market value column - with property description and on appropriate LAT form;

b. Material AND Supplies:

- i. located on lease or facility—use LAT-12 form;
- ii. located at a public or private storage—use

LAT-5 form (Sec. 1).

c. Pipe Stock—report footage or tonnage in unit column (indicating measurement) cost per unit measurement in unit value column and extend total fair market value.

- i. located on lease or facility - use LAT-12 form.
- ii. located at a public or private storage - use LAT-

5 form (Sec. 1).

d. Pipe Stock—exempt under La. Const., Art. VII, §21(D-3)—use LAT-5 form (Sec. 1).

5. Property Class #4—Field Improvements— docks, lease buildings, equipment sheds and buildings, warehouses, land and leasehold improvements, etc.—furnish year

constructed and cost. Use composite multiplier from appropriate table on original cost, and extend fair market value for each.

6. Property Class #5—Other Property—on lease or producing facilities, but not included in the above classes viz:

a. Barges—used as work, utility, submerged platforms, etc.—report type, size, year of purchase, cost and use composite multiplier from the appropriate table;

b. Furniture and Fixtures—may be reported as a total cost with the composite multiplier from the appropriate table on original cost. Report such property on LAT-12 form (Oil and Gas Property).

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1837 and R.S. 47:2323.

HISTORICAL NOTE: Promulgated by the Department of Revenue and Taxation, Tax Commission, LR 8:102 (February 1982), amended LR 19:212 (February 1993), amended by the Department of Revenue, Tax Commission, LR 24:480 (March 1998), LR 49:

§907. Valuation of Oil, Gas, and Other Wells

A. The valuation procedure below, which provides that the presence of oil or gas or the production thereof may be included in the methodology to determine the fair market value of an oil or gas well for ad valorem taxes, covers only that portion of the well, including the well's associated leasehold equipment or "production train" subject to ad valorem taxation. Further, the valuation procedure below provides that no further or additional tax or license shall be levied or imposed on oil, gas or sulphur leases or rights and no additional value shall be added to the assessment of land due to the presence of oil, gas or sulphur or their production therefrom.

B. The presence of oil or gas, or the production thereof, is to be included in the year-by-year discounted cash flow (DCF) model described below and as adopted by the Louisiana Tax Commission to determine the fair market value of an oil or gas well and its associated leasehold equipment for ad valorem tax purposes in Louisiana.

1. Production Forecast—oil and gas or other hydrocarbon production history for the well, lease or facility represented by the LUW (Lease, Unit, or Well) code is to be analyzed by the assessor for relevant trends and patterns established as of January 1 of the current tax year, using Decline Curve Analysis or other accepted empirical method. A commensurate forecast of future production, or production potential, attributable to only the working interest owner(s), is to be made by the assessor as of January 1 of the current tax year. This production forecast will consist of a Start Rate as of January 1 (daily average barrels or mcf) and up to three exponential percentage decline rates for designated periods of time in the DCF.

2. Price Forecast—the forecasted oil and gas or other hydrocarbon production amounts for the well, lease or facility represented by the LUW code, attributable to the working interest owner(s), are to be factored by an oil or gas or other hydrocarbon price forecast as of January 1 of the current tax year as annually determined by the Tax Commission to result in a forecasted gross revenue stream attributable to the working interest owner(s). This price forecast is based on the following guidelines:

a. the forecasted oil and gas or other hydrocarbon price forecast shall begin with the immediately previous

calendar year's monthly average price (starting price) received by the working interest owner(s) for the oil and gas or other hydrocarbons produced and sold from the lease or facility represented by the LEW code on the open market to an unaffiliated third party or otherwise at a market-oriented rate. The source of this starting price shall correspond to severance tax data as reported by the operator to the Louisiana Department of Revenue;

i. this previous year average price may vary by property;

ii. if oil and gas or other hydrocarbons were either not produced or not sold for one or more months of the previous calendar year, the average price for which similar oil and gas from comparable interests was selling during that month is to be used;

b. the previous year average price is to be increased or decreased, whichever is appropriate, for year 1 of the discounted cashflow analysis with a Price Adjustment Factor which will be commensurate with the percentage increase or decrease, respectively, as indicated by the forecasted price in the Energy Information Administration (EIA) January STEO (Short-Term Energy Outlook) report for the current tax year, relative to the actual price shown for the immediately previous calendar year in the same publication. These two prices can be referenced in the report's Table 2. Energy Prices:

i. for oil, reference "West Texas Intermediate Spot Average" (dollars per barrel);

ii. for natural gas, reference "Henry Hub Spot" (dollars per million Btu);

iii. this price adjustment factor is to be used in the appraisal of each property, to the extent the property's forecasted cash flow extends to year 1;

c. the year 1 price used in the DCF appraisal is to be either increased or decreased, whichever is appropriate, in four more or less equal percentage increments to a year 5 price considered to be representative to a long-term average price available for the sale of oil and gas from the property as calculated with reference to the last 20 years of historical oil and gas price data from the Energy Information Administration (EIA);

i. the long-term average price is to be calculated after removal of outlier prices, if any, within the 20-year range, defined as any historical price outside of one standard deviation from the simple average.

ii. these percentages are to be used in the appraisal of each property, to the extent the property's forecasted cash flow extends to either years 2, 3, 4, or 5.

d. the year 5 price used in the DCF appraisal is to be held flat for all years thereafter in the DCF, to the extent the property's forecasted cash flow extends past year 5;

e. the five oil and gas price forecast percentages discussed above, along with the zero percent escalation for any years in the DCF past year 5, together constitute the "price forecast scenario" as established by the Tax Commission and are to be used in the DCF appraisal of each property. This oil and gas price forecast scenario is shown in Table 907.D-1.

3. Expense Forecast—in the DCF appraisal of the property, the forecasted gross revenues attributable to the working interest owner(s) are to be reduced for the allowance of reasonable and defensible direct costs of

operation, as well as, all applicable state and local tax burden, to result in a forecasted net income stream attributable to the working interest owner(s) of the specific property being appraised. This cost allowance should represent the amount and timing of recurring expense, including overhead, along with any applicable non-recurring (capital) expense(s), typical to the area and similar operations and not necessarily the exact expenses incurred in any previous year, deemed reasonable and necessary for the property to achieve the forecasted oil and gas production amounts:

a. an assessor should make effort to obtain and consider actual historical expenses being incurred by the operator as documented on expense statements required to be provided to the assessor pursuant to §903.C. Absent this information, an assessor may assume a minimal amount and/or otherwise rely on their own judgement using best information available;

b. the increase or decrease of direct operating expense allowance in the cash flow appraisal will correspond to the increase or decrease in forecasted price, as established by the Tax Commission;

c. the percentage increase or decrease for each forecasted year of the cash flow appraisal will be calculated at 1/3 of the percentage increase or decrease in price for that year relative to the previous year price, referencing the price of the property's primary hydrocarbon being produced;

d. the provision for increase or decrease of the direct operating expense allowance does not pertain to separate allowance, if any, of capital expense(s) in the property's cash flow appraisal.

4. Discount Rate—the forecasted net income amounts in the property's DCF appraisal are to be discounted (reduced) to present day worth by application of a discount factor for each year of the forecasted cash flow commensurate with an appropriate discount rate:

a. the discount rate may vary by property;

b. base discount rates to account for the time cost of money and general industry risk are to be established by the Tax Commission. These discount rates separately extend to oil wells vs. gas wells and are shown in Table 907.D-2. This is a minimum rate whereas the assessor may use a higher rate to account for additional property-specific risks and/or other considerations as appropriate for the determination of each property's market value;

c. these discount rates applies only to the forecasted net income of the DCF appraisal. A separate discount rate is established by the Louisiana Tax Commission to be applicable to valuation of the oil and gas wells' associated leasehold equipment (production train) and is shown in Table 907.D-2.

C. In the event the DCF appraisal results in a zero economic life and/or zero or negative discounted net income, a minimum amount of value will be established for the leasehold equipment (production train) associated with the oil and gas well(s) represented by the DCF, applying the appropriate schedule value in Table 907.D-3 to the average production depth of the wells represented by the DCF.

1. In the event the DCF appraisal results in a positive value but less than the minimum equipment value as derived using Table 907.D-3, the assessed value will be based on the minimum equipment value as established by Table 907.D-3.

D. For the 2023 tax year, the assessed value of the oil and gas wells on an individual property basis is to be limited to a range of 50 percent to 150 percent of the assessed value of the same oil and gas wells in the previous tax year. This limitation is inclusive of only the wells and leasehold equipment (production train) assessed in both years.

1. Oil and Gas Price Forecast Scenario

Table 907.D-1 Oil and Gas Price Forecast Scenario		
Year of Discounted Cash Flow	Oil Price (%)	Gas Price (%)
1	-7.30%	-18.45%
2	-7.78%	-8.65%
3	-8.43%	-9.47%
4	-9.21%	-10.46%
5	-10.14%	-11.68%
Thereafter	0	0

2. Oil and Gas Well Discount Rates

Table 907.D-2 Oil and Gas Well Discount Rates	
Primary Product	Discount Rate (%)
Oil Well	15%
Gas Well	15%
Leasehold Equipment	6%

3. Minimum Leasehold Equipment Value

Table 907.D-3 Minimum Leasehold Equipment Value		
Onshore/Offshore	Average Production Depth (feet)	Value Per Foot (\$)
Onshore	1 – 1,499	0.50
Onshore	1,500 – 2,499	0.75
Onshore	2,500 – 9,999	1.00
Onshore	10,000 or greater	1.50
Offshore *	All Depths	2.00

* Includes production platforms/barges.

4. Serial Number to Percent Good Conversion Chart

Table 907.D-4 Serial Number to Percent Good Conversion Chart			
Year	Beginning Serial Number	Ending Serial Number	20 Year Life Percent Good
2022	253176	Higher	97
2021	252613	253175	93
2020	252171	252612	90
2019	251497	252170	86
2018	250707	251496	82
2017	249951	250706	78
2016	249476	249950	74
2015	248832	249475	70
2014	247423	248831	65
2013	245849	247422	60
2012	244268	245848	55
2011	242592	244267	50
2010	240636	242591	45
2009	239277	240635	40
2008	236927	239276	35

Table 907.D-4 Serial Number to Percent Good Conversion Chart			
Year	Beginning Serial Number	Ending Serial Number	20 Year Life Percent Good
2007	234780	236926	31
2006	232639	234779	27
2005	230643	232638	24
2004	229010	230642	22
2003	227742	229009	21
2002	Lower	227741	20 *
VAR.	900000	Higher	50

* Reflects residual or floor rate.

NOTE: For any serial number categories not listed above, use year well completed to determine appropriate percent good. If spud date is later than year indicated by serial number; or, if serial number is unknown, use spud date to determine appropriate percent good.

E. Surface Equipment

1. Listed below is the cost-new of major items used in the production, storage, transmission and sale of oil and gas. Any equipment not shown shall be assessed on an individual basis.

2. All surface equipment, including other property associated or used in connection with the oil and gas industry in the field of operation, must be rendered in accordance with guidelines established by the Tax Commission and in accordance with requirements set forth on LAT Form 12- Personal Property Tax Report - Oil and Gas Property.

3. Surface equipment will be assessed in 5 major categories, as follows:

- a. oil and gas equipment (surface equipment not considered leasehold equipment);
- b. tanks (surface equipment not considered leasehold equipment);
- c. inventories (material and supplies);
- d. field improvements (docks, buildings, etc.);
- e. other property (not included above).

4. The cost-new values listed below are to be adjusted to allow depreciation by use of the appropriate percent good listed in Table 907.D-4. When determining the value of equipment associated with a single well, use the age of that well to determine the appropriate percent good. When determining the value of equipment used on multiple wells, the average age of the wells within the lease/field will determine the appropriate year to be used for this purpose.

a. January 1, 2016 the allowance of depreciation by use of the appropriate percent good will be based on the actual age of the equipment, if known or available, and will apply only to surface equipment with an original purchase cost of \$2,500 or more.

5. Functional and/or economic obsolescence shall be considered in the analysis of fair market value as substantiated by the taxpayer in writing. Consistent with Louisiana R.S. 47:1957, the assessor may request additional documentation.

6. Sales, properly documented, should be considered by the assessor as fair market value, provided the sale meets all tests relative to it being a valid sale.

7. Surface Equipment—Property Description

Table 907.E-7 Surface Equipment	
Property Description	\$ Cost New
Actuators—(see Metering Equipment)	
Automatic Control Equipment—(see Safety Systems)	
Automatic Tank Switch Unit—(see Metering Equipment)	
Barges - Concrete—(assessed on an individual basis)	
Barges - Storage—(assessed on an individual basis)	
Barges - Utility—(assessed on an individual basis)	
Barges - Work—(assessed on an individual basis)	
Communication Equipment—(see Telecommunications)	
Dampeners—(see Metering Equipment—"Recorders")	
Desorbents—(no metering equipment included):	
125#	114,320
300#	126,050
500#	143,440
Destroilets—(see Metering Equipment—"Regulators")	
Desurgers—(see Metering Equipment—"Regulators")	
Desilters—(see Metering Equipment—"Regulators")	
Diatrollers—(see Metering Equipment—"Regulators")	
Docks, Platforms, Buildings—(assessed on an individual basis)	
Dry Dehydrators (Driers)—(see Scrubbers)	
Engines-Unattached—(only includes engine and skids): Per Horsepower	360
Evaporators—(assessed on an individual basis)	
Expander Unit—(no metering equipment included): Per Unit	41,940
Flow Splitters—(no metering equipment included):	
48 In. Diameter Vessel	20,420
72 In. Diameter Vessel	27,050
96 In. Diameter Vessel	41,450
120 In. Diameter Vessel	58,890
Fire Control System—(assessed on an individual basis)	
Furniture and Fixtures—(assessed on an individual basis) (Field operations only, according to location.)	
Gas Compressors-Package Unit—(Skids, scrubbers, cooling system, and power controls. No metering or regulating equipment.):	
1 - 49 HP	750
50 - 99 HP	1,510
100 - 999 HP	1,230
1,000 - 1,499 HP	940
1,500 HP and Up	830
Gas Coolers—(no metering equipment):	
5,000 MCF/D	32,210
10,000 MCF/D	36,280
20,000 MCF/D	112,860
50,000 MCF/D	256,060
100,000 MCF/D	419,370
Generators—Package Unit only -(no special installation) Per K.W.	240
Glycol Dehydration-Package Unit—(Including pressure gauge, relief valve and regulator. No other metering equipment.):	
Up to 4.0 MMCF/D	22,610
4.1 to 5.0 MMCF/D	25,220
5.1 to 10.0 MMCF/D	48,620
10.1 to 15.0 MMCF/D	67,650
15.1 to 20.0 MMCF/D	92,080
20.1 to 25.0 MMCF/D	119,730
25.1 to 30.0 MMCF/D	227,430
30.1 to 50.0 MMCF/D	254,050
50.1 to 75.0 MMCF/D	316,050
75.1 and Up MMCF/D	364,670

Table 907.E-7 Surface Equipment	
Property Description	\$ Cost New
Heaters—(Includes unit, safety valves, regulators and automatic shut-down. No metering equipment.):	
Steam Bath—Direct Heater:	
24 In. Diameter Vessel - 250,000 BTU/HR Rate	7,840
30 In. Diameter Vessel - 500,000 BTU/HR Rate	9,850
36 In. Diameter Vessel - 750,000 BTU/HR Rate	11,910
48 In. Diameter Vessel - 1,000,000 BTU/HR Rate	17,630
60 In. Diameter Vessel - 1,500,000 BTU/HR Rate	21,760
Water Bath—Indirect Heater:	
24 In. Diameter Vessel - 250,000 BTU/HR Rate	6,690
30 In. Diameter Vessel - 500,000 BTU/HR Rate	9,180
36 In. Diameter Vessel - 750,000 BTU/HR Rate	11,970
48 In. Diameter Vessel - 1,000,000 BTU/HR Rate	16,960
60 In. Diameter Vessel - 1,500,000 BTU/HR Rate	21,700
Steam—(Steam Generators):	
24 In. Diameter Vessel - 250,000 BTU/HR Rate	8,570
30 In. Diameter Vessel - 450,000 BTU/HR Rate	10,700
36 In. Diameter Vessel - 500 to 750,000 BTU/HR Rate	16,050
48 In. Diameter Vessel - 1 to 2,000,000 BTU/HR Rate	18,420
60 In. Diameter Vessel - 2 to 3,000,000 BTU/HR Rate	20,850
72 In. Diameter Vessel - 3 to 6,000,000 BTU/HR Rate	32,940
96 In. Diameter Vessel - 6 to 8,000,000 BTU/HR Rate	39,570
Heat Exchange Units-Skid Mounted—(see Production Units)	
Heater Treaters—(Necessary controls, gauges, valves and piping. No metering equipment included.):	
Heater - Treaters - (non-metering):	
4 x 20 ft.	17,140
4 x 27 ft.	22,060
6 x 20 ft.	23,100
6 x 27 ft.	29,050
8 x 20 ft.	37,010
8 x 27 ft.	43,330
10 x 20 ft.	48,930
10 x 27 ft.	57,560
L.A.C.T. (Lease Automatic Custody Transfer)—see Metering Equipment)	
JT Skid (Low Temperature Extraction)—(includes safety valves, temperature controllers, chokes, regulators, metering equipment, etc.—complete unit.):	
Up to 2 MMCF/D	42,540
Up to 5 MMCF/D	60,780
Up to 10 MMCF/D	145,870
Up to 20 MMCF/D	243,110
Liqua Meter Units—(see Metering Equipment)	
Manifolds—(see Metering Equipment)	
Material and Supplies-Inventories—(assessed on an individual basis)	
Meter Calibrating Vessels—(see Metering Equipment)	
Meter Prover Tanks—(see Metering Equipment)	
Meter Runs—(see Metering Equipment)	
Meter Control Stations—(not considered Communication Equipment) - (assessed on an individual basis)	
Metering Equipment	
Actuators—hydraulic, pneumatic and electric valves	6,620
Controllers—time cycle valve - valve controlling device (also known as Intermitter)	2,070
Fluid Meters:	
1 Level Control	
24 In. Diameter Vessel - 1/2 bbl. Dump	5,040
30 In. Diameter Vessel - 1 bbl. Dump	6,500
36 In. Diameter Vessel - 2 bbl. Dump	9,000
2 Level Control	
20 In. Diameter Vessel - 1/2 bbl. Dump	4,740
24 In. Diameter Vessel - 1/2 bbl. Dump	5,710
30 In. Diameter Vessel - 1 bbl. Dump	7,170
36 In. Diameter Vessel - 2 bbl. Dump	9,660

Table 907.E-7 Surface Equipment	
Property Description	\$ Cost New
L.A.C.T. and A.T.S. Units:	
30 lb. Discharge	31,850
60 lb. Discharge	36,280
Manifolds—Manual Operated:	
High Pressure	
per well	24,980
per valve	8,450
Low Pressure	
per well	12,090
per valve	4,010
Manifolds—Automatic Operated:	
High Pressure	
per well	45,160
per valve	14,890
Low Pressure	
per well	32,210
per valve	10,880
NOTE: Automatic Operated System includes gas hydraulic and pneumatic valve actuators, (or motorized valves), block valves, flow monitors-in addition to normal equipment found on manual operated system. No Metering Equipment Included.	
Meter Runs—piping, valves and supports—no meters:	
2 In. piping and valve	6,810
3 In. piping and valve	7,660
4 In. piping and valve	9,240
6 In. piping and valve	12,880
8 In. piping and valve	19,350
10 In. piping and valve	25,770
12 In. piping and valve	32,210
14 In. piping and valve	43,880
16 In. piping and valve	57,310
18 In. piping and valve	70,990
20 In. piping and valve	92,260
22 In. piping and valve	116,270
24 In. piping and valve	142,340
Metering Vessels (Accumulators):	
1 bbl. calibration plate (20 x 9)	3,950
5 bbl. calibration plate (24 x 10)	4,250
7.5 bbl. calibration plate (30 x 10)	5,960
10 bbl. calibration plate (36 x 10)	7,410
Recorders (Meters)—Includes both static element and tube drive pulsation dampener-also one and two pen operations.	
per meter	2,740
Solar Panel (also see Telecommunications)	
per unit (10' x 10')	360
Pipe Lines—Lease Lines	
Steel	
2 In. nominal size - per mile	19,810
2 1/2 In. nominal size - per mile	26,680
3 and 3 1/2 In. nominal size - per mile	34,040
4, 4 1/2 and 5 In. nominal size - per mile	58,530
6 In. nominal size - per mile	85,940
Poly Pipe	
2 In. nominal size - per mile	10,880
2 1/2 In. nominal size - per mile	14,650
3 In. nominal size - per mile	18,720
4 In. nominal size - per mile	32,150
6 In. nominal size - per mile	47,220
Plastic-Fiberglass	
2 In. nominal size - per mile	16,900
3 In. nominal size - per mile	28,930
4 In. nominal size - per mile	49,720
6 In. nominal size - per mile	72,990
NOTE: Allow 90 percent obsolescence credit for lines that are inactive, idle, open on both ends and dormant, which are being carried on corporate records solely for the purpose of retaining right of ways on the land and/or due to excessive capital outlay to refurbish or remove the lines.	

Table 907.E-7 Surface Equipment	
Property Description	\$ Cost New
Pipe Stock—(assessed on an individual basis)	
Pipe Stock - Exempt—Under La. Const., Art. X, §4 (19-C)	
Production Units:	
Class I - per unit—separator and 1 heater—500 MCF/D	21,390
Class II - per unit—separator and 1 heater—750 MCF/D	28,500
Production Process Units—These units are by specific design and not in the same category as gas compressors, liquid and gas production units or pump-motor units. (Assessed on an individual basis.)	
Pumps—In Line	
per horsepower rating of motor	300
Pump-Motor Unit—pump and motor only	
Class I - (water flood, s/w disposal, p/l, etc.)	
Up to 300 HP - per HP of motor	360
Class II - (high pressure injection, etc.)	
301 HP and up per HP of motor	430
Pumping Units-Conventional and Beam Balance—(unit value includes motor) - assessed according to API designation.	
16 D	6,990
25 D	13,130
40 D	16,410
57 D	21,880
80 D	36,530
114 D	37,990
160 D	51,110
228 D	55,490
320 D	70,140
456 D	83,270
640 D	100,830
912 D	106,670
NOTE: For "Air Balance" and "Heavy Duty" units, multiply the above values by 1.30.	
Regenerators (Accumulator)—(see Metering Equipment)	
Regulators:	
per unit	2,800
Safety Systems	
Onshore And Marsh Area	
Basic Case:	
well only	5,590
well and production equipment	6,440
with surface op. ssv, add	9,660
Offshore 0 - 3 Miles	
Wellhead safety system (excludes wellhead actuators)	
per well	16,110
production train	40,300
glycol dehydration system	24,190
P/L pumps and LACT	56,400
Compressors	35,430
Wellhead Actuators (does not include price of the valve)	
5,000 psi	4,010
10,000 psi and over	6,020
NOTE: For installation costs - add 25 percent	
Sampler—(see Metering Equipment—"Fluid Meters")	
Scrubbers—Two Classes	
Class I - Manufactured for use with other major equipment and, at times, included with such equipment as part of a package unit.	
8 In. Diameter Vessel	3,400
10 In. Diameter Vessel	4,860
12 In. Diameter Vessel	5,530
Class II - Small "in-line" scrubber used in flow system usually direct from gas well. Much of this type is "shop-made" and not considered as major scrubbing equipment.	
8 In. Diameter Vessel	1,580
12 In. Diameter Vessel	2,070
NOTE: No metering or regulating equipment included in the above.	

Table 907.E-7 Surface Equipment	
Property Description	\$ Cost New
Separators—(no metering equipment included)	
Horizontal—Filter /1,440 psi (High Pressure)	
6-5/8" OD x 5'-6"	4,980
8-5/8" OD x 7'-6"	5,410
10-3/4" OD x 8'-0"	7,600
12-3/4" OD x 8'-0"	10,210
16" OD x 8'-6"	16,410
20" OD x 8'-6"	24,250
20" OD x 12'-0"	25,530
24" OD x 12'-6"	34,400
30" OD x 12'-6"	50,200
36" OD x 12'-6"	59,680
Separators—(no metering equipment included)	
Vertical 2—Phase /125 psi (Low Pressure)	
24" OD x 7'-6"	5,650
30" OD x 10'-0"	6,080
36" OD x 10'-0"	12,700
Vertical 3—Phase /125 psi (Low Pressure)	
24" OD x 7'-6"	5,960
24" OD x 10'-0"	6,750
30" OD x 10'-0"	9,360
36" OD x 10'-0"	13,310
42" OD x 10'-0"	15,440
Horizontal 3—Phase /125 psi (Low Pressure)	
24" OD x 10'-0"	8,810
30" OD x 10'-0"	11,300
36" OD x 10'-0"	12,340
42" OD x 10'-0"	19,690
Vertical 2—Phase /1440 psi (High Pressure)	
12-3/4" OD x 5'-0"	3,340
16" OD x 5'-6"	4,980
20" OD x 7'-6"	9,480
24" OD x 7'-6"	11,490
30" OD x 10'-0"	17,500
36" OD x 10'-0"	22,670
42" OD x 10'-0"	36,280
48" OD x 10'-0"	42,790
54" OD x 10'-0"	64,790
60" OD x 10'-0"	81,020
Vertical 3 - Phase /1440 psi (High Pressure)	
16" OD x 7'-6"	5,830
20" OD x 7'-6"	10,210
24" OD x 7'-6"	11,850
30" OD x 10'-0"	18,290
36" OD x 10'-0"	23,400
42" OD x 10'-0"	38,170
48" OD x 10'-0"	44,250
Horizontal 2—Phase /1440 psi (High Pressure)	
16" OD x 7'-6"	5,710
20" OD x 7'-6"	9,180
24" OD x 10'-0"	12,520
30" OD x 10'-0"	19,270
36" OD x 10'-0"	24,430
42" OD x 15'-0"	49,590
48" OD x 15'-0"	57,190
Horizontal 3—Phase /1440 psi (High Pressure)	
16" OD x 7'-6"	8,810
20" OD x 7'-6"	9,850
24" OD x 10'-0"	14,340
30" OD x 10'-0"	20,420
36" OD x 10'-0"	29,420
36" OD x 15'-0"	32,880
Offshore Horizontal 3—Phase /1440 psi (High Pressure)	
30" OD x 10'-0"	42,360
36" OD x 10'-0"	40,420
36" OD x 12'-0"	58,650
36" OD x 15'-0"	61,200
42" OD x 15'-0"	95,000
Skimmer Tanks—(see Flow Tanks in Tanks section)	
Stabilizers—per unit	6,260

Table 907.E-7 Surface Equipment	
Property Description	\$ Cost New
Sump/Dump Tanks—(See Metering Equipment -"Fluid Tanks")	
Tanks—no metering equipment	
Flow Tanks (receiver or gunbarrel) 50 to 548 bbl. Range (average tank size - 250 bbl.)	39.10
Stock Tanks (lease tanks) 100 to 750 bbl. Range (average tank size - 300 bbl.)	30.40
Storage Tanks (Closed Top)	
1,000 barrel	25.90
1,500 barrel	22.90
2,000 barrel	22.20
2,001 - 5,000 barrel	20.40
5,001 - 10,000 barrel	19.20
10,001 - 15,000 barrel	18.00
15,001 - 55,000 barrel	12.60
55,001 - 150,000 barrel	9.50
Internal Floating Roof	
10,000 barrel	37.00
20,000 barrel	25.00
30,000 barrel	18.60
50,000 barrel	16.50
55,000 barrel	15.90
80,000 barrel	14.10
100,000 barrel	12.30
*I.E.: (tanks size bbls.) X (no. of bbls.) X (cost-new factor.)	
Telecommunications Equipment	
Microwave System	
Telephone and data transmission	48,620
Radio telephone	3,650
Supervisory controls:	
remote terminal unit, well	10,390
master station	23,700
towers (installed):	
heavy duty, guyed, per foot	610
light duty, guyed, per foot	50
heavy duty, self supporting, per foot	620
light duty, self supporting, per foot	130
equipment building, per sq. ft.	180
solar panels, per sq. ft.	60
Utility Compressors	
per horsepower - rated on motor	800
Vapor Recovery Unit—no Metering Equipment	
60 MCF/D or less	21,270
105 MCF/D max	30,390
250 MCF/D max	40,110
Waterknockouts—Includes unit, backpressure valve and regulator, but, no metering equipment.	
2' diam. x 16'	5,770
3' diam. x 10'	8,630
4' diam. x 10'	11,910
6' diam. x 10'	19,510
6' diam. x 15'	22,550
8' diam. x 10'	28,260
8' diam. x 15'	32,460
8' diam. x 20'	35,980
8' diam. x 25'	40,050
10' diam. x 20'	47,100

8. Service Stations

Table 907.E-8 Service Stations Marketing Personal Property *Alternative Procedure	
Property Description	\$ Cost New
Air and Water Units:	
Above ground	1,360
Below ground	580

Table 907.E-8 Service Stations Marketing Personal Property *Alternative Procedure	
Property Description	\$ Cost New
Air Compressors: 1/3 to 1 H.P. 1/2 to 5 H.P.	1,820 3,080
Car Wash Equipment: In Bay (roll over brushes) In Bay (pull through) Tunnel (40 to 50 ft.) Tunnel (60 to 75 ft.)	48,930 75,950 165,320 221,230
Drive On Lifts: Single Post Dual Post	8,930 10,060
Lights: Light Poles (each) Lights - per pole unit	910 1,010
Pumps: Non-Electronic - self contained and/or remote controlled computer Single Dual Computerized - non-self service, post pay, pre/post pay. self contained and/or remote controlled dispensers Single Dual	3,870 5,750 6,540 8,810
Read-Out Equipment (at operator of self service) Per Hose Outlet	1,430
Signs: Station Signs 6 ft. lighted - installed on 12 ft. pole 10 ft. lighted - installed on 16 ft. pole Attachment Signs (for station signs) Lighted "self-serve" (4 x 11 ft.) Lighted "pricing" (5 x 9 ft.) High Rise Signs - 16 ft. lighted - installed on: 1 pole 2 poles 3 poles Attachment Signs (for high rise signs) Lighted "self-serve" (5 x 17 ft.) Lighted "pricing" (5 x 9 ft.)	4,320 7,900 3,600 3,680 13,080 17,120 19,150 6,950 3,680
Submerged Pumps—(used with remote control equipment, according to number used - per unit)	3,860
Tanks—(average for all tank sizes) Underground - per gallon	2.20

NOTE: The above represents the cost-new value of modern stations and self-service marketing equipment. Other costs associated with such equipment are included in improvements. Old style stations and equipment should be assessed on an individual basis, at the discretion of the tax assessor, when evidence is furnished to substantiate such action.

*This alternative assessment procedure should be used only when acquisition cost and age are unknown or unavailable. Otherwise, see general business section (Chapter 25) for normal assessment procedure.

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1837 and R.S. 47:2326.

HISTORICAL NOTE: Promulgated by the Department of Revenue and Taxation, Tax Commission, LR 8:102 (February 1982), amended LR 12:36 (January 1986), LR 13:188 (March 1987), LR 13:764 (December 1987), LR 14:872 (December 1988), LR 15:1097 (December 1989), LR 16:1063 (December 1990), LR 17:1213 (December 1991), LR 19:212 (February 1993), LR 20:198 (February 1994), LR 21:186 (February 1995), LR 22:117 (February 1996), LR 23:205 (February 1997), amended by the Department of Revenue, Tax Commission, LR 24:480 (March 1998), LR 25:313 (February 1999), LR 26:507 (March 2000), LR 27:425 (March 2001), LR 28:518 (March 2002), LR 29:368 (March 2003), LR 30:488 (March 2004), LR 31:717 (March 2005), LR 32:431 (March 2006), LR 33:492 (March 2007), LR 34:679 (April 2008), LR

35:495 (March 2009), LR 36:773 (April 2010), amended by the Division of Administration, Tax Commission, LR 37:1395 (May 2011), LR 38:803 (March 2012), LR 39:490 (March 2013), LR 40:531 (March 2014), LR 41:673 (April 2015), LR 42:746 (May 2016), LR 43:653 (April 2017), LR 44:580 (March 2018), repromulgated LR 44:917 (May 2018), LR 45:534 (April 2019), LR 46:561 (April 2020), LR 47:465 (April 2021), LR 48:1523 (June 2022), LR 49:

Chapter 10. Brine Operation Properties **§1001. Guidelines for Ascertaining the Fair Market Value of Brine Operation Properties**

A. The assessment of brine operation properties shall be made in accordance with the Louisiana Constitution of 1974, Article VII, Section 18, and in accordance with guidelines adopted by the Tax Commission and applied uniformly throughout the state.

B. The Well

1. The well includes all the equipment and any other taxable property located below the wellhead, as well as the casinghead, wellhead and/or xmas tree.

2. Each string of casing runs from the surface down. There will always be at least two sizes of casing; the surface pipe which seals off freshwater zones, and the production string. The larger surface pipe usually extends only a few feet, depending on the depth of usable underground water, while the small production string extends to the depth of the brine operation formations. However, in some wells, and, in particular the deeper wells, it may be necessary to set more than two strings of casing, each of which extends to a specific depth.

3. Each well is assessed in accordance with guidelines establishing "fair market value".

C. Explanations

Brine Operation Wells—wells used for brine operations.

Inactive Wells—wells that are shut-in. Shut-in status becomes effective on the date the application for shut-in status is filed, consistent with the Louisiana Office of Conservation requirements.

Injection Wells—wells completed as single, or wells reclassified by the Louisiana Office of Conservation after a conversion of another well. Wells are used for water injection or for disposal wells.

Production Depth—the depth from the surface to the active lower perforation in each producing zone in which the well is completed.

D. Well Fair Market Value Classifications. Each individual well must be listed separately by ward, field name and Louisiana Office of Conservation field code number, location (Sec.-Twp.-Range), lease name, well serial number, lease well number, well type and production depth (active lower perforation of each zone), in accordance with guidelines established by the Tax Commission.

E. Permanently Abandoned Wells. Must be reported only the first tax year after abandonment, however, no assessment shall be made on such well. A PandA permit number, issued by the Louisiana Office of Conservation, must be provided. A copy of the PandA report (Conservation Form # PandA) may be requested of the taxpayer, if necessary. A work permit or well history report is not acceptable.

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1837 and R.S. 47:2323.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Tax Commission, LR 49:

§1003. Instructions for Reporting Brine Operation Properties

A. A separate LAT-10 form is used for each lease or facility. An attachment in lieu of the form is permitted only if information is in the same sequence. The LAT-10 form may be reproduced and used as an attachment; however, all attachments must be properly identified and attached to the original.

1. Wells under the same assessment number are required to be listed in serial number order.

2. All additional supporting documentation is recommended to be listed in serial number order.

B. For operations with more than one lease or facility in any one field (by ward), the following will be permitted:

1. furnish an original LAT-10 showing parish, ward, and field with notation that attachments are made. Only this form needs date and signature;

2. furnish separate attachment(s) (as stated above) for each lease or facility;

3. total each attachment, by property classes and summarize;

4. summary of all attachments, by property classes, may be on an attachment or in the space provided on the original.

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1837 and R.S. 47:2326.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Tax Commission, LR 49:

§1005. Reporting Procedures

A. Brine Operation Wells—Property Class #1—see guidelines adopted by the Louisiana Tax Commission and report in accordance with form requirements or as outlined above.

B. Surface Equipment

1. See guidelines adopted by the Louisiana Tax Commission. Various sizes, items, etc. may not be commingled into one category or value. Property must be grouped, totaled, and included in summary according to the following property classes:

2. Property Class #2—Process Equipment—major items of equipment are shown as a schedule item. For other equipment (not included as a schedule item), year of construction or purchase, original cost and composite multiplier must be shown and used to determine fair market value. Refer to composite multipliers in the general business section (Chapter 25) of these guidelines.

3. Property Class #3—Tanks—see schedule for type, size, unit cost, etc.

4. Property Class #4—Lease Lines

a. Steel: Up through 6" in diameter—see schedule. For larger sizes—see schedule in pipelines section (Chapter 13) and use LAT—14 form.

b. Plastic: Up through 6" in diameter—see schedule.

5. Property Class #5—Inventories

a. may be reported as a total accumulated cost in the fair market value column—with property description and on appropriate LAT form.

b. Material and Supplies:
i. located on lease or facility—use LAT—10 form;
ii. located at a public or private storage—use LAT—5 form (Sec. 1).

c. Pipe Stock—report footage or tonnage in unit column (indicating measurement) cost per unit measurement in unit value column and extend total fair market value.

i. located on lease or facility—use LAT—10 form;

ii. located at a public or private storage—use LAT—5 form (Sec. 1).

d. Pipe Stock—exempt under La. Const., Art. VII, §21(D—3)—use LAT—5 form (Sec. 1).

6. Property Class #6—Field Improvements—docks, lease buildings, equipment sheds and buildings, warehouses, land, and leasehold improvements, etc.—furnish year constructed and cost. Use composite multiplier from appropriate table on original cost and extend fair market value for each.

7. Property Class #7—Other Property—on lease or producing facilities, but not included in the above classes viz:

a. furniture and fixtures—may be reported as a total cost with the composite multiplier from the appropriate table on original cost. Report such property on LAT-10 form (Brine Operation Property).

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1837 and R.S. 47:2323.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Tax Commission, LR 49:

§1007. Valuation of Brine Operation Wells

A. The Cost-New schedules below cover only that portion of the well subject to ad valorem taxation. Functional and/or economic obsolescence shall be considered in the analysis of fair market value as substantiated by the taxpayer in writing. Consistent with Louisiana R.S. 47:1957, the assessor may request additional documentation.

B. Instructions for Use of Table 1007.B and Procedure for Arriving at Assessed Value

1. Multiply the appropriate percent good factor based on age of the well as found in Table 1007.C.

2. Use cost-new to assess all active wells.

3. For wells recompleted, use new perforation depth to determine fair market value.

4. Adjustments for Allowance of Economic Obsolescence

a. All active service wells (i.e. LDNR Class III solution mining, injection, salt water disposal, water source, etc.) shall be allowed a 40 percent reduction.

b. All inactive (shut-in) wells shall be allowed a 90 percent reduction.

c. Deduct any additional obsolescence that has been appropriately documented by the taxpayer, as warranted, to reflect fair market value.

d. Sales, properly documented, should be considered by the assessor as fair market value, provided the sale meets all tests relative to it being a valid sale.

5. Multiply depth of well by appropriate 15 percent of Cost-New amount as indicated in Table 1007.B.

6. Brine Operation Wells: All Regions—Louisiana

Table 1007.B Brine Operation Wells All Regions—Louisiana		
Producing Depths	Cost—New by depth, per foot for Brine Operation Wells	
	Cost @ 100%	15% Assessed
0 – 1,249 ft.	\$ 163.31	\$ 24.50
1,250 – 2,499 ft.	\$ 120.98	\$ 18.15
2,500 – 3,749 ft.	\$ 118.13	\$ 17.72
3,750 – 4,999 ft.	\$ 104.13	\$ 15.62
5,000 – 7,499 ft.	\$ 142.25	\$ 21.34
7,500 – 9,999 ft.	\$ 194.06	\$ 29.11
10,000 – 12,499 ft.	\$ 264.61	\$ 39.69
12,500 – 14,999 ft.	\$ 347.13	\$ 52.07
15,000 – 17,499 ft.	\$ 562.28	\$ 84.34
17,500 – 19,999 ft.	\$ 686.51	\$ 102.98
20,000 Deeper ft.	\$ 366.58	\$ 54.99

C. Serial Number to Percent Good Conversion

Table 1007.C Serial Number to Percent Good Conversion Chart			
Year	Beginning Serial Number	Ending Serial Number	20 Year Life Percent Good
2022	253176	Higher	97
2021	252613	253175	93
2020	252171	252612	90
2019	251497	252170	86
2018	250707	251496	82
2017	249951	250706	78
2016	249476	249950	74
2015	248832	249475	70
2014	247423	248831	65
2013	245849	247422	60
2012	244268	245848	55
2011	242592	244267	50
2010	240636	242591	45
2009	239277	240635	40
2008	236927	239276	35
2007	234780	236926	31
2006	232639	234779	27
2005	230643	232638	24
2004	229010	230642	22
2003	227742	229009	21
2002	Lower	227741	20 *
VAR.	900000	Higher	50

* Reflects residual or floor rate.

NOTE: For any serial number categories not listed above, use year well completed to determine appropriate percent good. If spud date is later than year indicated by serial number; or, if serial number is unknown, use spud date to determine appropriate percent good.

D. Surface Equipment

1. Listed below is the cost-new of major items potentially used in the brine operation process. Any equipment not shown shall be assessed on an individual basis.

2. All surface equipment, including other property associated or used in connection with brine operations, must be rendered in accordance with guidelines established by the Tax Commission and in accordance with requirements set forth on LAT Form 10—Personal Property Tax Report—Brine Operation Property.

3. Brine operation personal property will be assessed in 7 major categories, as follows:

- a. wells;
- b. operation equipment (surface equipment);
- c. tanks (surface equipment);
- d. lines;
- e. inventories (material and supplies);
- f. field improvements (docks, buildings, etc.);
- g. other property (not included above).

4. The cost-new values listed below are to be adjusted to allow depreciation by use of the appropriate percent good listed in Table 1007.C. When determining the value of equipment associated with a single well, use the age of that well to determine the appropriate percent good. When determining the value of equipment used on multiple wells, the average age of the wells will determine the appropriate year to be used for this purpose.

5. Functional and/or economic obsolescence shall be considered in the analysis of fair market value as substantiated by the taxpayer in writing. Consistent with Louisiana R.S. 47:1957, the assessor may request additional documentation.

6. Sales, properly documented, should be considered by the assessor as fair market value, provided the sale meets all tests relative to it being a valid sale.

Table 1007.D Surface Equipment	
Property Description	\$ Cost New
Actuators—(See Metering Equipment)	
Automatic Control Equipment—(See Safety Systems)	
Automatic Tank Switch Unit—(See Metering Equipment)	
Communication Equipment—(See Telecommunications)	
Dampeners—(See Metering Equipment—"Recorders")	
Engines - Unattached—(Only includes engine and skids): Per Horsepower	360
Fire Control System—(Assessed on an individual basis)	
Furniture and Fixtures—(Assessed on an individual basis) (Field operations only, according to location.)	
Generators—Package Unit only—(No special installation) Per K.W.	240
Manifolds—(See Metering Equipment)	
Material and Supplies—Inventories—(Assessed on an individual basis)	
Meter Calibrating Vessels—(See Metering Equipment)	
Meter Prover Tanks—(See Metering Equipment)	
Meter Runs—(See Metering Equipment)	
Meter Control Stations—(not considered Communication Equipment)—(Assessed on an individual basis)	
Metering Equipment Manifolds—Automatic Operated: High Pressure per well per valve Low Pressure per well per valve	45,160 14,890 32,210 10,880
NOTE: Automatic Operated System includes gas hydraulic and pneumatic valve actuators, (or	

Table 1007.D Surface Equipment	
Property Description	\$ Cost New
motorized valves), block valves, flow monitors—in addition to normal equipment found on manual operated system. NO METERING EQUIPMENT INCLUDED.	
Meter Runs - piping, valves and supports—no meters:	
2 In. piping and valve	6,810
3 In. piping and valve	7,660
4 In. piping and valve	9,240
6 In. piping and valve	12,880
8 In. piping and valve	19,350
10 In. piping and valve	25,770
12 In. piping and valve	32,210
14 In. piping and valve	43,880
16 In. piping and valve	57,310
18 In. piping and valve	70,990
20 In. piping and valve	92,260
22 In. piping and valve	116,270
24 In. piping and valve	142,340
Metering Vessels (Accumulators):	
1 bbl. calibration plate (20 x 9)	3,950
5 bbl. calibration plate (24 x 10)	4,250
7.5 bbl. calibration plate (30 x 10)	5,960
10 bbl. calibration plate (36 x 10)	7,410
Recorders (Meters)—Includes both static element and tube drive pulsation dampener—also one and two pen operations.	
per meter	2,740
SOLAR PANEL (also see Telecommunications) per unit (10' x 10')	360
Pipe Lines - Lease Lines	
Steel	
2 In. nominal size—per mile	19,810
2 ½ In. nominal size—per mile	26,680
3 and 3 ½ In. nominal size—per mile	34,040
4, 4 ½ and 5 In. nominal size—per mile	58,530
6 In. nominal size—per mile	85,940
Poly Pipe	
2 In. nominal size—per mile	10,880
2 ½ In. nominal size—per mile	14,650
3 In. nominal size—per mile	18,720
4 In. nominal size—per mile	32,150
6 In. nominal size—per mile	47,220
Pipe Lines—Lease Lines (Cont'd)	
Plastic—Fiberglass	
2 In. nominal size—per mile	16,900
3 In. nominal size—per mile	28,930
4 In. nominal size—per mile	49,720
6 In. nominal size—per mile	72,990
NOTE: Allow 90% obsolescence credit for lines that are inactive, idle, open on both ends and dormant, which are being carried on corporate records solely for the purpose of retaining right of ways on the land and/or due to excessive capital outlay to refurbish or remove the lines.	
Pipe Stock—(Assessed on an individual basis)	
Pipe Stock—Exempt—Under La. Const., Art. X, §4 (19-C)	
Pumps—In Line	
per horsepower rating of motor	300
Pump—Motor Unit—pump and motor only	
Class I—(water flood, s/w disposal, p/l, etc.)	
Up to 300 HP—per HP of motor	360
Class II—(high pressure injection, etc.)	
301 HP and up—per HP of motor	430
Regenerators (Accumulator)—(See Metering Equipment)	

Table 1007.D Surface Equipment	
Property Description	\$ Cost New
Regulators per unit	2,800
Skimmer Tanks—(See Flow Tanks in Tanks section)	
Sump/Dump Tanks—(See Metering Equipment - "Fluid Tanks")	
Tanks—No metering equipment	Per Barrel*
Flow Tanks (receiver or gunbarrel) 50 to 548 bbl. Range average tank size—250 bbl.	39.10
Stock Tanks (lease tanks) 100 to 750 bbl. Range average tank size—300 bbl.	30.40
Storage Tanks (Closed Top)	
1,000 barrels	25.90
1,500 barrels	22.90
2,000 barrels	22.20
2,001—5,000 barrels	20.40
5,001—10,000 barrels	19.20
10,001—15,000 barrels	18.00
15,001—55,000 barrels	12.60
55,001—150,000 barrels	9.50
Internal Floating Roof	
10,000 barrels	37.00
20,000 barrels	25.00
30,000 barrels	18.60
50,000 barrels	16.50
55,000 barrels	15.90
80,000 barrels	14.10
100,000 barrels	12.30
* I.E.: (tanks size bbls.) x (no. of bbls.) x (cost-new factor)	
Telecommunications Equipment	
Microwave System	
Telephone and data transmission	48,620
Radio telephone	3,650
Supervisory controls	
remote terminal unit, well	10,390
master station	23,700
towers (installed):	
heavy duty, guyed, per foot	610
light duty, guyed, per foot	50
heavy duty, self supporting, per foot	620
light duty, self supporting, per foot	130
equipment building, per sq. ft.	180
solar panels, per sq. ft.	60
Utility Compressors	
per horsepower—rated on motor	800

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1837 and R.S. 47:2326.

HISTORICAL NOTE: Promulgated by the Division of Administration, Tax Commission, LR 49:

Chapter 11. Drilling Rigs and Related Equipment §1103. Drilling Rigs and Related Equipment Tables

A. Land Rigs

Table 1103.A Land Rigs		
Depth "0" to 7,000 Feet		
Depth (Ft.)	Fair Market Value	Assessment
	\$	\$
3,000	148,200	22,200
4,000	235,400	35,300
5,000	237,500	35,600
6,000	243,400	36,500
7,000	310,300	46,500

Table 1103.A Land Rigs th 8,000 to 10,000 Feet		
Depth (Ft.)	Fair Market Value	Assessment
	\$	\$
8,000	468,300	70,200
9,000	725,000	108,800
10,000	1,070,100	160,500
Depth 11,000 to 15,000 Feet		
Depth (Ft.)	Fair Market Value	Assessment
	\$	\$
11,000	1,479,800	222,000
12,000	1,921,700	288,300
13,000	2,359,300	353,900
14,000	2,756,300	413,400
15,000	3,081,500	462,200
Depth 16,000 to 20,000 Feet		
Depth (Ft.)	Fair Market Value	Assessment
	\$	\$
16,000	3,313,500	497,000
17,000	3,444,800	516,700
18,000	3,486,800	523,000
19,000	3,474,300	521,100
20,000	3,469,900	520,500
Depth 21,000 + Feet		
Depth (Ft.)	Fair Market Value	Assessment
	\$	\$
21,000	3,568,800	535,300
25,000 +	3,708,300	556,200

1. - 2. ...

B. Jack-Ups

Table 1103.B Jack-Ups			
Type	Water Depth Rating	Fair Market Value	Assessment
IC	0-199 FT.	\$ 66,900,000	\$ 10,035,000
	200-299 FT.	133,600,000	20,040,000
	300 FT. and Deeper	266,800,000	40,020,000
IS	0-199 FT.	20,100,000	3,015,000
	200-299 FT.	33,400,000	5,010,000
	300 FT. and Deeper	40,100,000	6,015,000
MC	0-199 FT.	6,700,000	1,005,000
	200-299 FT.	13,400,000	2,010,000
	300 FT. and Deeper	53,400,000	8,010,000
MS	0-249 FT.	14,000,000	2,100,000
	250 FT. and Deeper	27,600,000	4,140,000

IC - Independent Leg Cantilever
 IS - Independent Leg Slot
 MC - Mat Cantilever
 MS - Mat Slot

C. Semisubmersible Rigs

Table 1103.C Semisubmersible Rigs		
Water Depth Rating	Fair Market Value	Assessment
	\$	\$
0- 800 FT.	61,100,000	9,165,000
801-1,800 FT.	109,400,000	16,410,000
1,801-2,500 FT.	200,400,000	30,060,000
2,501FT. and Deeper	628,800,000	94,320,000

NOTE: The fair market values and assessed values indicated by these tables are based on the current market (sales) appraisal approach and not the cost approach.

1. - 3.b.i. ...

D. Well Service Rigs Land Only

Table 1103.D Well Service Rigs Land Only				
Class	Mast	Engine	Fair Market Value (RCNLD)	Assessment
I	71' X 125M#	C-7	95,000	14,300
	71' X 150M#	50 SERIES		
	72' X 125M#	6V71		
	72' X 150M#			
	75' X 150M#			
II	96' X 150M#	C-11	135,000	20,300
	96' X 180M#	50 SERIES		
	96' X 185M#	8V71		
	96' X 200M#			
	96' X 205M#			
	96' X 210M#			
	96' X 212M#			
96' X 215M#				
III	96' X 240M#	C-11	170,000	25,500
	96' X 250M#	50 SERIES		
	96' X 260M#	8V92		
	102' X 215M#			
IV	102' X 224M#	C-15/C-13	200,000	30,000
	102' X 250M#	60 SERIES		
	103' X 225M#	12V71		
	103' X 250M#			
	104' X 250M#			
	105' X 225M#			
	105' X 250M#			
V	105' X 280M#	C-15/C-13	230,000	34,500
	106' X 250M#	60 SERIES		
	108' X 250M#	12V71		
	108' X 260M#	12V92		
	108' X 268M#			
	108' X 270M#			
	108' X 300M#			
VI	110' X 250M#	C-15	265,000	39,800
	110' X 275M#	60 SERIES		
	112' X 300M#	12V71		
	112' X 300M#	(2) 8V92		
	112' X 350M#			
VII	117' X 350M#	(2) C-18	310,000	46,500
		(2) 60		
		SERIES		
		(2) 8V92		
		(2) 12V71		

D.1. - E.1. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1837 and R.S. 47:2323.

HISTORICAL NOTE: Promulgated by the Department of Revenue and Taxation, Tax Commission, LR 8:102 (February 1982), amended LR 10:939 (November 1984), LR 12:36 (January 1986), LR 13:188 (March 1987), LR 16:1063 (December 1990), LR 17:1213 (December 1991), LR 22:117 (February 1996), LR 23:205 (February 1997), amended by the Department of Revenue, Tax Commission, LR 24:487 (March 1998), LR 25:315 (February 1999), LR 26:508 (March 2000), LR 27:426 (March 2001), LR 28:519 (March 2002), LR 30:488 (March 2004), LR 31:718 (March 2005), LR 32:431 (March 2006), LR 33:493 (March 2007), LR 34:683 (April 2008), LR 35:497 (March 2009), LR 36:778 (April 2010), amended by the Division of Administration, Tax Commission, LR 37:1399 (May 2011), LR 38:808 (March 2012), LR 39:495 (March 2013), LR 40:536 (March 2014), LR 41:678 (April 2015), LR 42:748 (May 2016), LR 43:654 (April 2017), LR 44:581 (March 2018), LR 45:535 (April 2019), LR 46:562 (April 2020), LR 47:467 (April 2021), LR 48:1525 (June 2022), LR 49:

Chapter 13. Pipelines

§1307. Pipeline Transportation Tables

A. Current Costs for Other Pipelines (Onshore)

Table 1307.A Current Costs for Other Pipelines (Onshore)		
Diameter (inches)	Cost per Mile	15% of Cost per Mile
2	\$ 218,710	\$ 32,810
4	258,180	38,730
6	304,770	45,720
8	359,760	53,960
10	424,680	63,700
12	501,320	75,200
14	591,790	88,770
16	698,580	104,790
18	824,640	123,700
20	973,450	146,020
22	1,149,110	172,370
24	1,356,480	203,470
26	1,601,260	240,190
28	1,890,220	283,530
30	2,231,320	334,700
32	2,633,970	395,100
34	3,109,280	466,390
36	3,670,370	550,560
38	4,332,700	649,910
40	5,114,560	767,180
42	6,037,510	905,630
44	7,055,740	1,058,360
46	8,118,650	1,217,800
48	9,434,730	1,415,210

NOTE: Excludes river and canal crossings. For river and canal crossings, apply a factor of 2.0 to Cost Per Mile figures in table above.

B. Current Costs for Other Pipelines (Offshore)

Table 1307.B Current Costs for Other Pipelines (Offshore)		
Diameter (inches)	Cost per Mile	15% of Cost per Mile
2	\$ 1,265,240	\$ 189,790
4	1,270,380	190,560
6	1,283,280	192,490
8	1,303,230	195,480
10	1,327,960	199,190
12	1,364,170	204,630
14	1,405,020	210,750
16	1,457,180	218,580
18	1,520,650	228,100
20	1,595,420	239,310
22	1,681,500	252,230
24	1,778,890	266,830
26	1,887,590	283,140
28	2,007,590	301,140
30	2,138,900	320,840
32	2,281,520	342,230
34	2,435,450	365,320
36	2,600,680	390,100
38	2,777,230	416,580
40	2,965,080	444,760
42	3,156,320	473,450
44	3,357,830	503,670
46	3,560,510	534,080
48	3,772,110	565,820

C. Pipeline Transportation Allowance for Physical Deterioration (Depreciation)

Table 1307.C Pipeline Transportation Allowance for Physical Deterioration (Depreciation)	
Actual Age (Yrs)	26.5 Year Life Percent Good
1	98
2	96
3	94
4	91
5	88
6	86
7	83
8	80
9	77
10	73
11	70
12	67
13	63
14	60
15	56
16	52
17	48
18	44
19	39
20	35
21	33
22	30
23	28
24	26
25	25
26	23
27 and older	20 *

* Reflects residual or floor rate.

NOTE: See §1305.G (page PL-3) for method of recognizing economic obsolescence.

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1837 and R.S. 47:2323.

HISTORICAL NOTE: Promulgated by the Department of Revenue and Taxation, Tax Commission, LR 8:102 (February 1982), amended LR 10:941 (November 1984), LR 12:36 (January 1986), LR 16:1063 (December 1990), amended by the Department of Revenue, Tax Commission, LR 24:489 (March 1998), LR 25:316 (February 1999), LR 26:509 (March 2000), LR 27:426 (March 2001), LR 31:719 (March 2005), LR 32:432 (March 2006), LR 33:494 (March 2007), LR 34:684 (April 2008), LR 35:499 (March 2009), LR 36:778 (April 2010), amended by the Division of Administration, Tax Commission, LR 37:1401 (May 2011), LR 38:809 (March 2012), LR 39:496 (March 2013), LR 40:537 (March 2014), LR 41:680 (April 2015), LR 42:748 (May 2016), LR 43:655 (April 2017), LR 44:582 (March 2018), LR 45:535 (April 2019), LR 46:563 (April 2020), LR 47:468 (April 2021), LR 48:1526 (June 2022), LR 49:

Chapter 15. Aircraft

§1503. Aircraft (Including Helicopters) Table

A. Aircraft (Including Helicopters)

Table 1503 Aircraft (Including Helicopters)				
Cost Index (Average)		Average Economic Life (20 Years)		
Year	Index	Effective Age	Percent Good	Composite Multiplier
2022	0.956	1	97	.93
2021	1.123	2	93	1.04

Table 1503 Aircraft (Including Helicopters)				
Cost Index (Average)		Average Economic Life (20 Years)		
Year	Index	Effective Age	Percent Good	Composite Multiplier
2020	1.222	3	90	1.10
2019	1.228	4	86	1.06
2018	1.272	5	82	1.04
2017	1.316	6	78	1.03
2016	1.342	7	74	.99
2015	1.331	8	70	.93
2014	1.343	9	65	.87
2013	1.361	10	60	.82
2012	1.372	11	55	.75
2011	1.411	12	50	.71
2010	1.455	13	45	.65
2009	1.444	14	40	.58
2008	1.486	15	35	.52
2007	1.545	16	31	.48
2006	1.629	17	27	.44
2005	1.704	18	24	.41
2004	1.833	19	22	.40
2003	1.896	20	21	.40
2002	1.928	21	20	.39

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1837 and R.S. 47:2323.

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Chapter 25. General Business Assets

§2501. Guidelines for Ascertaining the Fair Market Value of Office Furniture and Equipment, Machinery and Equipment and Other Assets Used In General Business Activity

A. - C. ...

D. The procedure for establishing the fair market value of business and industrial personal property with the cost approach to value (excluding oil and gas properties, drilling rigs, inventories and leased equipment), includes these steps:

1. classify the personal property according to the classifications listed in Table 2503.A, or a different economic life supported by reliable evidence;

2. the classification table will refer the assessor to the correct composite multiplier column in Table 2503.D. The composite multiplier is a composite of the cost index and the percent good, which shall be updated annually by the LTC in order to comply with uniform assessment of personal property in this chapter;

3. select the correct composite multiplier from this table, based on the actual age of the equipment. For example, the age 1 composite multiplier applies to personal property purchased the year prior to the year it is being assessed (two years back for Orleans) and so on for the other ages;

4. multiply the composite multiplier times the acquisition cost by year of the equipment. The result is the reproduction cost new less physical depreciation (RCNLPD) of the equipment;

5. in the year in which the personal property has reached its minimum percent good, the applicable composite multiplier in use at that time is “frozen”. For the assessment years that follow, the RCNLD value does not change until the personal property is permanently taken out of service. An exception to this rule applies when the property has been reconditioned to extend its remaining economic life.

6. determine the amount of other forms of depreciation, when present:

- a. functional obsolescence as defined in §301;
- b. onomic (external) obsolescence as defined in §301;

7. deduct functional and/or economic (external) obsolescence from RCNLPD. The result is the fair market value of the equipment.

E. Nothing in this Section prohibits a taxpayer/property owner from arguing and submitting evidence that the tables contained in this Chapter fail to achieve fair market value in a particular appeal. A taxpayer/property owner has the burden to prove that a deviation from the tables contained in this Chapter is necessary to achieve fair market value.

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:2323.

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§2503. Tables Ascertaining Economic Lives, Percent Good and Composite Multipliers of Business and Industrial Personal Property

A. ...

1. Suggested Guidelines for Ascertaining Economic Lives of Business and Industrial Personal Property

Table 2503.A Business Activity/Type of Equipment	Average Economic Life in Years
Agricultural Machinery and Equipment	10
Feed Mill Equipment (Production Line)	20
***	***
Soft Drink Mfg. M and E (Batch)	20
Solar Farm	
Panels	25
Racking	20
Controls/Electronics	5
Tracking/Motors	10
Inverters	10
Feeder Lines	20
OandM Facility	25
Fencing	15
Storage Buildings (portable)	10
***	***
*If acquisition cost and age of service station equipment are not available, see Chapter 9, Table 907.D-4 for alternative assessment procedure.	

B. Cost Indices

Table 2503.B Cost Indices			
Year	Age	National Average 1926 = 100	January 1, 2022 = 100*
2022	1	2218.3	0.956
2021	2	1888.1	1.123
2020	3	1736.4	1.222
2019	4	1727.8	1.228
2018	5	1667.7	1.272
2017	6	1612.2	1.316
2016	7	1580.9	1.342
2015	8	1593.7	1.331
2014	9	1578.8	1.343
2013	10	1558.7	1.361
2012	11	1545.9	1.372
2011	12	1503.2	1.411
2010	13	1457.4	1.455
2009	14	1468.6	1.444
2008	15	1427.3	1.486
2007	16	1373.3	1.545
2006	17	1302.3	1.629
2005	18	1244.5	1.704
2004	19	1157.3	1.833
2003	20	1118.6	1.896
2002	21	1100.0	1.928
2001	22	1093.4	1.940
2000	23	1084.3	1.956
1999	24	1065.0	1.992
1998	25	1061.8	1.998
1997	26	1052.7	2.015
1996	27	1036.0	2.047
1995	28	1020.4	2.079
1994	29	985.0	2.153
1993	30	958.0	2.214
1992	31	939.8	2.257

*Reappraisal Date: January 1, 2022 – 2121.1 (Base Year)

C. ...

D. Composite Multipliers 2023 (2024 Orleans Parish)

Table 2503.D Composite Multipliers 2023 (2024 Orleans Parish)										
Age	3 Yr	5 Yr	6 Yr	8 Yr	10 Yr	12 Yr	15 Yr	20 Yr	25 Yr	30 Yr
1	.67	.81	.83	.86	.88	.90	.91	.93	.94	.94
2	.55	.77	.82	.89	.94	.98	1.01	1.04	1.07	1.09
3	.42	.64	.70	.82	.93	.98	1.04	1.10	1.14	1.16
4	.20	.42	.50	.66	.82	.90	.97	1.06	1.11	1.14
5		.29	.38	.55	.74	.84	.93	1.04	1.11	1.16
6		.24	.25	.43	.64	.76	.89	1.03	1.11	1.17
7			.24	.35	.52	.67	.83	.99	1.09	1.15
8				.29	.40	.57	.73	.93	1.04	1.12
9				.27	.32	.48	.66	.87	1.01	1.10
10					.29	.39	.59	.82	.97	1.08
11					.27	.33	.51	.75	.93	1.04
12						.31	.44	.71	.90	1.04
13						.29	.38	.65	.87	1.03
14							.33	.58	.81	.98
15							.31	.52	.77	.97
16							.31	.48	.74	.94
17								.44	.72	.94
18								.41	.66	.92
19								.40	.62	.93
20								.40	.57	.89
21								.39	.54	.85
22									.50	.78
23									.47	.72
24									.40	.68
25									.40	.62
26									.40	.56
27										.53
28										.48
29										.45
30										.44
31										.45

1. Data sources for tables are:

- a. Cost Index—Marshall and Swift Publication Co.;
- b. Percent Good—Marshall and Swift Publication Co.;
- c. Average Economic Life—various.

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1837 and R.S. 47:2323.

HISTORICAL NOTE: Promulgated by the Department of Revenue and Taxation, Tax Commission, LR 8:102 (February 1982), amended LR 9:69 (February 1983), LR 10:944 (November 1984), LR 12:36 (January 1986), LR 13:188 (March 1987), LR 13:764 (December 1987), LR 14:872 (December 1988), LR 15:1097 (December 1989), LR 16:1063 (December 1990), LR 17:1213 (December 1991), LR 19:212 (February 1993), LR 20:198 (February 1994), LR 21:186 (February 1995), LR 22:117 (February 1996), LR 23:207 (February 1997), amended by the Department of Revenue, Tax Commission, LR 24:490 (March 1998), LR 25:317 (February 1999), LR 26:509 (March 2000), LR 27:427 (March 2001), LR 28:520 (March 2002), LR 29:370 (March 2003), LR 30:489 (March 2004), LR 31:719 (March 2005), LR 32:433 (March 2006), LR 33:496 (March 2007), LR 34:686 (April 2008), LR 35:500 (March 2009), LR 36:780 (April 2010), amended by the Division of Administration, Tax Commission, LR 37:1402 (May 2011), LR 38:810 (March 2012), LR 39:497 (March 2013), LR

40:538 (March 2014), LR 41:681 (April 2015), LR 42:750 (May 2016), LR 43:656 (April 2017), LR 44:584 (March 2018), LR 45:538 (April 2019), LR 46:564 (April 2020), LR 47:470 (April 2021), LR 48:1528 (June 2022), LR 49:

Chapter 31 Public Exposure of Assessments; Appeals
§3101. Public Exposure of Assessments, Appeals to the Board of Review and Board of Review Hearings

A. - K.2. ...

Form 3101
Exhibit A

Appeal to Board of Review
by Property Owner/Taxpayer
For Real and Personal Property
Name: _____ Parish/District: _____
Taxpayer
Address: _____ City, State, Zip: _____

Ward: _____ Assessment/Tax Bill Number: _____ Appeal No. _____

Board of Review
(Attach copy of complete appeal submitted to the Board of Review)

Address or Legal Description of Property Being Appealed (Also, please identify building by place of business for convenience of appraisal)

I hereby request the review of the assessment of the above described property pursuant to L.R.S. 47:1992.

The assessor has determined Fair Market Value of this property at:

Land \$ _____ Improvement \$ _____ * Personal Property \$ _____
Total \$ _____

I am requesting that the Fair Market Value of this property be fixed at:

Land \$ _____ Improvement \$ _____ * Personal Property \$ _____
Total \$ _____

* If you are not appealing personal property, leave this section blank. Please notify me of the date, place and time of my appeal at the address shown below.

NOTE: The Board of Review's decision, may be appealed to the La. Tax Commission by completing and submitting Appeal Form 3102/3103.A to the LTC within 30 calendar days of the Board of Review's decision. For further information, call the LTC at (225) 219-0339.

Property Owner/Taxpayer _____
Address: _____

Telephone No. _____
Email Address: _____

PLEASE NOTE: You must submit all information concerning the value of your property to your assessor before the deadline for filing an appeal with the Board of Review. The failure to submit such information may prevent you from relying on that information should you protest your value.

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1992, R.S. 47:2301 and R.S. 47:2321.

HISTORICAL NOTE: Promulgated by the Louisiana Tax Commission, LR 4:339 (September 1978), amended by the Department of Revenue and Taxation, Tax Commission, LR 13:188 (March 1987), LR 13:764 (December 1987), LR 15:1097

(December 1989), LR 16:1063 (December 1990), LR 20:198 (February 1994), LR 21:186 (February 1995), LR 23:208 (February 1997), amended by the Department of Revenue, Tax Commission, LR 24:492 (March 1998), LR 25:319 (February 1999), LR 26:512 (March 2000), LR 32:435 (March 2006), LR 33:498 (March 2007), LR 34:688 (April 2008), LR 35:501 (March 2009), LR 36:781 (April 2010), amended by the Division of Administration, Tax Commission, LR 37:1403 (May 2011), LR 38:811 (March 2012), LR 40:539 (March 2014), LR 41:682 (April 2015), LR 42:751 (May 2016), LR 43:657 (April 2017), LR 45:538 (April 2019), LR 48:1529 (June 2022), LR 49:

§3103. Appeals to the Louisiana Tax Commission
(for appeals filed on or after January 1, 2022)

NOTE: The following procedure and rules shall apply and govern all appeals filed with the Louisiana Tax Commission on or after January 1, 2022.

A. - P. ...

Form 3102/3103.A
Exhibit A
Appeal to Louisiana Tax Commission
by Property Owner/Taxpayer or Assessor
for Real and Personal Property

La. Tax Commission
P.O. Box 66788
Baton Rouge, LA 70896
(225) 219-0339

Name: _____ Parish/District: _____
Property Owner/Taxpayer/Assessor
Address: _____ City, State, Zip: _____

Ward: _____ Assessment Tax Bill No.: _____ Appeal No.: _____

Address or Legal Description of Property Being Appealed. Also, please identify building by place of business for convenience of appraisal.

I hereby appeal the decision of the Board of Review on the assessment of the above described property pursuant to La.R.S. 47:1992, La. R.S. 47:1989 and the rules of the Louisiana Tax Commission. I timely filed my appeal as required by law.

Date of the Board of Review Determination: _____

"You are required to include a copy of the Board of Review Determination with this Appeal Form."

The Fair Market Value by the assessor was:

Land \$ _____ Improvement \$ _____

Personal Property \$ _____ Total \$ _____

The Fair Market Value determined by the Board of Review was:

Land \$ _____ Improvement \$ _____

Personal Property \$ _____ Total \$ _____

The Fair Market Value should be:

Land \$ _____ Improvement \$ _____

Personal Property \$ _____ Total \$ _____

* If you are not appealing personal property leave this section blank.

NOTE: If you disagree with the Board of Review's determination, you must file an appeal. The appeal of the decision of the Board of Review by one party is not an appeal of that decision from the other party. To protect your rights, if you disagree with the determination of the Board of Review, you should file an appeal to the Louisiana Tax Commission challenging the Board of Review's determination regardless of whether or not the other party has appealed that decision.

Applicant: (Property Owner/Taxpayer/Assessor) _____

Address: _____

Telephone No.: _____
Email Address: _____
Date of Appeal: _____
Today's Date: _____

This form must be completed in its entirety. The failure to complete the form, in its entirety, or failure to attach a copy of the Board of Review Determination may result in summary dismissal at the discretion of the Tax Commission.

PLEASE NOTE: Any documents or other evidence submitted to the assessor and/or the Board of Review must be refiled/resubmitted to the Louisiana Tax Commission.

Form 3102/3103.B

Exhibit B

Power of Attorney

PLEASE TYPE OR PRINT

Taxpayer(s) must sign and date this form on Page 2.

I. Taxpayer:

Your Name or Name of Entity: _____
Street Address, City, State, ZIP: _____

I/we appoint the following representative as my/our true and lawful agent and attorney-in-fact to represent me/us before the Louisiana Tax Commission. The representative is authorized to receive and inspect confidential information concerning me/our tax matters, and to perform any and all acts that I/we can perform with respect to my/our tax matters, unless noted below. Modes of communication for requesting and receiving information may include telephone, e-mail, or fax. The authority does not include the power to receive refund checks, the power to substitute another representative, the power to add additional representatives, or the power to execute a request for disclosure of tax information to a third party.

Representatives must sign and date this form on Page 3.

II. Authorized Representative:

Name: _____
Firm: _____
Street Address _____
City, State, ZIP: _____
Telephone Number:() _____
Fax Number:() _____
Email Address: _____

III. Scope of Authorized Appointment:

Acts Authorized. Mark only the boxes that apply. By marking the boxes, you authorize the representative to perform any and all acts on your behalf, including the authority to sign tax returns, with respect only to the indicated tax matters:

A. Duration: _____ Tax Year _____ (Days, Months, etc.) _____ Until Revoked.

B. Agent Authority:

- 1. _____ General powers granted to represent taxpayer in all matters.
- 2. _____ Specified powers as listed.

(a.) _____ File notices of protest and present protests before the Louisiana Tax Commission.

(b.) _____ Receive confidential information filed by taxpayer.

(c.) _____ Negotiate and resolve disputed tax matters without further authorization.

(d.) _____ Represent taxpayer during appeal process.

C. Properties Authorized to Represent:

1. _____ All property.

2. _____ The following property only (give assessment number and municipal address or legal description).

Additional properties should be contained on separate page

NOTICES AND COMMUNICATIONS: Original notices and other written communication will be sent only to you, the taxpayer. Your representative may request and receive information by telephone, e-mail, or fax. Upon request, the representative may be provided with a copy of a notice or communication sent to you. If you want the representative to request or receive a copy of notices and communications sent to you, check this box.

REVOCAION OF PRIOR POWER(S) OF ATTORNEY: Except for Power(s) of Attorney and Declaration of Representative(s) filed on this Form, the filing of this Power of Attorney automatically revokes all earlier Power(s) of Attorney on file with the Louisiana Tax Commission for the same tax matters and years or periods covered by this document.

SIGNATURE OF TAXPAYER(S): If a tax matter concerns jointly owned property, all owners must sign if joint representation is requested. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, or trustee on behalf of the taxpayer. I certify that I have the authority to execute this form on behalf of the taxpayer.

IF THIS POWER OF ATTORNEY IS NOT SIGNED AND DATED, IT WILL BE RETURNED.

Signature

Date (mm/dd/yyyy)

Spouse/Other Owner Signature

Date (mm/dd/yyyy)

Signature of Duly Authorized Representative, if the taxpayer title is a corporation, partnership, executor, or administrator

Date (mm/dd/yyyy)

IV. Declaration of Representative:

Under penalties of perjury, I declare that:

I am authorized to represent the taxpayer identified above and to represent that taxpayer as set forth in Part III specified herein;

I have read and am familiar with all the rules and regulations promulgated by the commission;

I have fully complied with all rules adopted by the commission regarding professional conduct and ethical considerations.

Signature

Date (mm/dd/yyyy)

IF THIS DECLARATION OF REPRESENTATIVE IS NOT SIGNED AND DATED, THE POWER OF ATTORNEY WILL BE RETURNED.

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1837, R.S. 47:1989 and R.S. 47:1992.

HISTORICAL NOTE: Promulgated by the Louisiana Tax Commission, LR 4:339 (September 1978), amended by the Department of Revenue and Taxation, Tax Commission, LR 10:947

(November 1984), LR 15:1097 (December 1989), LR 20:198 (February 1994), LR 21:186 (February 1995), LR 22:117 (February 1996), amended by the Department of Revenue, Tax Commission, LR 24:492 (March 1998), LR 25:319 (February 1999), LR 26:512 (March 2000), LR 28:521 (March 2002), LR 31:721 (March 2005), LR 32:436 (March 2006), LR 33:498 (March 2007), LR 34:688 (April 2008), LR 36:782 (April 2010), amended by the Office of the Governor, Division of Administration, Tax Commission, LR 38:811 (March 2012), LR 41:682 (April 2015), LR 42:752 (May 2016), LR 43:658 (April 2017), LR 45:539 (April 2019), LR 46:567 (April 2020), LR 47:471 (April 2021), LR 48:1533 (June 2022), LR 49:

Chapter 35 Miscellaneous

§3507. Claim for Taxes Paid in Error

A. Any taxpayer/owner who has a claim against a political subdivision for ad valorem taxes erroneously paid, may present such claim to the Louisiana Tax Commission. The claim may be presented on the form in this section and shall be presented as follows:

1. The claim shall be presented to the Tax Commission in writing within three years of the erroneous payment.

2. The presentation of the claim shall include:

- a. the name of the parish in which the property is located and, in Orleans Parish, the number of the district;
- b. the name and address of the property owner;
- c. the amount of tax paid in error;
- d. the assessment number, tax bill number, account number, or any other numerical designation of the property on the assessment rolls.

3. The person who presents the claim shall:

- a. present proof of an erroneous payment by evidence such as a receipt to the claimant, or a canceled check issued in payment; and
- b. present proof that he or she:
 - i. is the person who made the erroneous payment by evidence such as a receipt to the claimant, or a canceled check issued in payment; or
 - ii. is a bona fide representative of the person who made the erroneous payment by evidence such as proof of status of responsible employee or officer, or affidavit or contract of employment as attorney, accountant, or other representative; or, by proof of status as custodian, trustee, executor, or other legal capacity, or other showing of capacity of representative of the claimant; or
 - iii. has succeeded to or otherwise possesses the right to present the claim.

4. The claim shall show the nature of the error. Payment of taxes on property which was eligible for homestead exemption, or was exempt from taxation by Article VII, Section 21 of the Constitution of 1974, or other provision of law is erroneous payment. Dual payment, or payment on dual or multiple assessments of the same property is erroneous payment.

a. In the case of dual payment or dual assessment, the claim shall particularly identify the property on which dual payment was made.

b. In the case of a claim of exemption, the claimant shall provide proof of the basis of the exemption.

c. There is no erroneous payment when the taxpayer questions the accuracy of an assessment, but has not appealed the assessment by regular administrative process.

5. If it is reasonably available to the claimant, the presentation shall include:

a. except in Orleans Parish, the number of the ward in which the property is located; or, in the case of business personal or movable property, the number of the ward in which the property was taxed;

b. the property classification, such as land, improvement, machinery and equipment, furniture and fixtures, inventory, or similar classification.

6. The claim must be presented to the Tax Commission within three years of the erroneous payment. The date of payment shall be shown by a dated receipt from the tax collector; or, by a date marked by the collector on the check on the date of payment or processing; or, if neither is available, the date of processing, or cancellation marked by the bank in which the check was deposited.

a. The claim should be sent with return receipt requested to provide proof of receipt by the Tax Commission. If it is not sent in this manner, the postmark date indicated on the envelope shall be the date on which the claim is made to the Tax Commission for determination of a timely filed claim.

7. A copy of the claim shall be forwarded to the assessor and the assessor shall, within 30 calendar days after receipt thereof, advise the Tax Commission whether a refund is due to claimant using Form 3507.B. If the assessor advises the Tax Commission that a refund is due the claimant, the Tax Commission shall duly examine the merits and correctness of each such claim, and shall make a determination thereon within 30 calendar days of receipt of the assessor's response. If the assessor advises the Tax Commission that the refund is not due, then the Tax Commission shall deny the claim within 30 calendar days of receipt of the assessor's response. If the assessor fails to respond within 30 calendar days, then the request will be deemed to be approved by the assessor and the Tax Commission shall duly examine the merits and correctness of each such claim, and shall make a determination thereon within 30 calendar days.

8. There will be refund of taxes paid in error only in the limited circumstances allowed by R.S. 47:2132. In all other cases, a credit against future taxes owed shall be the remedy.

**Form 3507.A
Claim for Refund or Credit
of Taxes Paid in Error**

I. Claimant:

Name _____

Mailing Address _____

City State Zip _____

II. Property:

Parish _____ District (If Orleans Parish) _____ Ward _____

Assessment No. _____ Tax Bill No. _____

Amount of Tax Paid in Error _____ Description of property: _____

III. Basis of Claim:

Dual or multiple payment _____

Payment on non-existent property _____

Payment on property in which taxpayer no longer has an interest _____

Property is eligible for homestead exemption _____

Clerical error in assessment rolls _____

Other _____

The following documents are attached to this form as proof of the basis for this claim:

IV. Proof of Payment:

_____ Copy of canceled check(s) (both sides)

_____ Receipt to the Claimant

V. Date of Erroneous Payment:

The following proof of payment is attached:

_____ Copy of canceled check(s) (both sides)

_____ Receipt to the Claimant

_____ Other

VI. Standing

The following proof that the claimant is the person who made the erroneous payment, is a bona fide representative of the person who made the erroneous payment or has succeeded to or otherwise possesses the right to present the claim is attached:

_____ Receipt to Claimant or canceled check

_____ Proof of status as responsible employee or officer

_____ Affidavit or Contract of Employment as attorney, accountant or other representative, or

_____ Other proof of status as legal representative of Claimant

VII. Signature: _____

Property Owner/Authorized Agent

Be Completed at Office of Louisiana Tax Commission

Claim received, Date Assessor consulted, Date _____

Assessor's Response: Approve Disapprove Date _____

Other _____

Initial Response to Taxpayer

Documentation requested _____ Date _____

Received Date _____

Decision

Approved _____ Denied _____ Date _____

Reason for Denial _____

Reason _____

Refund or Credit

Property is eligible for homestead Yes No _____

Parish has alternative procedure Yes No _____

**Form 3507.B
Assessor Notification of
Possible Claim for Refund or Credit
for Taxes Paid in Error
(To Be Completed by Assessor)**

Claimant:

Name _____

Mailing Address _____

City _____ State _____ Zip _____

Property:

Parish _____ District (If Orleans Parish) _____

Ward _____ Assessment No. _____ Tax Bill No. _____

I have received and reviewed the Claim for Refund or Credit of Taxes Paid in Error (Form 3507.A) for the above referenced claimant and property. Based upon my review, I have determined that:

The claimant is due a refund or credit for taxes erroneously paid in the amount of \$ _____ due to (describe reason(s) for refund or credit) _____.

This property is _____ is not _____ eligible for the homestead exemption.

My parish does _____ does not _____ have an alternative procedure for providing for refunds of ad valorem taxes erroneously paid.

_____ No refund or credit for taxes erroneously paid is due. (Reason(s) for denial)

Assessor

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1837 and R.S. 47:2108.1.

HISTORICAL NOTE: Promulgated by the Department of Revenue and Taxation, Tax Commission, LR 16:1063 (December 1990), amended LR 19:212 (February 1993), LR 20:198 (February 1994), LR 22:117 (February 1996), LR 23:209 (February 1997), amended by the Department of Revenue, Tax Commission, LR 24:494 (March 1998), LR 32:441 (March 2006), LR 49:

Lawrence E. Chehardy
Chairman

2212#018

DECLARATION OF EMERGENCY

**Department of Health
Bureau of Health Services Financing
and
Office of Aging and Adult Services**

Home and Community-Based Services Waivers-
Adult Day Health Care Waiver
Assistive Technology Services
(LAC 50:XXI.2301)

The Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services amend LAC 50:XXI.2301 in the Medical Assistance Program as authorized by R.S. 36:254 and pursuant to Title XIX of the Social Security Act. This Emergency Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:962, and shall be in effect for the maximum period allowed under the Act or until adoption of the final Rule, whichever comes first.

The U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS) authorized funding under section 9817 of the American Rescue Plan Act of 2021 (ARPA) to expand and enhance services provided to home and community-based services waiver participants in the Medicaid program.

The Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services amend the provisions governing the Adult Day Health Care

(ADHC) Waiver in order to add assistive technology as a covered service, as authorized under section 9817 of ARPA.

This action is being taken to promote the health and welfare of ADHC Waiver participants by providing access to assistive technology services. It is estimated that implementation of this Emergency Rule will increase expenditures in the Medicaid Program by approximately \$40,970 for state fiscal year 2022-2023.

Effective November 18, 2022, the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services amend the provisions governing the ADHC Waiver in order to add assistive technology as a covered service.

Title 50

PUBLIC HEALTH—MEDICAL ASSISTANCE

Part XXI. Home and Community-Based Services Waivers

Subpart 3. Adult Day Health Care Waiver

Chapter 23. Services

§2301. Covered Services

A. - A.3.b. ...

c. Support coordinators may assist participants to transition for up to six months while the participants still reside in the facility.

4. ...

a. Allowable expenses are those necessary to enable the individual to establish a basic household (excluding expenses for room and board) including, but not limited to:

i. ...

ii. specific set up fees or deposits;

a.iii. - e. ...

f. Funds are available for specific items up to the lifetime maximum amount identified in the federally-approved waiver document.

5. Assistive Technology. These services include the following:

a. an item, piece of equipment, or product system, acquired commercially, that is used to increase, maintain, or improve functional capabilities of participants; and

b. the assistance provided to the participant in the acquisition, set up, and use of an assistive technology device:

i. evaluating to determine if an assistive technology device is appropriate for the participant;

ii. purchasing the most appropriate assistive technology device for the participant; and

iii. costs associated with the delivery, set up, and training.

B. - E. Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Office of Family Security, LR 11:623 (June 1985), amended LR 13:181 (March 1987), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 23:1149 (September 1997), amended LR 25:1100 (June 1999), repromulgated LR 30:2036 (September 2004), amended by the Department of Health and Hospitals, Office of Aging and Adult Services, LR 34:2162 (October 2008), repromulgated LR 34:2566 (December 2008), amended by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 37:2625 (September 2011), LR 39:2495 (September 2013), LR 40:791 (April 2014), amended by the Department of

Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 44:2163 (December 2018), LR 48:

Implementation of the provisions of this Rule may be contingent upon the approval of the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), if it is determined that submission to CMS for review and approval is required.

Interested persons may submit written comments to Tara A. LeBlanc, Bureau of Health Services Financing, P.O. Box 91030, Baton Rouge, LA 70821-9030. Ms. LeBlanc is responsible for responding to inquiries regarding this Emergency Rule. A copy of this Emergency Rule is available for review by interested parties at parish Medicaid offices.

Dr. Courtney N. Phillips

Secretary

2212#002

DECLARATION OF EMERGENCY

Department of Health Bureau of Health Services Financing and Office of Aging and Adult Services

Home and Community-Based Services Waivers

Community Choices Waiver

Home Delivered Meals and Assistive Technology Services
(LAC 50:XXI.Chapter 83 and 9501)

The Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services amend LAC 50:XXI.Chapter 83 and §9501 in the Medical Assistance Program as authorized by R.S. 36:254 and pursuant to Title XIX of the Social Security Act. This Emergency Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:962, and shall be in effect for the maximum period allowed under the Act or until adoption of the final Rule, whichever comes first.

The U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS) authorized funding under section 9817 of the American Rescue Plan Act of 2021 (ARPA) to expand and enhance services provided to home and community-based services waiver participants in the Medicaid program.

The Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services amend the provisions governing the Community Choices Waiver (CCW) in order to add medically tailored meals and assistive technology as covered services, as authorized under section 9817 of ARPA.

This action is being taken to promote the health and welfare of CCW participants by providing access to medically tailored meals and assistive technology services. It is estimated that implementation of this Emergency Rule will increase expenditures in the Medicaid Program by approximately \$1,012,630 for state fiscal year 2022-2023.

Effective November 18, 2022, the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services amend the provisions governing the CCW in order to add medically tailored meals and assistive technology as covered services.

Title 50
PUBLIC HEALTH—MEDICAL ASSISTANCE
Part XXI. Home and Community-Based Services
Waivers

Subpart 7. Community Choices Waiver

Chapter 83. Covered Services

§8307. Personal Assistance Services

A. - C. ...

D. PAS may be provided through the “a.m.” and “p.m.” delivery option defined as follows:

1. ...

2. a minimum of one hour and a maximum of two hours of PAS provided to assist the participant at the end of his/her day, referred to as the “p.m.” portion of this PAS delivery method; and

3. - 4. ...

5. "a.m. and p.m." PAS cannot be "shared";

D.6. - K. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 37:3519 (December 2011), amended LR 39:320 (February 2013), LR 39:1778 (July 2013), LR 40:791 (April 2014), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 44:1898 (October 2018), LR 47:885 (July 2021), LR 48:

§8317. Home Delivered Meals

A. - C. ...

D. Medically tailored meals (MTMs) may be delivered to participants with chronic conditions when discharging from the hospital and/or nursing facility. In addition, participants will receive nutritional guidance to support healthy food choices for their third meal and snacks.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 37:3522 (December 2011), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 48:

§8331. Assistive Technology

A. Assistive technology services include the following:

1. an item, piece of equipment or product system, acquired commercially, that is used to increase, maintain or improve functional capabilities of participants; and

2. the assistance provided to the participant in the acquisition, set up and use of an assistive technology device:

a. evaluating to determine if an assistive technology device is appropriate for the participant;

b. purchasing the most appropriate assistive technology device for the participant; and

c. costs associated with the delivery, set up, and training.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 48:

Chapter 95. Reimbursement

§9501. Reimbursement and Rate Requirements

A. - A.6. ...

B. The following services shall be reimbursed at the authorized rate or approved amount of the assessment, inspection, installation/fitting, maintenance, repairs, adaptation, device, equipment, or supply item and when the service has been prior authorized by the plan of care:

1. - 5. ...

6. monitored in-home caregiving (MIHC) assessment;

7. certain nursing, and skilled maintenance therapy procedures; and

8. assistive technology.

C. - H. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 37:3525 (December 2011), amended LR 39:322 (February 2013), LR 39:508, 508 (March 2013), repromulgated LR 39:1048 (April 2013), amended LR 39:1779 (July 2013), LR 40:793 (April 2014), LR 42:897 (June 2016), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 44:1902 (October 2018), LR 47:886 (July 2021), LR 48:

Implementation of the provisions of this Rule may be contingent upon the approval of the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), if it is determined that submission to CMS for review and approval is required.

Interested persons may submit written comments to Tara A. LeBlanc, Bureau of Health Services Financing, P.O. Box 91030, Baton Rouge, LA 70821-9030. Ms. LeBlanc is responsible for responding to inquiries regarding this Emergency Rule. A copy of this Emergency Rule is available for review by interested parties at parish Medicaid offices.

Dr. Courtney N. Phillips
Secretary

2212#003

DECLARATION OF EMERGENCY

Department of Health
Bureau of Health Services Financing

Nursing Facilities—Licensing Standards
(LAC 48:I.Chapter 97 and 9911)

The Department of Health, Bureau of Health Services Financing amends LAC 48:I.Chapter 97 and §9911 as authorized by R.S. 36:254 and 40:2009.1-2009.44. This Emergency Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S.49:962, and shall be in effect for the maximum period allowed under the Act or until adoption of the final Rule, whichever occurs first.

The Department of Health, Bureau of Health Services Financing amends the provisions governing the licensing of nursing facilities in order to comply with the requirements of

the following Acts of the 2022 Regular Session of the Louisiana Legislature: Act 253 requires the Department of Health to amend provisions governing the licensing of nursing facilities to provide requirements for generators or other department approved alternate electrical power sources; Act 461 requires the department to promulgate provisions concerning healthcare workplace violence; and Act 522 directs the department to promulgate requirements and standards for nursing home emergency preparedness plans.

This action is being taken to prevent imminent peril to the health, safety, and welfare of nursing facility residents and staff in the event of an emergency or disaster. It is anticipated that implementation of this Emergency Rule will increase expenditures in the Department of Health, Office of the Secretary by approximately \$397,594 for state fiscal year 2022-2023.

Effective November 18, 2022, the Department of Health, Bureau of Health Services Financing amends the provisions governing the licensing of nursing facilities in compliance with Acts 253, 461, and 522 of the 2022 Regular Session of the Louisiana Legislature.

Title 48
PUBLIC HEALTH—GENERAL
Part I. General Administration
Subpart 3. Licensing and Certification
Chapter 97. Nursing Facilities
Subchapter A. General Provisions
§9701. Definitions

* * *

Local Office of Emergency Preparedness (OEP)—a parish office of homeland security and emergency preparedness established pursuant to R.S. 29:727.

* * *

Nursing Facility—Repealed.

Nursing Home and/or Nursing Facility—a nursing home or nursing facility as defined in R.S. 40:2009.2 that is licensed by the Department of Health (LDH) in accordance with the requirements of R.S. 40:2009.3.

* * *

Unlicensed Sheltering Site—any location within or outside the state of Louisiana that is not licensed as a nursing facility by the LDH in accordance with the R.S. 40:2009.3. This includes nursing homes licensed or certified by other states or federal entities.

* * *

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and 40:2009.1-2009.44.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 42:1891 (November 2016), amended LR 46:1393 (October 2020), LR 49:

§9727. Incident Reporting Requirements

A. A nursing facility shall have written procedures for the reporting and documentation of actual and suspected incidents of abuse, neglect, misappropriation of property/funds, and suspicious death. Major injuries of unknown origin (e.g., fractures, burns, suspicious contusions, head injuries, etc.) for which the nursing facility is unable to determine the cause and could possibly be the result of abuse or neglect shall also be reported. Such procedures shall ensure that:

1. ...

2. all alleged violations involving abuse, neglect, exploitation, or mistreatment, including injuries of unknown origin and misappropriation of resident property, are reported immediately, but not later than two hours after the allegation is made or discovered, to the administrator of the facility and to other officials (including Health Standards Section (HSS) and law enforcement) where state law provides jurisdiction, if the events that caused the allegation involve abuse or result in a serious bodily injury; or not later than 24 hours after the events that caused an allegation which does not involve abuse or result in serious bodily injury, to the administrator of the facility and to other officials;

3. allegations of an event that do not involve abuse or result in serious bodily injury shall be reported to the administrator of the facility and HSS not later than 24 hours after the occurrence of or discovery of the incident. The nursing facility shall utilize the current department reporting database system to provide notification;

NOTE: Repealed.

4. – 5. ...

6. immediate attempts are made to notify other involved agencies and parties as appropriate;

7. immediate notification is made to the appropriate law enforcement authority whenever warranted; and

8. the nursing facility is required to maintain internet access and to keep the department informed of its active and monitored electronic mail address at all times.

B. – C. ...

D. A final report with the results of all investigations shall be reported to HSS within five working days of the incident through use of the current department reporting database system. The report shall include:

D.1. – F.8. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and 40:2009.1-2009.44.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 42:1900 (November 2016), amended LR 49:

§9761. Policies and Procedures

A. There shall be written policies and procedures that:

1. are available to staff, residents and legal representatives governing all areas of care and services provided by the nursing facility;

2. ensure that each resident receives the necessary care and services to promote the highest level of physical, medical, psychosocial functioning, and well-being of each resident;

3. are developed with the advice of a group of professional personnel consisting of at least a currently licensed physician, the administrator, and the director of nursing services;

4. are revised as necessary, but reviewed by the professional personnel group referenced in Paragraph A.3 of this Section at least annually;

5. are available to admitting physicians;

6. reflect an awareness of, and provisions for, meeting the total physical, medical, and psychosocial needs of residents, including admission, transfer and discharge planning, and the range of services available to residents, including frequency of physician visits by each type of similarly diagnosed resident admitted; and

7. are approved by the governing body.

B. The nursing facility shall develop and implement written policies and procedures that prohibit mistreatment, neglect, and abuse of residents and misappropriation of resident property.

1. The nursing facility's personnel, visitors, and residents shall not use verbal, mental, sexual or physical abuse, corporal punishment, or involuntary seclusion.

2. The nursing facility shall develop and implement policies and procedures for screening and training employees, for protection of the residents, and for the preventing, identifying, investigating, and reporting of abuse.

C. The nursing facility shall develop and implement policies and procedures to prevent, respond to, report, and mitigate instances of healthcare workplace violence.

D. The nursing facility is not required to admit registered sex offenders; however, if the nursing facility admits a registered sex offender, then the nursing facility shall develop policies and procedures to ensure that residents, their family members, and/or their responsible parties or guardians are notified upon admission of sex offenders living in the facilities. Such policies and procedures must include provisions for addressing the safety and well-being of other residents, staff, and visitors. The requirement of notification shall continue for as long as the information is considered a public record.

E. The administrator or his designee is responsible, in writing, for the execution of such policies.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and 40:2009.1-2009.44.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 42:1903 (November 2016), amended LR 49:

§9767. Emergency Preparedness

A. General Provisions

1. The nursing facility shall have an emergency preparedness plan that conforms to the format and specifications and the licensing regulations promulgated herein (see the Louisiana Model Nursing Home Emergency Plan). The plan shall be designed to manage the consequences of all hazards, declared disasters, or other emergencies that either have the potential to disrupt and/or actually disrupt the nursing facility's ability to provide care and treatment, or threatens the health, safety, and welfare of the residents. The nursing facility shall follow and execute its emergency preparedness plan in the event of a declared disaster or other emergency.

2. All nursing facilities shall submit their full, updated emergency preparedness plan to the department for approval on its current emergency preparedness webpage or electronic database. The emergency preparedness plan shall be signed by the nursing home's owner or owners, or any designee of such parties, and its administrator.

a. – d. Repealed.

3. The nursing facility's emergency preparedness plan shall include a shelter in place plan and an evacuation plan, both of which shall be activated at least once annually, either in response to an emergency or in a planned drill.

4. The nursing facility's emergency preparedness plan shall be individualized, site specific, current, and correct, and it shall comport with all requirements in Subsections C and D of this Section below.

5. The nursing facility's plan shall follow all applicable laws, standards, rules, or regulations, including R.S. 40:2009.25.

B. Emergency Preparedness Plan Approval Process

1. The review and approval of nursing home emergency preparedness plans by the department and each entity listed in Paragraph 3.a of this Subsection below shall be performed pursuant to each reviewing entities' respective areas of knowledge, expertise, or jurisdiction.

a. – d.iii. Repealed.

2. The departmental review and approval process required by this Subsection may include transmittal to any other local, parish, regional, or other state agencies or entities for consultation as the department deems appropriate. Each such agency or entity shall cooperate and contribute to the department's review and approval process, as required by state statute.

3. Departmental Review, Transmittal, and Approval of Emergency Preparedness Plan

a. The department shall conduct a review and, if appropriate, approval of each nursing home's emergency preparedness plan submitted to it via the current department emergency preparedness webpage or other electronic database. The departmental review and approval process required by this Subsection shall include transmittal of each nursing home's emergency preparedness plan to all of the following entities for review by those entities:

i. the Office of State Fire Marshal(OSFM);

ii. the Governor's Office of Homeland Security and Emergency Preparedness;

iii. the Department of Transportation and Development;

iv. the Louisiana Emergency Response Network;

v. the local office of emergency preparedness (OEP) of the parish in which the nursing home is located; and

vi. the local OEP of any parish in which an evacuation site, including any unlicensed sheltering site, as identified in the nursing home's emergency preparedness plan, is located.

b. After review of a nursing home emergency preparedness plan by the entities listed above, the department shall either issue final approval of the emergency preparedness plan or require changes, amendments, or other revisions to the emergency preparedness plan. The department shall notify the nursing home that submitted the plan of the department's decision.

i. – vi. Repealed.

NOTE: Repealed.

4. Emergency Preparedness Plan Review by Other Entities

a. Each entity listed in Paragraph 3.a above of this Subsection shall review each nursing home emergency preparedness plan submitted to it, and shall submit one of the following documents to the department within 90 days of receipt of the emergency preparedness plan from the department:

i. a letter of preliminary approval of the nursing home's emergency preparedness plan; or

ii. a letter detailing what changes, amendments, or revisions to the emergency preparedness plan are necessary.

b. any entity listed in Paragraph 3.a of this Subsection that does not respond to the department

concerning a nursing home emergency preparedness plan within 90 days of receipt of the plan shall be deemed to have been granted preliminary approval to the plan.

5. Revision and Resubmission of Emergency Preparedness Plan

a. Within 15 days of receipt by the nursing home of an electronic notification from the department that the nursing home's emergency preparedness plan requires changes, amendments, or revisions, the nursing home shall update and revise its emergency preparedness plan to incorporate the required changes, amendments, or revisions, and shall return a copy of the updated and revised emergency preparedness plan to the department.

b. After receipt of the nursing home's updated and revised emergency preparedness plan within the 15 day time period, the department may, at its discretion, schedule a conference call with the nursing home to get clarification, information, or edits from the nursing home; such conference call may result in the nursing home submitting an additional updated or revised emergency preparedness plan.

c. The department shall review the nursing home's updated and revised emergency preparedness plan to confirm that all required changes, amendments, or revisions have been incorporated into the plan, and it shall approve the emergency preparedness plan and issue an approval letter to the nursing home. If the required changes, amendments, or revisions have not been incorporated, the department shall reject the emergency preparedness plan and issue a letter of rejection to the nursing home. The department shall not issue a license to or renew a license of a nursing home that has received a letter of rejection of its emergency preparedness plan.

6. Each nursing home shall transmit, if available, a copy of its final, approved emergency preparedness plan and a copy of the approval letter from the department to the OSFM and the applicable local office or OEP. If the nursing home received a letter of rejection from the department, the nursing home shall transmit a copy of that letter to the OSFM and the applicable local office or OEP.

7. Emergency Preparedness Plan Submission Deadlines for Nursing Facilities Located in Coastal Parishes

a. The following deadlines shall apply to each nursing home located in the parishes of Acadia, Ascension, Assumption, Calcasieu, Cameron, Iberia, Jefferson, Jefferson Davis, Lafayette, Lafourche, Orleans, Plaquemines, Saint Bernard, Saint Charles, Saint James, Saint John the Baptist, Saint Martin, Saint Mary, Saint Tammany, Tangipahoa, Terrebonne, and Vermilion.

b. Each nursing home located in a parish listed in this Paragraph shall develop its emergency preparedness plan on or before August 30, 2022, pursuant to Act 522 of the 2022 Regular Session of the Louisiana Legislature.

c. Each nursing home located in a parish listed in this Paragraph shall submit copies of its emergency preparedness plan to the department on or before September 1, 2022, pursuant to Act 522 of the 2022 Regular Session of the Louisiana Legislature.

d. The department shall transmit its notification letter approving or rejecting the emergency preparedness plan to all nursing homes located in a parish listed in this Paragraph on or before March 1, 2023.

e. The department shall either approve or reject all resubmitted emergency preparedness plans and transmit to the nursing homes located in a parish listed in this Paragraph an approval or rejection letter on or before May 15, 2023.

f. Each nursing home located in a parish listed in this Paragraph shall transmit a copy of its final, approved emergency preparedness plan and the approval letter from the department, or alternatively it shall transmit the rejection letter it received from the department, to the OSFM and the applicable local office or OEP on or before May 31, 2023.

8. Emergency Preparedness Plan Submission Deadlines for Nursing Facilities Located in Non-Coastal Parishes

a. The following deadlines shall apply to each nursing home located in the parishes of Allen, Avoyelles, Beauregard, Bienville, Bossier, Caddo, Caldwell, Catahoula, Claiborne, Concordia, DeSoto, East Baton Rouge, East Carroll, East Feliciana, Evangeline, Franklin, Grant, Iberville, Jackson, LaSalle, Lincoln, Livingston, Madison, Morehouse, Natchitoches, Ouachita, Pointe Coupee, Rapides, Red River, Richland, Sabine, Saint Helena, Saint Landry, Tensas, Union, Vernon, Washington, Webster, West Baton Rouge, West Carroll, West Feliciana, and Winn.

b. Each nursing home located in a parish listed in this Paragraph shall develop its emergency preparedness plan on or before August 30, 2023.

c. Each nursing home located in a parish listed in this Paragraph shall submit copies of its emergency preparedness plan to the department on or before September 1, 2023.

d. The department shall transmit its notification letter approving or rejecting the emergency preparedness plan to all nursing homes located in a parish listed in this Paragraph on or before March 1, 2024.

e. The department shall either approve or reject all resubmitted emergency preparedness plans and transmit to nursing homes located in a parish listed in this Paragraph an approval or rejection letter on or before May 15, 2024.

f. Each nursing home located in a parish listed in this Paragraph shall transmit a copy of its final, approved emergency preparedness plan and the approval letter from the department, or alternatively it shall transmit the rejection letter it received from the department, to the OSFM and the applicable local office or OEP on or before May 31, 2024.

9. Annual Review of Emergency Preparedness Plan

a. On or before October 31, 2023, and annually thereafter each nursing home located in the parishes listed in Subsection B.7 above shall review its emergency preparedness plan.

b. On or before October 31, 2024, and annually thereafter, each nursing home located in the parishes listed in Subsection B.8 above shall review its emergency preparedness plan.

c. In conducting the annual review required by this Paragraph, a nursing home shall review any changes in the state licensing rules and regulations and any changes in federal rules and regulations for nursing homes that have been adopted since the date of its last review of its emergency preparedness plan.

d. If a nursing home conducts a review and determines that no changes, modifications, or amendments

to its emergency preparedness plan are necessary, then the nursing home shall notify all of the following entities of this determination on or before November 1 of the current review period:

- i. the local OEP of the parish in which the nursing home is located;
- ii. the local OEP of any parish in which a sheltering site, alternative sheltering site, or evacuation site, as identified in the nursing home's emergency preparedness plan, is located;
- iii. the OSFM; and
- iv. the department.

e. Each notification required by Subparagraph 9.d above shall be in the form of a written attestation signed by the owner or owners, or any designee of such parties, and the administrator of the nursing home submitting the notification. A nursing home may submit an attestation provided for in this Subparagraph for no more than four consecutive years.

f. If the nursing home conducting the annual review determines that any changes, modifications, or amendments are necessary, or if the nursing home has previously submitted an attestation, as provided for in Subparagraph 9.e above, for four consecutive years, then the nursing home shall furnish a full emergency preparedness plan, prepared in accordance with the requirements and procedures provided in Subsections A through D of Section 9767, to the department on or before November 1 of the current review period.

i. Following review of the full emergency preparedness plan submitted in accordance with Subparagraph 9.f above, the department shall notify the nursing home of its decision to either approve the plan or to require changes, amendments, or revisions to the plan on or before March 1 of the current review period.

ii. In the event that the department requires changes, amendments, or revisions to the nursing home's emergency preparedness plan, the nursing home shall update and revise the plan to incorporate the required changes, amendments, or revisions, and it shall resubmit the plan to the department within 15 days of its receipt of the electronic notification from the department that changes, amendments, or revisions are required.

iii. After receipt of the nursing home's amended plan within the 15 day time period, the department may, at its discretion, schedule a conference call with the nursing home to get clarification, information, or edits from the nursing home; such conference call may result in the nursing home submitting an additional updated or revised emergency preparedness plan.

iv. The department shall review the nursing home's updated and revised emergency preparedness plan to confirm that the required changes have been incorporated into the updated plan and it shall issue an approval or rejection letter to the nursing home on or before May 15 of the current review period.

(a). The department shall not issue a license to or renew a license of a nursing home that has received a letter of rejection of its emergency preparedness plan.

v. The nursing home shall transmit a copy of its final, approved emergency preparedness plan and a copy of the approval letter, or in the alternative, a copy of the

rejection letter it received from the department, to the OSFM and the applicable local office or OEP on or before May 31 of the current review period.

(a). The nursing home shall submit the final, approved emergency preparedness plan to the above recipients in electronic format, if available.

C. Contents of Emergency Preparedness Plan

1. Each nursing home's written emergency preparedness plan shall identify, at a minimum, a primary evacuation site location and a secondary evacuation site location for emergencies or disasters. Such evacuation site locations may include the premises of other nursing homes, unlicensed sheltering sites, or both. Each such plan shall include and identify, at a minimum, all of the following:

a. the procedures and criteria used for determining when the nursing facility will evacuate, including a listing of specific evacuation determinations for those procedures and criteria;

b. the procedures and criteria used for determining when the nursing facility will shelter in place, including a listing of specific sheltering in place determinations for those procedures and criteria;

c. a primary evacuation site and a secondary evacuation site, as well as any other alternative evacuation sites that the nursing home may have;

i. these evacuation sites shall be evidenced by written agreements or contracts that have been signed and dated by all parties; and

ii. a nursing facility shall accept only the number of residents for which it is licensed unless prior written approval has been secured from the department or if the nursing facility is acting as an evacuation site during a declared or non-declared emergency;

d. the policies and procedures for mandatory evacuations, which shall provide that if the state, parish, or local office of emergency preparedness (OEP) orders a mandatory evacuation of the parish or area in which the nursing facility is located, the nursing facility shall evacuate unless the nursing facility receives a written exemption from the ordering authority prior to the mandated evacuation;

e. a plan for monitoring emergency alerts or notifications, including weather warnings and watches, as well as evacuation orders from local and state emergency preparedness officials;

i. this monitoring plan shall identify the staff position who will perform the monitoring, what equipment will be used for monitoring, and who should be contacted if needed; and

ii. the nursing facility shall have plans for monitoring during normal daily operations and when sheltering in place or during evacuations;

f. the policies and procedures for the delivery of essential care and services to residents, whether the residents are housed in the nursing facility, at an off-site location, or when additional residents are housed in the nursing facility during an emergency;

g. the policies and procedures for inspection by the nursing facility, for any damage to its entire facility during and post-event;

h. the provisions for the management of staff, including sufficient and competent staffing, and the distribution and assignment of staff responsibilities and

functions, either within the nursing facility or at another location;

i. an executable plan for coordinating transportation services that are sufficient to accommodate the resident census and staff. The vehicles required for evacuating residents to another location shall be equipped with temperature controls. The plan shall include the following information:

i. a system to identify residents who require specialized transportation and medical needs, including the number of residents who will be classified as:

(a). red—high risk residents who will need to be transported by advanced life support ambulance due to dependency on mechanical or electrical life sustaining devices or very critical medical condition;

(b). yellow—residents who are not dependent on mechanical or electrical life sustaining devices, but cannot be transported using normal means (buses, vans, cars), and may need to be transported by a BLS ambulance. However, in the event of inaccessibility of medical transport, buses, vans, or cars may be used as a last resort; or

(c). green—residents who need no specialized transportation and may be transported by car, van, bus, or wheelchair accessible transportation;

j. a copy of the primary and secondary written transportation agreements for the evacuation of residents and staff that is signed and dated by all parties. Vehicles that are owned by, or are at the disposal of the nursing facility, shall have written usage agreements that are signed, dated and shall include verification of ownership, which shall include a copy of the vehicle's title or registration and the following information:

i. the number and type of vehicles;

ii. the capacity of each vehicle;

iii. a statement that each vehicle is equipped with temperature controls; and

iv. a statement that each vehicle is in good working condition;

k. policies and procedures outlining how the facility will prevent and treat heat-related medical illnesses due to the failure of temperature controls or due to other circumstances during transport;

l. the nursing facility's procedures for notifying the evacuation host site(s) local OEP, and the resident's family, legal representative or designated contact, and the department when the facility initiates its evacuation plan. The nursing facility shall have a staff position designated who is responsible for generating and documenting all attempts of notifications to the local OEPs, resident's family or responsible representative, and the department.

m. policies and procedures to ensure that an identification is directly attached to the nursing facility resident. The nursing facility shall designate a staff position to be responsible for this procedure and documentation. This identification shall remain directly attached to the resident during all phases of an evacuation and shall include, but not be limited to, the following information:

i. current and active diagnosis;

ii. medications, including dosage and times administered;

iii. allergies;

iv. special dietary needs or restrictions;

v. advanced directive, if applicable; and

vi. next of kin or responsible party, including contact information and relationship to resident;

n. policies and procedures, as well as a designated staff position who is responsible for ensuring, documenting, and certifying that a sufficient supply of the following items accompanies residents on buses or other transportation during all phases of an evacuation:

i. water;

ii. food;

iii. nutritional supplies and supplements;

iv. medication(s); and

v. other necessary supplies;

o. staffing patterns for evacuation and the procedures for ensuring that all residents have access to licensed nursing staff and that appropriate nursing services are being provided during all phases of the evacuation, including transport of residents. For buses or vehicles transporting 15 or more residents, licensed nursing staff shall accompany the residents on the bus or vehicle. A licensed therapist who is BLS certified, or paramedic, may substitute for licensed nursing staff;

p. a plan for sheltering in place if the nursing facility determines that sheltering in place is appropriate, which shall include:

i. policies and procedures to ensure that seven days of necessary supplies are on hand for the duration of the shelter in place, or including any written agreements, with timelines, for how supplies will be delivered prior to the emergency event. The plan shall include a staff position responsible for ensuring and documenting that the necessary supplies are available. Supplies shall include, but are not limited to:

(a). drinking water or fluids, a minimum of one gallon per day, per person;

(b). water for sanitation, a minimum of three gallons per day, per person;

(c). non-perishable food, including special diets;

(d). medications;

(e). medical supplies;

(f). personal hygiene supplies; and

(g). sanitary supplies;

ii. policies and procedures for maintaining and posting a communications plan for contacting emergency services. The nursing facility shall designate a staff position to be responsible for documenting and contacting emergency services. The communication plan shall include:

(a). the type of equipment to be used;

(b). back-up equipment to be used if available;

(c). the equipment's testing schedule; and

(d). the power supply for the equipment being used;

iii. policies and procedures addressing the supply of emergency electrical power, including but not limited to a generator, in instances when primary electrical power in the nursing home is lost, but evacuation from the nursing home is not required. The plan shall include the type(s), size(s) and location(s) of the generator(s), if applicable. Such plan shall also include a statement indicating whether the nursing facility has a generator for sheltering in place. If the nursing facility has such a generator, the plan shall provide for fuel, either on hand or delivered prior to the emergency event.

Such nursing facilities shall have fuel delivery agreements in place that will extend the uninterrupted operation of the generator or alternative electrical power source under full load to a total period of 168 hours for a single emergent event. Nursing facilities may interrupt operation of the generator or alternative electrical power source to conduct routine maintenance as recommended by manufacturer's specifications. If the nursing facility has such a generator, the plan shall also provide a list of the generator's capabilities including:

(a). its ability to provide cooling or heating for all or designated areas in the nursing facility;
(b). its ability to power an Office of Public Health (OPH)-approved sewerage system;
(c). its ability to power an OPH-approved water system;

(d). its ability to power medical equipment;
(e). its ability to power refrigeration;
(f). its ability to power lights; and
(g). its ability to power communications;
iv. an assessment of the nursing facility's building to include, but not be limited to:
(a). wind load or ability to withstand wind;
(b). flood zone and flood plain information;
(c). possible causes and probability of power failure;
(d). age of building and type of construction; and
(e). determinations of, and locations of interior safe zones;

v. policies and procedures for preventing and treating heat related medical illnesses due to the failure of or the lack of air conditioning, or due to other circumstances, while sheltering in place;

vi. staffing patterns for sheltering in place and for evacuation;

q. the nursing facility's location, physical street address with longitude and latitude, and current nursing facility contact information;

r. a risk assessment to determine the nursing facility's physical integrity. The physical integrity of the nursing facility and all relevant and available information shall be used in determining whether sheltering in place is appropriate. All elevations shall be given in reference to sea level or adjacent grade, as appropriate. If the facility has an unlicensed sheltering site(s) as an evacuation location, it shall also perform a risk assessment of each unlicensed sheltering site. The assessment(s) shall be reviewed annually and updated as necessary. The risk assessment shall include the nursing facility's determinations and the following information:

i. the nursing facility's latitude and longitude as well as the latitude and longitude for any unlicensed sheltering site;

ii. the flood zone determination for the nursing facility and any unlicensed sheltering site and base flood elevation for each, and the nursing facility shall evaluate how these factors will affect the building(s);

iii. the elevations of the building(s), heating ventilation and air conditioning (HVAC) system(s), generator(s), fuel storage, electrical service, water system and sewer motor. If applicable, the nursing facility shall

evaluate how these factors will affect the viability of a site considering projected flood and surge water depths;

iv. an evaluation of the building to determine its ability to withstand wind and flood hazards to include:

- (a). the construction type and age;
- (b). the roof type and wind load;
- (c). the windows, shutters, and wind load;
- (d). the wind load of shelter building; and
- (e). the location of interior safe zones;

v. an evaluation of each generator's fuel source(s), including refueling plans, fuel consumption rate and a statement that the output of the generator(s) will meet the electrical load or demand of the required (or designated) emergency equipment;

vi. the determinations based upon an evaluation of surroundings, including lay-down hazards or objects that could fall on the building and hazardous materials, such as:

- (a). trees;
- (b). towers;
- (c). storage tanks;
- (d). other buildings;
- (e). pipe lines;
- (f). chemical and biological hazards; and
- (g). fuels;

vii. the sea, lake and overland surge from hurricanes (SLOSH) modeling using the maximum's of the maximum envelope of waters (MOM) for the nursing facility's specific location and the findings for all categories of hurricanes. The nursing facility's plan shall include an evaluation of how this will or will not affect the nursing facility;

s. the nursing facility's plan shall provide for an evaluation of security risks and corresponding security precautions that will be taken for protecting residents, staff and supplies during and after an emergency event;

t. the nursing facility's plan shall include clearly labeled and legible floor plan(s) of the nursing facility's building(s). The nursing facility's plan shall include the following:

- i. the areas being used as shelter or safe zones;
- ii. the supply and emergency supply storage areas;
- iii. the emergency power outlets;
- iv. the communications center;
- v. the location of the posted emergency floor plan, which shall be easily accessible to staff; and
- vi. a pre-designated command post.

2. – 17.f. Repealed.

D. Unlicensed Sheltering Sites

1. Additional plan requirements for unlicensed sheltering sites shall include documentation of the following for review and approval:

a. a detailed floor plan of the sheltering site, which shall include the bed layout of the sleeping area, and copies of any contracts or documentation related to the unlicensed shelters;

b. required approvals from the OSFM and the OPH as a shelter site;

c. a covered area at the entrance of the building to afford protection from the weather;

d. adequate parking area for transportation needs;

e. adequate driveway(s) to allow for easy ingress and egress of transportation;

f. that building and equipment are maintained in good repair and free of hazards;

g. the accessibility for all occupants, including those in wheelchairs or on crutches in accordance with the Americans with Disabilities Act;

h. the installment of, or a contract to provide, an alternate power source onsite which shall be sufficient to power HVAC, lighting, refrigeration, and adequate power outlets with a minimum fuel supply for 72 hours;

i. contract(s) for fuel supply deliveries;

j. a designated area for isolation;

k. an operational HVAC that maintains a comfortable temperature;

l. adequate ventilation, i.e., facility well ventilated and free of air hazards (e.g., smoke, fumes, etc.);

m. adequate space per person in sleeping area, a minimum of 60 square feet per person;

n. a kitchen area that meets OPH requirements for meal preparation or a food service contract to provide at least three meals daily per person onsite;

o. contract(s) for waste removal, including but not limited to bio-hazard;

p. adequate onsite or contracted laundry services that shall have separate areas for soiled and clean laundry;

q. adequate onsite or contracted number of working hand-washing stations, minimum one per 15 persons;

r. adequate onsite or contracted number of permanently fixed and/or portable working toilets, minimum one per 20 persons;

s. adequate onsite or contracted number of permanently fixed and/or portable working showers/bathing facilities, minimum one per 15 persons.

2. For the requirements in D.1.q, r, and s in this Subsection, an environmental waiver for the unlicensed shelter site may be granted, at the discretion of the department, if the department determines that the waiver does not jeopardize the health, safety, and welfare of the evacuated facility's residents. The facility must submit a request in writing which must include the following:

i. which specific environmental requirement waiver is being requested and why;

ii. how the facility plans to mitigate their inability to meet the requirement; and

iii. an explanation as to why the environmental requirement waiver would not endanger the health, safety, and welfare of the evacuated facility's residents.

3. On an annual basis, the department, in conjunction with the OSFM and other entities, shall inspect and survey unlicensed sheltering sites identified in nursing home emergency preparedness plans. Any refusal by an unlicensed sheltering site to allow an inspection or survey of the site by the department may result in rejection of the unlicensed sheltering site, and the emergency preparedness plan as a whole. If such a refusal to allow an inspection or survey occurs when nursing home residents are being sheltered at the site, the facility shall cooperate with the department for orderly evacuation of residents and staff. The department may revoke the license of the nursing home that refuses to allow an inspection or survey.

4. If any unlicensed sheltering site is located outside of Louisiana, including nursing homes, the OSFM and the department shall coordinate with their state agency counterparts in the state in which the site is located for inspection, review, approval, and surveys of the site.

5. The local OEP of the parish in which an unlicensed sheltering site is located shall inspect the site prior to October 15, 2022, and annually thereafter. The office shall inspect any new unlicensed sheltering site identified after May 31, 2023, in a nursing home emergency preparedness plan within 30 days of receiving the plan and annually thereafter, as required by statute. The local OEP may inspect the unlicensed sheltering site at such other times as the director of the local OEP deems necessary or appropriate.

E. Emergency Preparedness Notifications and Reports

1. A nursing facility shall enter current nursing facility information into the current department emergency preparedness webpage or electronic database for reporting.

a. The following information shall be entered or updated into the current department emergency preparedness webpage or electronic database for reporting before the fifteenth day of each month:

i. operational status;

ii. current census and number of licensed beds;

iii. emergency contact and evacuation location(s);

iv. emergency evacuation transportation needs categorized by the following types:

(a). number of red—high risk residents who will need to be transported by advanced life support ambulance due to dependency on mechanical or electrical life sustaining devices or very critical medical condition;

(b). number of yellow—residents who are not dependent on mechanical or electrical life sustaining devices, but cannot be transported using normal means (buses, vans, cars), may need to be transported by a basic life support (BLS) ambulance. However, in the event of inaccessibility of medical transport, buses, vans, or cars may be used as a last resort; or

(c). number of green—residents who need no specialized transportation and can be transported by car, van, bus, or wheelchair accessible transportation.

b. A nursing facility shall also enter or update the nursing facility's information upon request, or as required following notification of an emergency declared by the secretary. Emergency events include, but are not limited to hurricanes, floods, fires, chemical or biological hazards, power outages, tornados, tropical storms, freezing temperatures, and other severe weather.

c. Upon notification of a declared emergency, and as required by the department, nursing facilities shall file an electronic report on the current department emergency preparedness webpage or electronic database for reporting.

i. the electronic report shall be filed as required by the department, but at least daily, throughout the duration of the emergency declaration.

ii. the electronic report shall include, but not be limited to, the following:

(a). status of operation;

(b). availability of beds;

(c). generator status;

(d). evacuation status;

- (e). shelter in place status;
- (f). utility status; and
- (g). other information requested by the department.

iii. the electronic report shall not be used to request resources.

F. Emergency Plan Activation

1. Shelter in Place

a. A shelter in place notification shall be sent within one hour of the facility's decision to shelter in place to the local OEP where the provider is located and to the department.

b. A shelter in place notification shall be sent to the resident's family, or responsible representative as far in advance as possible, but at least within 12 hours of the determination.

2. Evacuation and Temporary Relocation

a. The following applies to any nursing facility that evacuates, temporarily relocates or temporarily ceases operation at its licensed location due to an emergency:

i. the nursing facility shall immediately give written notice to HSS by hand delivery, facsimile or electronically of the following information:

(a). the date and approximate time of the evacuation;

(b). the sheltering evacuation site(s) to which the nursing facility is evacuating; and

(c). a list of residents being evacuated, which shall indicate the evacuation site for each resident;

ii. the evacuation sites' local OEP shall be provided the following within one hour of the decision to evacuate:

(a). the contact name and the telephone number that the evacuation sites' local OEP can call for information regarding the nursing facility's evacuation;

(b). the number of residents being evacuated to that location(s);

(c). the date and approximate time that the nursing facility is evacuating, and date and approximate time of arrival to the location(s);

(d). the site place or location to which the nursing facility is evacuating, including the:

(i). name of the site(s);

(ii). address(es); and

(iii). telephone number(s).

iii. an evacuation notification shall also be sent to the resident's family, or responsible representative, and made as far in advance as possible, but at least within 12 hours of the determination to evacuate or after evacuation when communication is available. The notifications shall include:

(a). a telephone number that the family, or responsible representative, can call for information regarding the nursing facility's evacuation;

(b). name of the site(s); and

(c). address(es).

iv. the nursing facility shall notify the department within one hour of its decision regarding whether the nursing facility's residents will return to its licensed location from an unlicensed sheltering site, be placed in alternate licensed nursing facility beds, or request an extension to remain at the unlicensed sheltering site;

v. the nursing facility shall notify the current HSS emergency preparedness manager, or designee, as well as, the local OEP of the parish(es) in which nursing facility residents will be relocated to. Included in this notice, the nursing facility shall provide HSS with a list of all residents' names, dates of birth, and their locations within 48 hours of the decision to relocate from the unlicensed sheltering site.

vi. upon receipt of a nursing facility evacuation notification that includes unlicensed sheltering site(s), HSS and the OPH shall immediately conduct a site visit at the unlicensed sheltering site unless time, weather conditions, or other factors do not allow for such visit. The department may conduct onsite inspections of the unlicensed shelter site at any time deemed necessary or appropriate by the secretary of the department. If deemed to be necessary, HSS will conduct daily on-site visits while the unlicensed shelter site is occupied. The department's authority to conduct such visits will be in accordance with its authority to conduct onsite surveys of the nursing home, regardless of location.

3. In the event that a nursing facility evacuates, temporarily relocates or temporarily ceases operations at its licensed location due to an emergency event, the nursing facility shall be allowed to remain at an unlicensed sheltering site for a maximum of five days. A nursing facility may request one 15 day extension, not to exceed a total of 20 days to remain at the unlicensed sheltering site.

a. By noon on the fifth day of evacuation, the nursing facility shall submit a written request for extension to HSS if it desires to remain at the unlicensed sheltering site. The request shall include the reasons that the facility is unable to return to their facility and why their residents cannot be placed in an alternate nursing facility(ies). The request shall also include a written plan with timeline to either return residents to the licensed location or be placed in an alternate nursing facility(ies) within the extension period requested, if such is granted.

b. The extension shall only be granted for good cause shown and for circumstances beyond the control of the nursing facility. If extension is not granted, the facility must cooperate with the department for an orderly evacuation of residents and staff to the alternate location.

c. This extension shall be granted only if essential care and services to residents are ensured to continue at the current sheltering facility.

d. Upon expiration of the five days or upon expiration of the written extension granted to the nursing facility, all residents shall be relocated to a nursing facility and HSS, and the local OEP shall be informed of the residents' new location(s).

G. Reopening of Nursing Facility and Repatriation of Residents

1. The evacuated nursing facility shall conduct and document an inspection of their entire facility for damages prior to submitting a written request to HSS to reopen at the licensed location. That request shall include:

a. damage report;

b. extent and duration of any power outages;

c. re-entry census;

d. staffing availability; and

e. information regarding access to the community service infrastructure, such as hospitals, transportation,

physicians, professional services, and necessary supplies, such as food, water, medical supplies, and medications.

2. Upon receipt of a reopening request, the department shall review and determine if reopening will be appropriate. The department may request additional information from the nursing facility as necessary to make determinations regarding reopening.

3. After review of all documentation, the department shall issue a notice of one of the following determinations:

- a. approval of reopening without survey;
- b. surveys required before approval to reopen will be granted. This may include surveys by the OPH, OSFM, and HSS; or
- c. denial of reopening.

H. After Action Written Summary

1. Upon request by the department, the nursing facility shall submit a written summary attesting how the nursing facility's emergency preparedness plan was followed and executed. The initial summary shall contain, at a minimum:

- a. pertinent plan provisions and how the plan was followed and executed;
 - i. – iii. Repealed.
- b. plan provisions that were not followed;
- c. reasons and mitigating circumstances for failure to follow and execute certain plan provisions;
- d. contingency arrangements made for those plan provisions not followed; and
 - i. – vi. Repealed.
- e. a list of all injuries and deaths of residents that occurred during execution of the plan, evacuation and temporary relocation including the date, time, causes, and circumstances of the injuries and deaths.

2. – 5.e. Repealed.

I. Inactivation of License Due to Declared Disaster or Emergency

1. A nursing facility in an area or areas that has been affected by a declared disaster or emergency and included in an executive order or proclamation of emergency or disaster issued in accordance with R.S. 29:724 or R.S. 29:766 may seek to inactivate its license for a period not to exceed two years, provided that the following conditions are met:

- a. the nursing facility shall submit written notification to HSS within 60 days of the date of the executive order or proclamation of emergency or disaster that:
 - i. the nursing facility has experienced an interruption in the delivery of services at its licensed facility as a result of events that are the subject of such executive order or proclamation of emergency or disaster issued in accordance with R.S. 29:724 or R.S. 29:766;
 - ii. the nursing facility intends to resume operation as a nursing facility in the same service area;
 - iii. includes an attestation that the emergency or disaster is the sole causal factor in the interruption of the provision of services; and
 - iv. pursuant to these provisions, an extension of the 60-day deadline may be granted at the discretion of the department;

b. the nursing facility resumes operating as a nursing facility in the same service area within two years of issuance of an executive order or proclamation of emergency or disaster in accordance with R.S. 29:724 or R.S. 29:766, unless an extension has been granted;

i. a nursing facility may request one extension, not to exceed an additional one year for good cause shown by the facility. This request for an extension may be granted at the sole discretion of the department;

c. the nursing facility continues to pay all fees and costs due and owed to the department including, but not limited to annual licensing fees and outstanding civil monetary penalties and/or civil fines; and

d. the nursing facility continues to submit required documentation and information to the department, including but not limited to cost reports.

e. Repealed.

2. Upon receiving a completed written request to inactivate a nursing facility license, if the department determines that all of the requirements have been met, the department shall issue a notice of inactivation of license to the nursing facility.

3. Upon completion of repairs, renovations, rebuilding or replacement of the facility, a nursing facility, which has received a notice of inactivation of its license from the department, shall be allowed to reinstate its license upon the following conditions being met:

a. the nursing facility shall submit a written license reinstatement request to HSS within two years of the executive order or proclamation of emergency or disaster issued in accordance with R.S. 29:724 or R.S. 29:766, unless an extension has been granted;

b. the license reinstatement request shall inform the department of the anticipated date of opening and shall request the scheduling of a licensing survey; and

c. the license reinstatement request shall include a completed licensing application with appropriate licensing fees.

4. Upon receiving a completed written request to reinstate a nursing facility license, the department shall conduct a licensing survey. If the nursing facility meets the requirements for licensure and the requirements provided for in Paragraph I.3 above, the department shall issue a notice of reinstatement of the nursing facility license. The licensed bed capacity of the reinstated license shall not exceed the licensed bed capacity of the nursing facility at the time of the request to inactivate the license.

5. No change of ownership in the nursing facility shall occur until such nursing facility has completed repairs, renovations, rebuilding, or replacement construction and has resumed operations as a nursing facility.

6. The provisions of this Subsection shall not apply to a nursing facility that has voluntarily surrendered its license and ceased operation.

7. Failure to comply with any of the provisions of this Subsection shall be deemed a voluntary surrender of the nursing facility license.

J. Inactivation of License Due to Non-Declared Emergency or Disaster

1. A nursing facility in an area or areas that have been affected by a non-declared emergency or disaster may seek to inactivate its license, provided that the following conditions are met:

a. the nursing facility shall submit written notification to the HSS within 30 days of the date of the non-declared emergency or disaster stating that:

i. the nursing facility has experienced an interruption in the provisions of services as a result of events that are due to a non-declared emergency or disaster;

ii. the nursing facility intends to resume operation as a nursing facility in the same service area;

iii. the nursing facility attests that the emergency or disaster is the sole causal factor in the interruption of the provision of services;

iv. the nursing facility's initial request to inactivate does not exceed two years from the date of the non-declared emergency or disaster for the completion of repairs, renovations, rebuilding, or replacement of the facility; and

v. pursuant to these provisions, an extension of the 30 day deadline for initiation of request may be granted at the discretion of the department.

b. the nursing facility continues to pay all fees and costs due and owed to the department including, but not limited to, annual licensing fees and outstanding civil monetary penalties and/or civil fines;

c. the nursing facility continues to submit required documentation and information to the department, including but not limited to cost reports, and;

d. if major alterations are to be completed in areas where beds have been placed in alternate use, those beds shall be removed from alternate use and relicensed and re-enrolled as nursing facility beds at the time of request.

2. Upon receiving a completed written request to temporarily inactivate a nursing facility license, the department shall issue a notice of inactivation of license to the nursing facility.

3. Upon the facility's receipt of the department's approval of request to inactivate the facility's license, the facility shall have 90 days to submit plans for the repairs, renovations, rebuilding, or replacement of the facility to the OSFM and the OPH, as required.

4. The nursing facility shall resume operating as a nursing facility in the same service area within two years from the non-declared emergency or disaster, unless an extension has been granted.

5. A nursing facility may request one extension, not to exceed an additional six months for good cause shown by the facility. This request for an extension may be granted at the sole discretion of the department.

6. Upon completion of repairs, renovations, rebuilding, or replacement of the facility, a nursing facility that has received a notice of inactivation of its license from the department shall be allowed to reinstate its license upon the following conditions being met:

a. the nursing facility shall submit a written license reinstatement request to HSS;

b. the license reinstatement request shall inform the department of the anticipated date of opening and shall request scheduling of a licensing survey; and

c. the license reinstatement request shall include a completed licensing application with appropriate licensing fees.

7. Upon receiving a completed written request to reinstate a nursing facility license, the department may conduct a licensing survey. The department may issue a notice of reinstatement if the facility has met the requirements for licensure including the requirements of this Subsection. The licensed bed capacity of the reinstated license shall not exceed the licensed bed capacity of the nursing facility at the time of the request to temporarily inactivate the license.

8. No change of ownership in the nursing facility shall occur until such nursing facility has completed repairs, renovations, rebuilding or replacement construction and has resumed operations as a nursing facility.

9. The provisions of this Subsection shall not apply to a nursing facility that has voluntarily surrendered its license and ceased operation.

10. Failure to comply with any of the provisions of this Subsection shall be deemed a voluntary surrender of the nursing facility license.

K. Temporary Inactivation of Licensed Nursing Facility Beds Due to Major Alterations

1. A nursing facility, which is undergoing major alterations to its physical plant, may request a temporary inactivation of a certain number of licensed beds provided that:

a. the nursing facility submits a written request to HSS seeking temporary inactivation of a certain number of its licensed bed capacity. Such written request shall include the following:

i. that the nursing facility has experienced or will experience a temporary interruption in the provision of services to its licensed bed capacity as a result of major alterations;

ii. an attestation that the renovations are the sole causal factor in the request for temporary inactivation of a certain number of its licensed beds;

iii. the anticipated start date of the temporary inactivation of a certain number of licensed beds;

NOTE: Repealed.

iv. the anticipated end date of the temporary inactivation of a certain number of licensed beds; and

v. the number of licensed beds requested to be inactivated temporarily;

b. the nursing facility ensures the health, safety, and welfare of each resident during the major alterations;

i. Repealed.

c. the nursing facility continues to provide, and each resident continues to receive, the necessary care and services to attain or maintain the resident's highest practicable physical, medical and psychosocial well-being, in accordance with each resident's comprehensive assessment and plan of care; and

d. if major alterations are to be completed in areas where beds have been placed in alternate use, those beds shall be removed from alternate use and relicensed and re-enrolled as nursing facility beds at the time of request.

2. Upon receiving a completed written request for temporary inactivation of a certain number of the licensed

bed capacity of a nursing facility, if appropriate the department shall issue a notice of temporary inactivation of a certain number of the nursing facility's licensed beds.

3. No change of ownership in the nursing facility shall occur until such nursing facility has completed the major alterations and has resumed operating at prior approved licensed bed capacity.

a. – c. Repealed.

4. Upon completion of the major alterations and receiving a completed written request to reinstate the number of licensed beds of a nursing facility, the department may conduct a licensing survey. If the nursing facility meets the requirements for licensure and the requirements under this Subsection, the department may issue a notice of reinstatement of the nursing facility licensed bed capacity.

5. The licensed bed capacity after major alterations are completed shall not exceed the licensed bed capacity of the nursing facility at the time of the request to temporarily inactivate a certain number of its licensed bed capacity prior to renovations.

6. The provisions of this Subsection shall not apply to a nursing facility that has voluntarily surrendered its license and ceased operation.

K.7. – M.5. Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and 40:2009.1-2009.44.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 42:1905 (November 2016), amended LR 49:1290 (May 2022), LR 49:

Chapter 99. Nursing Facilities

Subchapter B. Physical Environment

§9911. General Provisions

A. – D. ...

E. No later than June 30, 2023, nursing facilities shall have a generator or other department approved alternate electrical power source in the event of the loss of primary electrical power. The department may grant a one-time extension, not to exceed six months, upon written application by a nursing facility that compliance has been delayed due to extraordinary and unforeseen circumstances. No extension shall be granted if the nursing facility fails to provide sufficient evidence of substantial compliance or good faith efforts to comply with the requirement deadline.

1. The generator or alternate electrical power source shall have a simultaneous capability of providing sufficient electrical power for all of the following:

- a. life safety systems;
- b. lighting in patient care areas;
- c. medical equipment in patient care areas;
- d. electrical components of the approved potable water system;
- e. electrical components of the approved sewer systems;
- f. operation of the nursing facility's medication dispensing and medication refrigeration systems;
- g. operation of the nursing facility's dietary services and related refrigeration; and
- h. operation of the nursing facility's laundry services.

2. For nursing facilities built or whose construction plans have been approved by the department:

a. prior to August 1, 2022, HVAC systems or portions of systems are required to maintain a safe indoor temperature and to be powered at a minimum 50 percent of the air conditioning systems and 50 percent of the heating systems in the facility.

b. on or after August 1, 2022, HVAC systems or portions of systems are required to maintain a safe indoor temperature and to be powered at a minimum 90 percent of the air conditioning systems and 90 percent of the heating systems in the facility.

3. The generator or alternate electrical power source shall be permanently installed onsite at the nursing facility and shall have fuel stored onsite at the nursing facility or delivered prior to an emergency event, in the following quantities:

a. for nursing facilities built or whose construction plans have been approved by the department prior to August 1, 2022, in an amount sufficient to operate the generator or alternative electrical power source under full load for 48 hours.

b. for nursing facilities approved for construction and built on or after August 1, 2022, in an amount sufficient to operate the generator or alternative electrical power source under full load for 72 hours.

4. Natural gas is an allowable fuel source and meets the onsite fuel requirement as long as there is an onsite propane tank sufficient in size to meet the fuel requirements, in the event a natural gas disruption occurs.

5. For nursing facilities built or whose construction plans have been approved by the department prior to August 1, 2022, the department may provide a waiver for the permanently installed generator or alternative electrical power source required by this Subsection if it is determined by the department that there is not sufficient physical space available or a governmental ordinance exists that makes it impossible to place a generator or alternative electrical power source and the fuel required by this Subsection on the premises of the nursing facility. Each nursing facility that receives a waiver pursuant to this Paragraph shall annually submit to the department for review and approval a plan to provide for the health and safety of the facility's residents in the event of power loss. The annual plan may incorporate, but is not limited to mobile generators, chillers, or evacuation.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and 40:2009.1-2009.44.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 42:1926 (November 2016), amended LR 49:

Interested persons may submit written comments to Tashka Dukes, RN, Health Standards Section, P.O. Box 3767, Baton Rouge, LA 70821. Ms. Dukes is responsible for responding to inquiries regarding this Emergency Rule. A copy of this Emergency Rule is available for review by interested parties at parish Medicaid offices.

Dr. Courtney N. Phillips
Secretary

2212#004

DECLARATION OF EMERGENCY

Department of Wildlife and Fisheries Wildlife and Fisheries Commission

2022 Commercial and Recreational Lane Snapper Season Closure

Louisiana's commercial and recreational lane snapper season was previously opened on January 1, 2022. The regional administrator of NOAA Fisheries has informed the secretary that the 2022 commercial and recreational seasons for the harvest of lane snapper in the federal waters of the Gulf of Mexico will close November 15, 2022. Data indicate that the 2022 annual catch limit of 1,028,973 pounds has been projected to be met by that date. Compatible season regulations in state waters are preferable to provide effective rules and efficient enforcement for the fishery, and to prevent overfishing of the species in the long term.

In accordance with the emergency provisions of R.S. 49:962, which allows the Department of Wildlife and Fisheries and the Wildlife and Fisheries Commission to use emergency rules to set finfish seasons, R.S. 56:326.3 which provides that the Wildlife and Fisheries Commission may set seasons for saltwater finfish, and the authority given to the secretary by the commission in LAC 76:VII.335.G.5 to modify opening and closing dates of any commercial or recreational reef fish seasons in Louisiana state waters when he is informed by the regional administrator of NOAA fisheries that the seasons have been closed in adjacent federal waters, the secretary hereby declares:

The seasons for the commercial and recreational harvest of lane snapper in Louisiana state waters shall close at 12:01 a.m. on November 21, 2022 and shall remain closed until the start of the 2023 recreational and commercial seasons, currently scheduled to open on January 1, 2023. Effective with this closure, no person shall recreationally harvest or possess lane snapper whether within or without Louisiana waters. Furthermore, no person shall commercially harvest, possess, purchase, barter, trade, sell or attempt to purchase, barter, trade or sell lane snapper whether within or without Louisiana waters. Nothing shall prohibit the possession or sale of fish legally taken prior to the closure providing that all commercial dealers possessing lane snapper taken legally prior to the closure shall maintain appropriate records in accordance with R.S. 56:306.5 and R.S. 56:306.6.

Jack Montoucet
Secretary

2212#013

DECLARATION OF EMERGENCY

Department of Wildlife and Fisheries Wildlife and Fisheries Commission

2023 Commercial Large Coastal Sharks Daily Possession Limit Adjustment

Louisiana's commercial fishery for large coastal sharks (great hammerhead, scalloped hammerhead, smooth

hammerhead, nurse shark, blacktip shark, bull shark, lemon shark, sandbar shark, silky shark, spinner shark, and tiger shark) is scheduled to open on January 1, 2023 with a daily possession limit of 55 sharks, combined, for all large coastal sharks. The National Oceanic and Atmospheric Administration (NOAA) Fisheries has informed the secretary that the daily possession limit for the commercial harvest of large coastal sharks will be 55 daily during the 2023 season. The state limit is currently 45 sharks daily.

In accordance with the emergency provisions of R.S. 49:962, which allows the Department of Wildlife and Fisheries and the Wildlife and Fisheries Commission to use emergency rules to set finfish seasons, R.S. 56:326.3 which provides that the Wildlife and Fisheries Commission may set seasons for saltwater finfish, and the authority given to the secretary by the commission in LAC 76:VII.357.H.2 to modify commercial large coastal shark possession limits if notified by NOAA Fisheries of such an adjustment, the secretary hereby declares:

Effective 12:01 a.m., January 1, 2023, the daily bag limit for the commercial harvest of large coastal sharks (great hammerhead, scalloped hammerhead, smooth hammerhead, nurse shark, blacktip shark, bull shark, lemon shark, sandbar shark, silky shark, spinner shark, and tiger shark) shall be 55 sharks per day until further notice. Persons harvesting large coastal sharks commercially may not possess sandbar sharks unless they also have in their name and in possession a valid federal shark research permit under 50 CFR 635.32(1).

Jack Montoucet
Secretary

2212#036

DECLARATION OF EMERGENCY

Department of Wildlife and Fisheries Wildlife and Fisheries Commission

Statewide Recreational Creel Limits on Spring Bayou, Avoyelles Parish

The Wildlife and Fisheries Commission acted through a Declaration of Emergency on September 1, 2022 to reduce the daily recreational creel limits of freshwater fish in Spring Bayou, Avoyelles Parish for the time period of September 6, 2022 to December 31, 2022 to protect sportfish populations during a drawdown. The drawdown is complete and the water level has returned to pool stage; therefore, the temporary reduction is no longer necessary.

In accordance with the emergency provisions of R.S. 49:962, which allows the Wildlife and Fisheries Commission to employ emergency procedures pursuant to the adoption of a rule, and under the authority of R.S. 56:6(25)(a) and R.S. 56:325(C), which provides that the Wildlife and Fisheries Commission may set recreational daily take limits, possession limits, and seasons for freshwater fish, and under the authority of a Declaration of Emergency passed by the Wildlife and Fisheries Commission on September 1, 2022, which authorized the Secretary of the Department of Wildlife and Fisheries to reinstate the statewide recreational

daily creel limit for all freshwater fish species on Spring Bayou in Avoyelles Parish, Louisiana as necessary prior to December 31, 2022, the statewide daily creel limit for all freshwater fish species on Spring Bayou in Avoyelles Parish, Louisiana are hereby reinstated at 12 a.m. on December 7, 2022.

Jack Montoucet
Secretary

2212#014

Rules

RULE

Department of Environmental Quality Office of the Secretary Legal Affairs and Criminal Investigations Division

X-Rays in the Healing Arts (LAC 33:XV.Chapter 6)(RP068)

Under the authority of the Environmental Quality Act, R.S. 30:2001 et seq., and in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq., the secretary has amended the Radiation Protection regulations, LAC 33:XV.602, 603, 604, 605, 606, 607, 610, 611, and 699 (RP068).

The Rule updates the radiation regulations pertaining to X-rays in the healing arts. This will more closely align the Louisiana regulations with current national standards. The changes in the state regulations are necessary to align with current manufacturer requirements and new X-ray technology and industry standards that have evolved over the last decade. The basis and rationale for this Rule are to enable the state to mirror other states' regulations and regulate the use of new X-ray technologies. This Rule meets an exception listed in R.S. 30:2019(D)(2) and R.S. 49:953(G)(3); therefore, no report regarding environmental/health benefits and social/economic costs is required. This Rule is hereby adopted on the day of promulgation.

Title 33

ENVIRONMENTAL QUALITY Part XV. Radiation Protection

Chapter 6. X-Rays in the Healing Arts

§602. Definitions

A. As used in this Chapter, the following definitions apply. Other definitions applicable to this Chapter may be found in LAC 33:XV.Chapters 1 and 2.

* * *

Air Kerma (K)—the kinetic energy released in air by ionizing radiation. Kerma is determined as the quotient of dE by dM, where dE is the sum of the initial kinetic energies of all the charged ionizing particles liberated by uncharged ionizing particles in air of mass dM. The SI unit of air kerma is joule per kilogram and the special name for the unit of kerma is the gray (Gy).

Air Kerma Rate (AKR)—air kerma per unit time.

Alert Value—a dose rate index (e.g. of CTDI_{vol}(mGy) or DLP(mGy-cm)) that is set by the registrant to trigger an alert to the CT operator prior to scanning within an ongoing examination. The alert value represents a universal dose index value well above the registrant's established range for the examination that warrants more stringent review and consideration before proceeding.

Aluminum Equivalent—the thickness of type 1100 aluminum alloy affording the same attenuation, under specified conditions, as the material in question.

Articulated Joint—a joint between two separate sections of a tabletop which joint provides the capacity of one of the sections to pivot on the line segment along which the sections join.

* * *

Attenuation Block—a block or stack of type 1100 aluminum alloy, or aluminum alloy having equivalent attenuation, with dimensions 20 centimeters or larger by 20 centimeters or larger by 3.8 centimeters, that is large enough to intercept the entire X-ray beam.

Automatic Exposure Control (AEC)—a device which automatically controls one or more technique factors in order to obtain at a preselected location(s) a required quantity of radiation (see also *Phototimer*).

Automatic Exposure Rate Control (AERC)—a device which automatically controls one or more technique factors in order to obtain, at a preselected location(s), a required quantity of radiation per unit time.

* * *

Bone Densitometer—a device intended for medical purposes to measure bone density and mineral content by X-ray or gamma ray transmission measurements through the bone and adjacent tissues. This generic type of device may include signal analysis and display equipment, patient and equipment supports, component parts, and accessories.

Bone Densitometry—a noninvasive measurement of certain physical characteristics of bone that reflect bone strength. Test results are typically reported as bone mineral content or density and are used for diagnosing osteoporosis, estimating fracture risk, and monitoring changes in bone mineral content.

* * *

Cantilevered Tabletop—a tabletop designed such that the unsupported portion can be extended at least 100 cm beyond the support.

Cassette Holder—a device, other than a spot-film device, that supports and/or fixes the position of the image receptor during a radiographic exposure.

* * *

Certified Components—components of X-ray systems that are certified by the U.S. Food and Drug Administration (FDA).

* * *

Coefficient of Variation or "C"—Repealed.

Coefficient of Variation (C)—the ratio of the standard deviation to the mean value of a population of observations. It is estimated using the following equation:

$$C = \frac{s}{\bar{x}} = \frac{1}{\bar{x}} \left[\frac{\sum_{i=1}^n (x_i - \bar{x})^2}{n - 1} \right]^{1/2}$$

where:

s = estimated standard deviation of the population;

\bar{x} = mean value of observations in sample;

x_i = i_{th} observation in sample; and

n = number of observations sampled.

Computed Radiography (CR; also see DR)—a digital X-ray imaging method in which a photostimulable phosphor

is used to capture and store a latent image. The latent image is read out by stimulating the phosphor with a laser. Computed radiography systems may use cassettes to house the phosphor, or it may be integrated into a digital radiography system.

Computed Tomography Dose Index (CTDI)—the average absorbed dose, along the z-axis, from a series of contiguous irradiations. It is measured from one axial CT scan (one rotation of the X-ray tube), and is calculated by dividing the integrated absorbed dose by the nominal total beam collimation. The scattering media for CTDI consist of two (16 and 32 cm in diameter) polymethylmethacrylate (PMMA, e.g., acrylic or Lucite) cylinders. The equation is:

$$CTDI = \frac{1}{NT} \int_{-\infty}^{\infty} D(z) dz$$

where:

$D(z)$ = the radiation dose profile along the z-axis;

N = the number of tomographic sections imaged in a single axial scan. This is equal to the number of data channels used in a particular scan. The value of N may be less than or equal to the maximum number of data channels available on the system; and

T = the width of the tomographic section along the z-axis imaged by one data channel. In multiple-detector-row (multislice) CT scanners, several detector elements may be grouped together to form one data channel. In single-detector-row (single-slice) CT, the z-axis collimation (T) is the nominal scan width.

$CTDI_{100}$ —the accumulated multiple scan dose at the center of a 100-mm scan and underestimates the accumulated dose for longer scan lengths. It is thus smaller than the equilibrium dose. The $CTDI_{100}$, requires integration of the radiation dose profile from a single axial scan over specific integration limits. In the case of $CTDI_{100}$, the integration limits are +50 mm, which corresponds to the 100-mm length of the commercially available “pencil” ionization chamber. $CTDI_{100}$ is acquired using a 100-mm long, 3-cc active volume CT “pencil” ionization chamber and one of the two standard CTDI acrylic phantoms (16 and 32 cm diameter) and a stationary patient table. The equation is:

$$CTDI_{100} = \frac{1}{NT} \int_{-50\text{mm}}^{50\text{mm}} D(z) dz$$

$CTDI_{vol}$ —see Volume Computed Tomography Dose Index ($CTDI_{vol}$)/

$CTDI_w$ —see Weighted Computed Tomography Dose Index ($CTDI_w$).

Cone Beam Computed Tomography (CBCT)—a volumetric imaging modality. Volumetric data are acquired using two dimensional digital detector arrays, and a cone-shaped (instead of fan-shaped) X-ray beam that rotates around the patient. Reconstruction algorithms can be used to generate images of any desired plane.

Contrast Scale—the change in the linear attenuation coefficient per CTN relative to water, that is:

$$CS = \frac{\mu_x - \mu_w}{(CTN)_x - (CTN)_w}$$

where:

μ_x = linear attenuation coefficient of the material of interest;

μ_w = linear attenuation coefficient of water;

$(CTN)_x$ = CTN of the material of interest; and

$(CTN)_w$ = CTN of water.

Control Panel—that part of the X-ray control upon which are mounted the switches, knobs, pushbuttons, keypads, touchscreens, and other hardware necessary for manually setting the technique factors.

Cradle—a removable device which supports and may restrain a patient above an X-ray table; or a device:

a. where patient support structure is interposed between the patient and the image receptor during normal use;

b. which is equipped with means for patient restraint; and

c. which is capable of rotation about its long (longitudinal) axis.

CS—see *Contrast Scale*.

CT—see *Computed Tomography*.

CT Conditions of Operation—all selectable parameters governing the operation of a CT X-ray system including, but not limited to, nominal tomographic section thickness, filtration, and the technique factors as defined in LAC 33:XV.602.

CT Gantry—the tube housing assemblies, beam-limiting devices, detectors, and the supporting structures and frames that hold these components.

CTN—see *CT Number*.

CT Number—the number used to represent the X-ray attenuation associated with each elemental area of the CT image. The equation is:

$$CTN = \frac{k(\mu_x - \mu_w)}{\mu_w}$$

where:

k = a constant. The constant has a normal value of 1,000 when the Hounsfield unit of CTN is used;

μ_x = linear attenuation coefficient of the material of interest; and

μ_w = linear attenuation coefficient of water.

Cumulative Air Kerma—the total air kerma accrued from the beginning of an examination or procedure and includes all contributions from fluoroscopic and radiographic irradiation.

Diagnostic Reference Level (DRL)—an investigational level used to identify unusually high radiation doses or dose rates for common medical X-ray imaging procedures. DRLs are suggested action levels above which a facility should review its methods and determine if acceptable image quality can be achieved at lower doses. DRLs should not be applied to an individual patient.

Digital Radiography (DR)—an X-ray imaging method (or radiography) which produces a digital rather than analog image. DR includes both computed radiography and direct digital radiography.

Direct Digital Radiography (DDR; also see CR and DR)—an X-ray imaging method in which a digital sensor, usually incorporating a thin-film transistor, is used to capture an X-ray image. Some DDR systems use a scintillator to convert X-rays to light and a photodiode array to convert light to charge, while others use a photoconductor to convert X-rays directly to charge, which is stored on the thin-film transistor.

Direct Scattered Radiation—that scattered radiation which has been deviated in direction only by materials irradiated by the useful beam. (See *Scattered Radiation*)

Direct Supervision—general supervision by a qualified practitioner present in the facility and immediately available to furnish assistance and direction throughout the performance of the procedure. It does not mean that the licensed practitioner shall be present in the room when the procedure is being performed.

Dose—the absorbed dose as defined by the International Commission on Radiation Units and Measurements. The absorbed dose, D , is the quotient of d_e by dm , where d_e is the mean energy imparted to matter of mass dm ; thus $D=d_e/dm$, in units of J/kg, where the special name of the unit of absorbed dose is gray (Gy).

Dose Area Product (DAP) (aka Kerma-Area Product (KAP))—the product of the air kerma and the area of the irradiated field and is typically expressed in Gy-cm², so it does not change with distance from the X-ray tube.

Dose Length Product (DLP)—the indicator of the integrated radiation dose from a complete CT examination. It addresses the total scan length by the formula:

$$DLP \text{ (mGy-cm)} = CTDI_{vol} \text{ (mGy)} \times \text{scan length (cm)}$$

Dose Profile—the dose as a function of position along a line.

Effective Dose (E)—the sum of the tissue-weighted equivalent doses for the radiosensitive tissues and organs of the body. It is given by the expression $E = \sum_T (w_T H_T)$, in which H_T is the equivalent dose in tissue or organ T and w_T is the tissue weighting factor for tissue or organ T . The unit of E and H_T is joule per kilogram (J/kg), with the special name sievert (Sv).

Elemental Area—the smallest area within a tomogram for which the X-ray attenuation properties of a body are depicted. (See also *Picture Element*)

Exposure (X)—the quotient of dQ by dm where "dQ" is the absolute value of the total charge of the ions of one sign produced in air when all the electrons and positrons liberated or created by photons in air of mass "dm" are completely stopped in air; thus $X=dQ/dm$, in units of C/kg. Exposure is also the process or condition during which the X-ray tube produces X-ray radiation.

Fluoroscopic Imaging Assembly—a subsystem in which X-ray photons produce a set of fluoroscopic images or radiographic images recorded from the fluoroscopic image receptor. It includes the image receptor(s), electrical interlocks, if any, and structural material providing linkage between the image receptor and diagnostic source assembly.

Fluoroscopic Irradiation Time—the cumulative duration during an examination or procedure of operator-applied continuous pressure to the device, enabling X-ray tube activation in any fluoroscopic mode of operation.

Fluoroscopically-Guided Interventional (FGI) Procedures—an interventional diagnostic or therapeutic procedure performed via percutaneous or other access routes, usually with local anesthesia or intravenous sedation, which uses external ionizing radiation in the form of fluoroscopy to localize or characterize a lesion, diagnostic site, or treatment site, to monitor the procedure, and to control and document therapy.

Fluoroscopy—a technique for generating X-ray images and presenting them simultaneously and continuously as visible images. This term has the same meaning as the term "radioscopy" in the standards of the International Electrotechnical Commission.

Focal Spot (actual)—the area projected on the anode of the X-ray tube bombarded by the electrons accelerated from the cathode and from which the useful beam originates.

General Supervision—supervision of a procedure under the overall direction and control of the qualified practitioner but who is not required to be physically present during the performance of the procedure.

Gonad Shield—Repealed.

Hand-Held X-Ray Equipment—X-ray equipment that is designed to be hand-held during operation.

Heat Unit—a unit of energy equal to the product of the peak kilovoltage, milliamperes, and seconds, i.e., kVp x mA x second.

Image Intensifier—a device, installed in its housing, that instantaneously converts an X-ray pattern into a corresponding light image of higher intensity.

Image Receptor—any device, such as a fluorescent screen, radiographic film, X-ray image intensifier tube, solid-state detector, or gaseous detector, that transforms incident X-ray photons either into a visible image or into another form that can be made into a visible image by further transformations. In those cases where means are provided to preselect a portion of the image receptor, the term *image receptor* shall mean the preselected portion of the device.

Isocenter—the center of the smallest sphere through which the beam axis passes when the equipment moves through a full range of rotations about its common center.

Kerma—a measurement defined by the International Commission on Radiation Units and Measurements. The kerma, K , is the quotient of dE_{tr} by dm , where dE_{tr} is the sum of the initial kinetic energies of all the charged particles liberated by uncharged particles in a mass dm of material; thus $K=dE_{tr}/dm$, in units of J/kg, where the special name for the unit of kerma is gray (Gy). When the material is air, the quantity is referred to as "air kerma."

Kerma-Area Product (KAP)—see *Dose Area Product*.

kVp—see *Peak Tube Potential*.

Last-Image Hold (LIH) Radiograph—an image obtained either by retaining one or more fluoroscopic images, which may be temporarily integrated, at the end of a fluoroscopic exposure or by initiating a separate and distinct

radiographic exposure automatically and immediately in conjunction with termination of the fluoroscopic exposure.

Lead Equivalent—the thickness of the material in question affording the same attenuation, under specified conditions, as lead.

Licensed Practitioner—a person licensed or otherwise authorized by law to practice medicine, dentistry, chiropractic, osteopathy or podiatry, or a licensed nurse practitioner, or physician assistant.

Medical Event—one or more of the criteria that are listed in LAC 33:XV.613 have occurred.

Mode of Operation—for fluoroscopic systems, a distinct method of fluoroscopy or radiography provided by the manufacturer and selected with a set of several technique factors or other control settings uniquely associated with the mode. The set of distinct technique factors and control settings for the mode may be selected by the operation of a single control. Distinct modes of operation include normal fluoroscopy (analog or digital), high-level control fluoroscopy, cineradiography (analog and digital), digital subtraction angiography, electronic radiography using the fluoroscopic image receptor, and photospot recording. In a specific mode of operation, certain system variables affecting kerma, AKR, or image quality, such as image magnification, X-ray field size, pulse rate, pulse duration, number of pulses, source-image receptor distance (SID), or optical aperture, may be adjustable or may vary; their variation per se does not comprise a mode of operation different from the one that has been selected.

Multiple Tomogram System—a computed tomography X-ray system that obtains X-ray transmission data simultaneously during a single scan to produce more than one tomogram.

Noise—the standard deviation of the fluctuations in CTN expressed as a percentage of the attenuation coefficient of water. Its estimate (S_n) is calculated using the following expression:

$$S_n = \frac{100 \times C \times S \times s}{\mu_w}$$

where:

CS = contrast scale;

μ_w = linear attenuation coefficient of water; and

s = estimated standard deviation of the CTN of picture elements in a specified area of the CT image.

Nominal Tomographic Section Thickness—the full width at half-maximum of the sensitivity profile taken at the center of the cross-sectional volume over which X-ray transmission data are collected.

PBL—see *Positive Beam Limitation*.

Personal Supervision—general supervision by a qualified practitioner present in the room or adjacent control area during the performance of the procedure.

Photostimulable Storage Phosphor (PSP)—a material used to capture and store radiographic images in computed radiography systems.

PID—see *Position Indicating Device*.

Picture Element—an elemental area of a tomogram.

Pitch—the table incrementation, in CT, per X-ray tube rotation, divided by the nominal X-ray beam width at isocenter.

Protected Area—an area shielded with primary or secondary protective barriers or an area removed from the radiation source such that the exposure rate within the area due to normal operating procedures and workload does not exceed any of the following limits:

- a. 2 milliroentgens (20 micro Gray) in any one hour;
- b. 100 milliroentgens (1 milli Gray) in any seven consecutive days; or
- c. 500 milliroentgens (5 milli Gray) in any one year.

Protective Apron—an apron made of radiation absorbing or lead equivalent materials used to reduce radiation exposure.

Protocol—a collection of settings and parameters that fully describe an examination.

Pulsed Mode—operation of the X-ray system such that the X-ray tube current is pulsed by the X-ray control to produce one or more exposure intervals of duration less than one-half second.

Qualified Expert—an individual who meets one of the following criteria:

- a. a qualified medical physicist;
- b. not board certified in the required subspecialty but with a graduate degree in medical physics, radiologic physics, physics, or other relevant physical science or engineering discipline from an accredited institution, and formal coursework in the biological sciences with at least one course in biology or radiation biology and one course in anatomy, physiology, or similar topics related to the practice of medical physics and three years of documented experience in a clinical CT environment (for purposes of CT evaluations), three years of documented experience in fluoroscopic environment (for purposes of fluoroscopic evaluations), or three years of documented experience in general radiographic environment (for purposes of general radiographic evaluations);
- c. grandfathered by having conducted surveys of at least three CT units between January 1, 2007, and January 1, 2010; or
- d. an individual approved by the department.

Qualified Medical Physicist (QMP)—an individual who meets each of the following credentials:

- a. has earned a master's and/or doctoral degree in physics, medical physics, biophysics, radiological physics, medical health physics, or equivalent disciplines from an accredited college or university; and
- b. has been granted certification in the specific subfield(s) of medical physics with its associated medical health physics aspects by an appropriate national certifying body and abides by the certifying body's requirements for continuing education.

Qualified Practitioner—an individual who is qualified by education, training, licensure/regulation (when applicable), and facility privileging (when applicable) who

performs a professional service within his/her scope of practice and independently reports that professional service.

Quality Assurance (QA)—a program providing for verification by written procedures such as testing, auditing, and inspection to ensure that deficiencies, deviations, defective equipment, or unsafe practices, or a combination thereof, relating to the use, disposal, management, or manufacture of radiation devices are identified, promptly corrected, and reported to the appropriate regulatory authorities as required.

Quality Control (QC)—the routine measurement of image quality and the performance of the diagnostic X-ray imaging system, from X-ray beam output to the viewing of radiographs, and the continual adjustment of that performance to an optimal and consistent level.

Radiation Protocol Committee (RPC)—the representative group of qualified individuals in a CT or FGI facility responsible for the ongoing review and management of CT or FGI protocols to ensure that exams being performed achieve the desired diagnostic image quality at the lowest radiation dose possible while properly exploiting the capabilities of the equipment being used.

Radiography—a technique for generating and recording an X-ray pattern for the purpose of providing the user with an image(s) after termination of the exposure.

Recording—producing a permanent or retrievable form of an image resulting from X-ray photons.

Reference Plane—a plane that is displaced from and parallel to the tomographic plane.

Scan—the complete process of collecting X-ray transmission data for the production of a tomogram. Data can be collected simultaneously during a single scan for the production of one or more tomograms.

Scan Increment—the amount of relative displacement of the patient with respect to the CT X-ray system between successive scans measured along the direction of such displacement.

Scan Sequence—a preselected set of two or more scans performed consecutively under preselected CT conditions of operation.

Scan Time—the period of time between the beginning and end of X-ray transmission data accumulation for a single scan.

Sensitivity Profile—the relative response of the CT X-ray system as a function of position along a line perpendicular to the tomographic plane.

SID—see *Source-Image Receptor Distance*.

Single Tomogram System—a CT X-ray system that obtains X-ray transmission data during a scan to produce a single tomogram.

Size-Specific Dose Estimate (SSDE)—a patient dose estimate which takes into consideration corrections based on the size of the patient, using linear dimensions measured on the patient or patient images.

Source—the focal spot of the X-ray tube or the region and/or material from which the radiation emanates.

Source-Skin Distance (SSD)—the distance from the source to the center of the entrant X-ray field in the plane tangent to the patient skin surface.

Spot Film Device—a device intended to transport and/or position a radiographic image receptor between the X-ray source and fluoroscopic image receptor. The term includes a device intended to hold a cassette over the input end of the fluoroscopic image receptor for the purpose of producing a radiograph.

Substantial Radiation Dose Level (SRDL)—an appropriately-selected dose used to trigger additional dose-management actions during a procedure and medical follow-up for a radiation level that might produce a clinically-relevant injury in an average patient.

Tomographic Plane—that geometric plane identified as corresponding to the output tomogram.

Tomographic Section—the volume of an object whose X-ray attenuation properties are imaged in a tomogram.

Unintended—a radiation dose received by a patient in diagnostic or interventional X-ray resulting from human error or equipment malfunction during a procedure.

Useful Beam—the radiation which passes through the tube housing port and the aperture of the beam-limiting device when the exposure switch or timer is activated.

Volume Computed Tomography Dose Index (CTDI_{vol})—a radiation dose parameter derived from the CTDI_w (weighted or average CTDI given across the field of view). The equation is:

$$CTDI_{vol} = (N)(T)(CTDI_w)/I,$$

where

N = number of simultaneous axial scans per X-ray source rotation;

T = thickness of one axial scan (mm); and

I = table increment per axial scan (mm).

Or, for helical scans,

$$CTDI_{vol} = CTDI_w / \text{pitch}$$

Wedge Filter—an added filter effecting continuous progressive attenuation on all or part of the useful beam.

Weighted Computed Tomography Dose Index (CTDI_w)—the estimated average CTDI₁₀₀ across the field of view (FOV). The equation is:

$$CTDI_w = 1/3CTDI_{100, \text{center}} + 2/3CTDI_{100, \text{edge}}.$$

Where 1/3 and 2/3 approximate the relative areas represented by the center and edge values derived using the 16 or 32 cm acrylic phantom. CTDI_w uses CTDI₁₀₀ and an f-factor for air (0.87 rad/R or 1.0 mGy/mGy).

X-Ray Equipment—an X-ray system, subsystem, or component thereof. Types of X-ray equipment are as follows:

a. *Mobile X-Ray Equipment*—X-ray equipment mounted on a permanent base with wheels and/or casters for moving while completely assembled.

b. *Portable X-Ray Equipment*—X-ray equipment designed to be hand-carried.

c. *Stationary X-Ray Equipment*—X-ray equipment that is installed in a fixed location.

d. *Transportable X-Ray Equipment*—X-ray equipment installed in a vehicle or trailer.

e. *Hand-Held X-Ray Equipment*—X-ray equipment that is designed to be hand-held during operation.

X-Ray Exposure Control—a device, switch, button or other similar means by which an operator initiates and/or terminates the radiation exposure. The X-ray exposure control may include such associated equipment as timers and back-up timers.

X-Ray Field—that area of the intersection of the useful beam and any one of the set of planes parallel to and including the plane of the image receptor, whose perimeter is the locus of points at which the AKR is one-fourth of the maximum in the intersection.

* * *

X-Ray Table—a patient support device with its patient support structure (tabletop) interposed between the patient and the image receptor during radiography and/or fluoroscopy. This includes, but is not limited to, any stretcher equipped with a radiolucent panel and any table equipped with a cassette tray (or bucky), cassette tunnel, fluoroscopic image receptor, or spot-film device beneath the tabletop.

X-Ray Tube—any electron tube which is designed for the conversion of electrical energy into X-ray energy.

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HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Nuclear Energy Division, LR 13:569 (October 1987), amended by the Office of Air Quality and Radiation Protection, Radiation Protection Division, LR 19:1421 (November 1993), LR 23:1139 (September 1997), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:2585 (November 2000), amended by the Office of the Secretary, Legal Affairs Division, LR 33:2362 (November 2007), amended by the Office of the Secretary, Legal Affairs and Criminal Investigations Division, LR 48:2928 (December 2022).

§603. General and Administrative Requirements

A. Radiation Safety Requirements. The registrant shall be responsible for directing the operation of the X-ray system(s) under his or her administrative control. The registrant or his or her agent shall assure that the requirements of LAC 33:XV are met in the operation of the X-ray system(s).

1. An X-ray system that does not meet the provisions of LAC 33:XV shall not be operated for diagnostic or therapeutic purposes unless approved by the department.

2. ...

3. The qualified expert, if required in this Section, shall complete initial and routine compliance evaluations following nationally recognized procedures. These evaluations shall include a review of the required quality control tests.

4. All X-ray equipment shall be installed and used in accordance with the equipment manufacturer's specifications.

5. For general radiographic systems not equipped with an operational anatomic programming option, protocols shall be documented and readily available to the operator. At a minimum, these protocols shall include:

a. patient's (adult and pediatric, if appropriate) body part and anatomical size;

b. technique factors;

c. type of image receptor used;

d. source to image receptor distance used (except for dental intraoral radiography); and

e. type of grid, if any.

6. At the request of the department, the registrant shall create and make available written safety procedures to each individual operating X-ray equipment, including any restrictions of the operating technique required for the safe operation of the particular X-ray system. The operator shall be able to demonstrate familiarity with these procedures.

7. Except for human patients who cannot be moved out of the room, only the staff and ancillary personnel, including parents or guardians, required for the medical procedure or training shall be in the room during the radiographic exposure. The following conditions shall be met for those other than the patient being examined:

a. all individuals shall be positioned such that no part of the body will be struck by the useful beam unless protected by not less than 0.5 millimeter lead equivalent;

b. the X-ray operator, other professional staff, and ancillary personnel shall be protected from the direct scatter radiation by protective aprons or whole body protective barriers of not less than 0.25 millimeter lead equivalent material; and

c. human patients who cannot be removed from the room shall be protected from the direct scatter radiation by whole body protective barriers of not less than 0.25 millimeter lead equivalent material or shall be so positioned that the nearest portion of the body is at least 2 meters from both the tube head and the nearest edge of the image receptor.

8. Individuals shall not be exposed to the useful beam except for healing arts purposes and unless such exposure has been authorized by a licensed practitioner of the healing arts. Any diagnostic information obtained from each exposure shall be reviewed by a licensed practitioner of the healing arts. This provision specifically prohibits deliberate exposure for the following purposes:

a. exposure of an individual for training, demonstration, or other non-healing arts purposes; and

b. exposure of an individual for the purpose of healing arts screening without prior written approval of the department.

9. In cases where a patient or image receptor must be provided with auxiliary support, mechanical support devices shall be used whenever possible. If a patient or image receptor must be provided with auxiliary support during a radiation exposure:

a. written safety procedures, as required by LAC 33:XV.603.A.19, shall indicate the requirements for selecting a holder and the procedure the holder shall follow;

b. the human holder shall be instructed in personal radiation safety and protected as required by LAC 33:XV.603.A.6;

c. no individual shall be used routinely to hold the image receptor or patients;

d. in those cases where the patient must hold the image receptor, except during intraoral examinations, any portion of the body other than the area of clinical interest struck by the useful beam shall be protected by not less than 0.5 millimeter lead equivalent material;

e. when an animal must be held by an individual during an exposure, that individual shall be protected with appropriate shielding devices, such as lead equivalent aprons and gloves, and shall be positioned such that no part of his or her body shall be struck by the useful beam.

10. Each facility shall have lead equivalent aprons and gloves available in sufficient numbers to provide protection to all personnel who are involved in X-ray operations and who are otherwise not shielded.

11. All protective apparel and auxiliary shields shall be evaluated at intervals of no less than 12 months, and no more than 14 months, for integrity and clearly labeled with their lead equivalence.

12. Each registrant shall have a mechanism in place for the referring physician to access information on selecting the most appropriate diagnostic procedure to answer the clinical question.

13. Nationally recognized diagnostic reference levels (DRLs) shall be utilized when applicable.

14. The registrant shall use auxiliary equipment designed to minimize patient and personnel exposure commensurate with the needed diagnostic information.

15. Portable or mobile X-ray equipment shall be used only for examinations where it is impractical to transfer the patient(s) to a stationary X-ray installation.

16. Neither the X-ray tube housing nor the collimating device shall be held during an exposure. Exceptions are allowed for department approved devices specifically designed to be hand-held.

17. The useful X-ray beam shall be limited to the area of clinical interest.

18. Consideration shall be given to selecting the appropriate technique and employing available dose reduction methods and technologies across all patient sizes and clinical indications.

19. A registrant shall have a documented procedure in place for verification of patient identity and exam performed, including identification of the appropriate body part.

20. Each registrant, except for veterinarians, covered under this Chapter shall establish written standards for the proper performance of each diagnostic X-ray imaging system under the control of the registrant, and shall document by routine test record that the system is performing in accordance with these standards (quality control). Copies of this documentation shall be retained for at least six months and be available for inspection by the department. If a test interval is greater than six months, then a copy of the most recent test record shall be retained.

21. All individuals who are associated with the operation of an X-ray system are subject to the requirements of LAC 33:XV.410 and 411. In addition, when protective clothing or devices are worn on portions of the body and a personnel monitoring device or devices are required in

accordance with LAC 33:XV.431, monitoring devices shall be used as follows:

a. when a protective apron is worn, at least one such monitoring device shall be worn at the collar outside of the protective apron;

b. the dose to the whole body based on the maximum dose attributed to the most critical organ shall be recorded in the reports required by LAC 33:XV.476. If more than one device is used and a record is made of the data, each dose shall be identified with the area where the device was worn on the body; and

c. deliberate exposure to an individual's personnel monitoring device is prohibited.

22. Any person proposing to conduct a healing arts screening program shall not initiate such a program without prior approval of the department. When requesting such approval, that person shall submit the information outlined in LAC 33:XV.699.Appendix C to the Office of Environmental Compliance. If any information submitted to the department becomes invalid or outdated, the Office of Environmental Compliance shall be immediately notified. See the definition of *healing arts screening* in LAC 33:XV.602.

23. Any person proposing to conduct a diagnostic or screening mammography program shall not initiate such a program without having a complete mammography facility survey performed by a mammography physicist initially and at intervals of no less than 12 months, and no more than 14 months thereafter.

B. X-Ray Film Processing Facilities and Practices. See Appendix D.

C. Facilities Using Computed Radiography (CR) or Direct Digital Radiography (DDR)

1. When exposure indicators are available, the facility shall establish and document an acceptable range for the exposure values for examinations routinely performed at the facility. The indicated exposure values for each image shall be compared to the established range. Consistent deviations from established ranges shall be investigated, corrective actions taken as necessary, and results documented.

2. Facilities shall establish and follow an image quality control program in accordance with the recommendations of a qualified expert, the system manufacturer, or a nationally recognized organization.

D. Exemptions

1. Dental Facilities. Dental facilities performing only intraoral, panoramic, or cephalometric imaging are exempt from following the provisions of LAC 33:XV.603.A.12.

2. Podiatry Facilities. Podiatry facilities are exempt from following the provisions of LAC 33:XV.603.A.12.

3. Veterinary Facilities. Veterinary facilities are exempt from following the provisions of LAC 33:XV.603.A.12-14, LAC 33:XV.603.A.19-20, and LAC 33:XV.603.A.22.

E. Plans Review

1. Except for dedicated mammography radiographic systems, podiatric radiographic systems, panoramic dental radiographic systems, intraoral dental radiographic systems, and bone density radiographic systems prior to construction, the floor plans and equipment arrangement of all new installations, or modifications of existing installations,

utilizing X-rays for diagnostic or therapeutic purposes shall be submitted to the Office of Environmental Compliance for review and approval. The required information is specified in LAC 33:XV.699. Appendices A and B.

2. The floor plans and equipment arrangement for all new, or modifications of existing, installations for veterinary and dental CBCT X-ray systems shall be reviewed for adequacy by the department on a case-by-case basis.

3. The department may require the applicant to utilize the services of a qualified expert to determine the shielding requirements prior to the plans review and approval.

4. The approval of such plans shall not preclude the requirement of additional modifications should a subsequent analysis of operating conditions indicate the possibility of an individual receiving a dose in excess of the limits prescribed in LAC 33:XV.410, 416, and 421.

F. Quality Assurance

1. The registrant shall establish and maintain a quality assurance (QA) program. In addition to the standards in the modality specific sections, the registrant shall:

a. maintain documentation of minimum qualifications for practitioners, medical physicists, and X-ray equipment operators;

b. designate an individual to manage the QA program;

c. establish and maintain written QA and quality control (QC) procedures, including evaluation frequencies and tolerances;

d. complete preventative maintenance on the X-ray systems in accordance with manufacturer specifications. In lieu of manufacturer's specifications, maintenance shall be completed at intervals of no less than 12 months, and no more than 14 months;

e. complete and document an annual review of the QA program; and

f. retain QA/QC records of evaluations and reviews for three years.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2001 et seq. and 2104.B.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Nuclear Energy Division, LR 13:569 (October 1987), amended by the Office of Air Quality and Radiation Protection, Radiation Protection Division, LR 19:1421 (November 1993), LR 22:976 (October 1996), LR 23:1139 (September 1997), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:2585 (November 2000), amended by the Office of the Secretary, Legal Affairs Division, LR 31:2532 (October 2005), LR 33:2184 (October 2007), amended by the Office of the Secretary, Legal Affairs and Criminal Investigations Division, LR 48:2933 (December 2022).

§604. General Requirements for All Diagnostic X-Ray Systems

A. ...

1. Warning Label

a. On systems manufactured on or before June 10, 2006, the control panel containing the main power switch shall bear the warning statement, legible and accessible to view: "WARNING: This X-ray unit may be dangerous to patient and operator unless safe exposure factors and operating instructions are observed."

b. On systems manufactured after June 10, 2006, the control panel containing the main power switch shall bear the warning statement, legible and accessible to view:

"WARNING: This X-ray unit may be dangerous to patient and operator unless safe exposure factors, operating instructions, and maintenance schedules are observed."

2. - 8.b....

c. The accuracy of the indicated kilovoltage peak (kVp) shall meet manufacturer specifications. In the absence of a manufacturer specification, kVp accuracy shall be within +/- 10 percent.

9. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2001 et seq. and 2104.B.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Nuclear Energy Division, LR 13:569 (October 1987), amended by the Office of Air Quality and Radiation Protection, Radiation Protection Division, LR 19:1421 (November 1993), amended by the Office of the Secretary, Legal Affairs and Criminal Investigations Division, LR 48:2935 (December 2022).

§605. Fluoroscopic X-Ray Systems

A. Only image-intensified or direct digital receptor fluoroscopic equipment shall be used for fluoroscopy.

1. Primary Protective Barrier

a. The fluoroscopic imaging assembly shall be provided with a primary protective barrier that intercepts the entire cross section of the useful beam at any SID.

b. The X-ray tube used for fluoroscopy shall not produce X-rays unless the primary protective barrier is in position to intercept the entire useful beam.

2. Field Limitation

a. Neither the length nor the width of the X-ray field in the plane of the image receptor shall exceed that of the visible area of the image receptor by more than 3 percent of the SID. The sum of the excess length and the excess width shall be no greater than 4 percent of the SID. In addition, the following requirements apply:

i. a means shall be provided to permit further limitation of the field. Beam-limiting devices manufactured after May 22, 1979, and incorporated in equipment with a variable SID and/or a visible area of greater than 300 square centimeters shall be provided with means for stepless adjustment of the X-ray field;

ii. all equipment with a fixed SID and a visible area of 300 square centimeters or less shall be provided with either stepless adjustment of the X-ray field or with means to further limit the X-ray field size at the plane of the image receptor to 125 square centimeters or less. Stepless adjustment shall provide continuous field sizes from the maximum obtainable to a field size of 5 centimeters by 5 centimeters or less;

iii. for equipment manufactured after February 25, 1978, when the angle between the image receptor and beam axis is variable, means shall be provided to indicate when the axis of the X-ray beam is perpendicular to the plane of the image receptor; and

iv. compliance shall be determined with the beam axis indicated to be perpendicular to the plane of the image receptor. For rectangular X-ray fields used with circular

image reception, the error in alignment shall be determined along the length and width dimensions of the X-ray field that pass through the center of the visible area of the image receptor.

b. Spot-film devices shall meet the following additional requirements:

i. means shall be provided between the source and the patient for adjustment of the X-ray field size in the plane of the image receptor to the size of that portion of the image receptor that has been selected on the spot film selector. Such adjustment shall be automatically accomplished when the X-ray field size in the plane of the image receptor is greater than that of the selected portion of the image receptor. If the X-ray field size is less than that of the selected portion of the image receptor, the field size shall not open automatically to the size of the selected portion of the image receptor unless the operator has selected that mode of operation;

ii. it shall be possible to adjust the X-ray field size in the plane of the image receptor to a size smaller than the selected portion of the image receptor. The minimum field size at the greatest SID shall be equal to, or less than, 5 centimeters by 5 centimeters;

iii. the center of the X-ray field in the plane of the image receptor shall be aligned with the center of the selected portion of the image receptor to within 2 percent of the SID; and

iv. means shall be provided to reduce the X-ray field size in the plane of the image receptor to a size smaller than the selected portion of the image receptor such that:

(a). for spot-film devices used on fixed-SID fluoroscopic systems which are not required to, and do not provide stepless adjustment of the X-ray field, the minimum field size, at the greatest SID, does not exceed 125 square cm; or

(b). for spot-film devices used on fluoroscopic systems that have a variable SID and/or stepless adjustment of the field size, the minimum field size, at the greatest SID, shall be containable in a square of 5 cm by 5 cm.

c. A capability may be provided for overriding the automatic X-ray field size adjustment in case of system failure. If it is so provided, a signal visible at the fluoroscopist's position shall indicate whenever the automatic X-ray field size adjustment override is engaged. Each such system failure override switch shall be clearly labeled as follows:

FOR X-RAY FIELD LIMITATION SYSTEM FAILURE.

d. On spot-film devices manufactured after February 25, 1978, if the angle between the plane of the image receptor and beam axis is variable, means shall be provided to indicate when the axis of the X-ray beam is perpendicular to the plane of the image receptor, and compliance shall be determined with the beam axis indicated to be perpendicular to the plane of the image receptor.

e. Fluoroscopy and Radiography Using the Fluoroscopic Imaging Assembly with Inherently Circular Image Receptors

i. For fluoroscopic equipment manufactured before June 10, 2006, other than radiation therapy simulation systems, the following applies:

(a). neither the length nor width of the X-ray field in the plane of the image receptor shall exceed that of

the visible area of the image receptor by more than 3 percent of the SID. The sum of the excess length and the excess width shall be no greater than 4 percent of the SID; and

(b). for rectangular X-ray fields used with circular image receptors, the error in alignment shall be determined along the length and width dimensions of the X-ray field which pass through the center of the visible area of the image receptor.

ii. For fluoroscopic equipment manufactured on or after June 10, 2006, other than radiation simulation systems, the maximum area of the X-ray field in the plane of the image receptor shall conform with one of the following requirements:

(a). when any linear dimension of the visible area of the image receptor measured through the center of the visible area is less than or equal to 34 cm in any direction, at least 80 percent of the area of the X-ray field overlaps the visible area of the image receptor; or

(b). when any linear dimension of the visible area of the image receptor measured through the center of the visible area is greater than 34 cm in any direction, the X-ray field measured along the direction of greatest misalignment with the visible area of the image receptor does not extend beyond the edge of the visible area of the image receptor by more than 2 cm.

f. Fluoroscopy and Radiography Using Fluoroscopic Imaging Assembly with Inherently Rectangular Image Receptors

i. For X-ray systems manufactured on or after June 10, 2006, the following applies:

(a). neither the length nor width of the X-ray field in the plane of the image receptor shall exceed that of the visible area of the image receptor by more than 3 percent of the SID. The sum of the excess length and the excess width shall be no greater than 4 percent of the SID; and

(b). the error in alignment shall be determined along the length and width dimensions of the X-ray field which pass through the center of the visible area of the image receptor.

g. Override Capability. If the fluoroscopic X-ray field size is adjusted automatically as the SID or image receptor size is changed, a capability may be provided for overriding the automatic adjustment in case of system failure. If it is so provided, a signal visible at the fluoroscopist's position shall indicate whenever the automatic field adjustment is overridden. Each such system failure override switch shall be clearly labeled as follows:

FOR X-RAY FIELD LIMITATION SYSTEM FAILURE.

3. Activation of the Fluoroscopic Tube. X-ray production in the fluoroscopic mode shall be controlled by a device that requires continuous pressure by the operator for the entire time of any exposure. When recording serial fluoroscopic images, the operator shall be able to terminate the X-ray exposure(s) at any time, but means shall be provided to permit completion of any single exposure of the series in process.

4. Air Kerma Rates (AKR)

a. Fluoroscopic Equipment Manufactured Before May 19, 1995

i. Fluoroscopic equipment provided with automatic exposure rate control (AERC) shall not be operable at any combination of tube potential and current

that will result in an AKR in excess of 88 mGy per minute (vice 10 R/min exposure rate) at the measurement point specified in LAC 33:XV.605.A.4.d, except as specified in LAC 33:XV.605.A.4.a.v.

ii. Equipment provided without AERC shall not be operable at any combination of tube potential and current that will result in an AKR in excess of 44 mGy per minute (vice 5 R/min exposure rate) at the measurement point specified in LAC 33:XV.605.A.4.d, except as specified in LAC 33:XV.605.A.4.a.v.

iii. Equipment provided with both an AERC mode and a manual mode shall not be operable at any combination of tube potential and current that will result in an AKR in excess of 88 mGy per minute (vice 10 R/min exposure rate) in either mode at the measurement point specified in LAC 33:XV.605.A.4.d, except as specified in LAC 33:XV.605.A.4.a.v.

iv. Equipment may be modified in accordance with this Section to comply with LAC 33:XV.605.A.4.b. When the equipment is modified, it shall bear a label indicating the date of the modification and the statement:

MODIFIED TO COMPLY WITH LAC 33:XV.605.

v. Exceptions: during recording of fluoroscopic images.

b. Fluoroscopic Equipment Manufactured on or after May 19, 1995

i. Equipment shall be equipped with AERC if operable at any combination of tube potential and current that results in an AKR greater than 44 mGy per minute (vice 5 R/min exposure rate) at the measurement point specified in LAC 33:XV.605.A.4.d. Provision for manual selection of technique factors may be provided.

ii. Equipment shall not be operable at any combination of tube potential and current that will result in an AKR in excess of 88 mGy per minute (vice 10 R/min exposure rate) at the measurement point specified in LAC 33:XV.605.A.4.d, except as specified in LAC 33:XV.605.A.4.b.iii.

iii. Exceptions:

(a). for equipment manufactured prior to June 10, 2006, during the recording of images from a fluoroscopic image receptor using photographic film or a video camera when the X-ray source is operated in a pulsed mode; or

(b). for equipment manufactured on or after June 10, 2006, during the recording of images from the fluoroscopic image receptor for the purpose of providing the user with a recorded image(s) after termination of the exposure. Such recording does not include images resulting from a last-image-hold feature that are not recorded.

c. When optional high level control is selected and the control is activated, the equipment shall not be operable at any combination of tube potential and current that will result in an AKR in excess of 176 mGy per minute (vice 20 R/min exposure rate) at the measurement point specified in LAC 33:XV.605.A.4.d. Special means of activation of high level control shall be required. The high level control shall only be operable when continuous manual activation is provided by the operator. A continuous signal audible to the operator shall indicate that the high level control is being employed.

d. Compliance with the requirements of LAC 33:XV.605.A.4 shall be determined as follows:

i. if the source is below the X-ray table, the AKR shall be measured 1 centimeter above the tabletop or cradle;

ii. if the source is above the X-ray table, the AKR shall be measured at 30 centimeters above the tabletop with the end of the beam-limiting device or spacer positioned as closely as possible to the point of measurement;

iii. in a C-arm or L-U arm type of fluoroscope, the AKR shall be measured 30 centimeters from the input surface of the fluoroscopic imaging assembly, with the source positioned at any available SID, provided that the end of the beam-limiting device or spacer is no closer than 30 centimeters from the input surface of the fluoroscopic imaging assembly;

iv. in a C-arm type fluoroscope having an SID less than 45 cm, the AKR shall be measured at the minimum SSD; and

v. in a lateral type fluoroscope, the AKR shall be measured at a point 15 centimeters from the centerline of the X-ray table and in the direction of the X-ray source with the end of the beam-limiting device or spacer positioned as closely as possible to the point of measurement. If the tabletop is movable, it shall be positioned as closely as possible to the lateral X-ray source, with the end of the beam-limiting device or spacer no closer than 15 centimeters to the center line of the X-ray table.

5. Barrier Transmitted Radiation Rate Limits

a. The AKR due to transmission through the primary protective barrier with the attenuation block in the useful beam, combined with radiation from the image intensifier, shall not exceed 3.34×10^{-3} percent of the entrance AKR at 10 centimeters from any accessible surface of the fluoroscopic imaging assembly beyond the plane of the image receptor. Radiation therapy simulation systems shall be exempt from this requirement provided the systems are intended only for remote control operation.

b. Measuring Compliance of Barrier Transmission

i. The AKR due to transmission through the primary protective barrier combined with radiation from the image intensifier shall be determined by measurements averaged over an area of 100 square centimeters with no linear dimension greater than 20 centimeters.

ii. If the source is below the tabletop, the measurement shall be made with the input surface of the fluoroscopic imaging assembly positioned 30 centimeters above the tabletop.

iii. If the source is above the tabletop and the SID is variable, the measurement shall be made with the end of the beam-limiting device or spacer as close to the tabletop as it can be placed, provided that it shall not be closer than 30 centimeters.

iv. Movable grids and compression devices shall be removed from the useful beam during the measurement.

v. For all measurements, the attenuation block shall be positioned in the useful beam 10 cm from the point of measurement of entrance AKR and between this point and the input surface of the fluoroscopic imaging assembly.

6. Indication of Potential and Current. During fluoroscopy and cinefluorography the kV and the mA shall be continuously indicated.

7. Source-to-Skin Distance. The SSD shall not be less than:

a. 38 centimeters on stationary fluoroscopic systems;

b. 30 centimeters on all mobile fluoroscopes; and

c. 20 centimeters for fluoroscopes intended for specific surgical or interventional applications that would be prohibited at the source-to-skin distances specified in this Paragraph. Provisions shall be made for operating at shorter source-to-skin distances.

d. For stationary, mobile, or portable C-arm fluoroscopic systems manufactured on or after June 10, 2006, having a maximum source-to-image receptor distance of less than 45 cm, means shall be provided to limit the source-to-skin distance to not less than 19 cm. Such systems shall be labeled for extremity use only. In addition, for those systems intended for specific surgical applications that would be prohibited at the source-to-skin distance specified in this Paragraph, provisions shall be made for operation at shorter source-to-skin distances, but not less than 10 cm.

8. Fluoroscopic Irradiation Time, Display, and Signal

a. Fluoroscopic equipment manufactured before June 10, 2006:

i. shall be provided with means to preset the cumulative irradiation time of the fluoroscopic tube. The maximum cumulative time of the timing device shall not exceed five minutes without resetting. A signal audible to the fluoroscopist shall indicate the completion of any preset cumulative irradiation time. Such signal shall continue to sound while X-rays are produced until the timing device is reset. Fluoroscopic equipment shall be modified in accordance with LAC 33:XV.605 to comply with the requirements of this Paragraph. When the equipment is modified, it shall bear a label indicating the statement; or

MODIFIED TO COMPLY WITH LAC 33:XV.605

ii. as an alternative to the requirements of this Paragraph, radiation therapy simulation systems shall be provided with a means to indicate the total cumulative exposure time during which X-rays were produced, and which is capable of being reset between X-ray examinations.

b. For X-ray controls manufactured on or after June 10, 2006, there shall be provided for each fluoroscopic tube:

i. a display of the fluoroscopic irradiation time at the fluoroscopist's working position. This display shall function independently of the audible signal described in this Subparagraph. The following requirements apply:

(a). when the X-ray tube is activated, the fluoroscopic irradiation time in minutes and tenths of minutes shall be continuously displayed and updated at least once every six seconds;

(b). the fluoroscopic irradiation time shall also be displayed within six seconds of termination of an exposure and remain displayed until reset; and

(c). means shall be provided to reset the display to zero prior to the beginning of a new examination or procedure;

ii. a signal audible to the fluoroscopist shall sound for each passage of five minutes of fluoroscopic irradiation time during an examination or procedure. The signal shall sound until manually reset or, if automatically reset, for at least two seconds.

9. Display of Last-Image-Hold (LIH). Fluoroscopic equipment manufactured on or after June 10, 2006, shall be equipped with means to display LIH image following termination of the fluoroscopic exposure.

a. For an LIH image obtained by retaining pretermination fluoroscopic images, if the number of images and method of combining images are selectable by the user, the selection shall be indicated prior to the initiation of the fluoroscopic exposure.

b. For an LIH image obtained by initiating a separate radiographic-like exposure at the termination of fluoroscopic imaging, the technique factors for the LIH image shall be selectable prior to the fluoroscopic exposure, and the combination selected shall be indicated prior to initiation of the fluoroscopic exposure.

c. Means shall be provided to clearly indicate to the user whether a displayed image is the LIH radiograph or fluoroscopy. Display of the LIH radiograph shall be replaced by the fluoroscopic image concurrently with re-initiation of fluoroscopic exposure, unless separate displays are provided for the LIH radiograph and fluoroscopic images.

10. Displays of Values of AKR and Cumulative Air Kerma. Fluoroscopic equipment manufactured on or after June 10, 2006, shall display at the fluoroscopist's working position the AKR and cumulative air kerma. The following requirements apply for each X-ray tube used during an examination or procedure.

a. When the X-ray tube is activated and the number of images produced per unit time is greater than six images per second, the AKR in mGy/min shall be continuously displayed and updated at least once every second.

b. The cumulative air kerma in units of mGy shall be displayed either within five seconds of termination of an exposure or displayed continuously and updated at least once every five seconds.

c. The display of the AKR shall be clearly distinguishable from the display of the cumulative air kerma.

d. The AKR and cumulative air kerma shall represent the value for conditions of free-in-air irradiation at one of the following reference locations specified according to the type of fluoroscope.

i. For fluoroscopes with X-ray source below the X-ray table, X-ray source above the table, or of lateral type, the reference location shall be the respective locations specified in LAC 33:XV.605.A.4.d.i, ii, or v for measuring compliance with AKR limits.

ii. For C-arm fluoroscopes, the reference location shall be 15 cm from the isocenter toward the X-ray source along the beam axis. Alternatively, the reference location shall be at a point specified by the manufacturer to represent the location of the intersection of the X-ray beam with the patient's skin.

e. Means shall be provided to reset to zero the display of cumulative air kerma prior to the commencement of a new examination or procedure.

f. The displayed AKR and cumulative air kerma shall not deviate from the actual values by more than +/- 35 percent over the range of 6 mGy/min and 100 mGy to the maximum indication of AKR and cumulative air kerma, respectively. Compliance shall be determined with an irradiation time greater than three seconds.

11. Protection from Scattered Radiation

a. For stationary fluoroscopic systems, ancillary shielding, such as drapes, self-supporting curtains, or viewing shields, shall be available and used as supplemental protection for all individuals other than the patient in the room during a fluoroscopy procedure.

b. Where sterile fields or special procedures prohibit the use of normal protective barriers or drapes, all of the following conditions shall be met.

i. Shielding required under LAC 33:XV.605.A.11.a shall be maintained to the degree possible under the clinical conditions.

ii. All persons, except the patient, in the room where fluoroscopy is performed shall wear protective aprons that provide a lead equivalent shielding of at least 0.25 mm.

iii. The fluoroscopic field size shall be reduced to the minimum required for the procedure being performed (area of clinical interest).

iv. Operating and safety procedures shall reflect the above conditions, and fluoroscopy personnel shall exhibit awareness of situations requiring the use and/or nonuse of the protective drapes.

12. Radiation Therapy Simulation Systems. Radiation therapy simulation systems shall be exempt from all the requirements of LAC 33:XV.605.A.1, 4, 5, and 8, provided that:

a. such systems are designed and used in such a manner that no individual other than the patient is in the X-ray room during periods when the system is producing X-rays; and

b. systems that do not meet the requirements of LAC 33:XV.605.A.8 are provided with a means of indicating the cumulative time that an individual patient has been exposed to X-rays. Procedures shall require in such cases that the timer be reset between examinations.

B. Operator Qualifications

1. In addition to the applicable sections of these regulations, the operation of a fluoroscopic X-ray system for clinical purposes shall be limited to:

a. a licensed practitioner or medical resident working within his or her scope of practice;

b. an individual who has passed the American Registry of Radiologic Technologists (ARRT) Fluoroscopy Exam (or equivalent) and holds a valid certification, and only under the general supervision of the licensed practitioner meeting the conditions in LAC 33:XV.605.B.1.a; or

c. a radiologic technologist not meeting LAC 33:XV.605.B.1.b, or a radiologic technology student, in training, and only under the personal supervision of the licensed practitioner meeting the conditions of LAC 33:XV.605.B.1.a.

2. All persons operating, or supervising the operation of, fluoroscopy systems shall have completed a minimum of two hours of training that includes but is not limited to the following:

- a. basic properties of radiation;
- b. biological effects of X-ray;
- c. radiation protection methods for patients and staff;
- d. units of measurement and dose, including dose-area product (DAP) values and air kerma;
- e. factors affecting fluoroscopic outputs;
- f. high level control options;
- g. dose management including dose reduction techniques, monitoring, and recording;
- h. principles and operation of the specific fluoroscopic X-ray system(s) to be used;
- i. fluoroscopic and fluorographic outputs of each mode of operation on the system(s) to be used clinically; and
- j. applicable requirements of these regulations.

3. Documentation pertaining to the requirements of LAC 33:XV.605 shall be maintained for review by the department for three years.

C. Equipment Operation

1. All fluoroscopic images shall be viewed, directly or indirectly, and interpreted by a licensed practitioner of the healing arts.

2. Overhead fluoroscopy shall not be used as a positioning tool for general purpose radiographic examinations.

3. Operators shall be competent in the standard operating procedures of the unit in use, including the use of available dose-saving features, and the relative radiation output rates of the various modes of operation.

4. Procedure planning for fluoroscopic procedures on pregnant patients shall include feasible modifications to minimize dose to the conceptus.

5. Procedure planning for fluoroscopic procedures on pediatric patients shall include feasible modifications to minimize dose.

6. The registrant shall use all methods available on the fluoroscopy system to monitor dose during a fluoroscopic procedure.

7. The facility shall establish a written policy regarding patient dose management in fluoroscopically guided procedures.

D. Qualified Expert (QE) Evaluations

1. Fluoroscopic equipment shall be evaluated by a QE within 30 days of installation and of any maintenance of the system that may affect the exposure rate. Thereafter, the measurements shall be made at intervals of no less than 12 months, and no more than 14 months, from the date of the prior measurement by or under the direction of a QE. At a minimum, these evaluations shall include:

a. a measurement of entrance exposure rates that covers the full range of patient thicknesses including those that are expected to drive the system to maximum output in normal mode. In addition, a single representative measurement of maximum output in all other available modes clinically used must be performed. These measurements shall:

i. for systems without automatic exposure control, be made utilizing a milliamperage and kVp typical of the clinical use of the fluoroscopic system;

ii. for systems with automatic exposure control, be made utilizing sufficient attenuating material in the useful

beam to produce a milliamperage and kVp typical of the clinical use of the fluoroscopic system;

b. a measurement and verification of compliance of maximum AKR for fluoroscopy and high-level control, if available. Measurements shall be made in accordance with LAC 33:XV.605.A.4.d;

c. an evaluation of high contrast resolution and low contrast resolution in both fluoroscopic and spot-film modes;

d. an evaluation of the operation of the five-minute timer, warning lights, interlocks, and collision sensors;

e. an evaluation of the beam quality;

f. an evaluation of collimation in the fluoroscopy and spot-film modes;

g. an evaluation of the availability and accuracy of technique indicators and integrated radiation dose displays; and

h. an evaluation of any changes that may impact patient and personnel protection devices.

2. Measurements required in LAC 33:XV.605.D.1 shall be performed with a calibrated dosimetry system per manufacturer recommendations not to exceed two years and records maintained for five years for inspection by the department.

E. Additional requirements for facilities performing fluoroscopically-guided interventional (FGI) procedures are as follows:

1. provide an annual report to the radiation safety committee or the person responsible for radiation safety, in the absence of a radiation safety committee;

2. establish and implement FGI procedure protocols as follows:

a. the registrant shall establish and implement written protocols, or protocols documented in an electronic report system, that include but are not limited to the following:

i. identification of individuals who are authorized to use fluoroscopic systems for interventional purposes;

ii. a method to be used to monitor patient radiation dose during FGI;

iii. dose notification levels, as appropriate, at which the physician is notified and appropriate actions are taken for patient safety; and

iv. a review of the established protocols at intervals of no less than 12 months, and no more than 14 months, from the previous review;

b. a record of each protocol shall be maintained for inspection by the department. If the registrant revises a protocol, documentation shall be maintained that includes the justification for the revision and the previous protocol for inspection by the department;

3. develop procedures for maintaining records as follows:

a. a record of radiation output information shall be maintained in an area where any fluoroscopist shall have ready access to such results while using the fluoroscope so the radiation dose to the skin may be estimated in accordance with established protocols. The record shall include the following:

i. patient identification;

ii. type and date of examination;

iii. identification of the fluoroscopic system used;

iv. peak skin dose, cumulative air kerma, or dose area product used if the information is available on the fluoroscopic system; and

v. if the peak skin dose, cumulative air kerma, or dose area product are not displayed on the fluoroscopic system, records shall include other information necessary to estimate the radiation dose to the skin in accordance with established protocol or the following, as necessary:

(a). fluoroscopic mode, such as, high-level or pulsed mode of operation;

(b). cumulative fluoroscopic exposure time; and

(c). number of films or recorded exposures;

b. the registrant shall maintain records required by this Paragraph for inspection by the department.

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§606. Radiographic Systems Other Than Fluoroscopic, Dental, or Computed Tomography X-Ray Systems

A. - A.1. ...

a. there shall be provided a means of stepless adjustment of the size of the X-ray field. The minimum field size at an SID of 100 centimeters shall be equal to or less than 5 centimeters by 5 centimeters;

b. a method shall be provided for visually defining the perimeter of the X-ray field. The total misalignment of the edges of the visually defined field with the respective edges of the X-ray field along either the length or width of the visually defined field shall not exceed 2 percent of the distance from the source to the center of the visually defined field when the surface upon which it appears is perpendicular to the axis of the X-ray beam;

c. when a light localizer is used to define the X-ray field, it shall provide an average illumination of not less than 160 lux or 15 footcandles at 100 centimeters or at the maximum SID, whichever is less. The average illumination shall be based upon measurements made in the approximate center of each quadrant of the light field. Radiation therapy simulation systems manufactured on and after May 27, 1980, are exempt from this requirement;

d. the edge of the light field at 100 cm or at the maximum SID, whichever is less, shall have a contrast ratio, corrected for ambient lighting, of not less than 4 in the case of beam-limiting devices designed for use on stationary equipment, and a contrast ratio of not less than 3 in the case of beam-limiting devices designed for use on mobile and portable equipment. The contrast ratio is defined as I_1/I_2 , where I_1 is the illuminance 3 mm from the edge of the light field toward the center of the field; and I_2 is the illuminance 3 mm from the edge of the light field away from the center of the field. Compliance shall be determined with a measuring aperture of 1 mm; and

e. the department may grant an exemption on X-ray systems to LAC 33:XV.606.A.1.a-d provided the registrant makes a written application for such exemption and in that application:

i. demonstrates that it is impractical to comply with LAC 33:XV.606.A.1.a-d; and

ii. the purposes of LAC 33:XV.606.A.1.a-d will be met by other methods.

2. Additional Requirements for Stationary General Purpose X-Ray Systems, Including Veterinary Systems Installed after February 21, 1991. In addition to the requirements of LAC 33:XV.606.A.1, stationary general purpose X-ray systems shall meet the following requirements:

a. ...

b. the beam-limiting device shall indicate numerically the field size in the plane of the image receptor to which it is adjusted;

c. indication of the field size dimensions and SID's shall be specified in inches and/or centimeters, and shall be such that aperture adjustments result in X-ray field dimensions in the plane of the image receptor that correspond to those indicated by the beam-limiting device to within 2 percent of the SID when the beam axis is indicated to be perpendicular to the plane of the image receptor; and

d. compliance measurements will be made at discrete SIDs and image receptor dimensions in common clinical use or at any other specific dimensions at which the beam-limiting device or its associated diagnostic X-ray system is uniquely designed to operate.

3. ...

4. Beam Limitation and Alignment on Stationary General Purpose X-Ray Systems. For stationary, general purpose X-ray systems that contain a tube housing assembly, an X-ray control, and for those systems so equipped, with a table, all certified in accordance with the USFDA regulations, the following requirements apply.

a. Positive beam limitation (PBL) shall be provided whenever all the following conditions are met:

i. the image receptor is inserted into a permanently mounted cassette holder;

ii. the image receptor length and width are each less than 50 centimeters;

iii. the X-ray beam axis is within +3 degrees of vertical, and the SID is 90 centimeters to 130 centimeters inclusive, or the X-ray beam axis is within +3 degrees of horizontal, and the SID is 90 centimeters to 205 centimeters inclusive;

iv. the X-ray beam axis is perpendicular to the plane of the image receptor to within +3 degrees;

v. neither tomographic nor stereoscopic radiography is being performed; and

vi. the PBL system has not been intentionally overridden. This override provision is subject to LAC 33:XV.606.A.4.c.

b. Positive beam limitation (PBL) shall prevent the production of X-rays when:

i. either the length or width of the X-ray field in the plane of the image receptor differs, except as permitted by LAC 33:XV.606.A.4.e., from the corresponding image receptor dimensions by more than 3 percent of the SID;

ii. the sum of the length and width differences as stated in LAC 33:XV.606. A.4.b.i. without regard to sign exceeds 4 percent of the SID; or

iii. the beam-limiting device is at an SID for which PBL is not designed for sizing.

c. If a means of overriding the positive beam limitation (PBL) system exists, that means shall meet the following criteria:

i. the means of overriding the PBL system shall be designed for use only in the event of PBL system failure or if the system is being serviced; and

ii. if in a position that the operator would consider it part of the operational controls or if it is referenced in the operator's manual or in other materials intended for the operator, the means for overriding the PBL system shall require that:

(a). a key be utilized to defeat the PBL;

(b). the key remain in place during the entire time the PBL system is overridden; and

(c). the key or key switch be clearly and durably labeled as follows:

FOR X-RAY FIELD LIMITATION
SYSTEM FAILURE

d. Compliance with LAC 33:XV.606. A.4.b. shall be determined when the equipment indicates that the beam axis is perpendicular to the plane of the image receptor and the provisions of LAC 33:XV.606. A.4.a. are met. Compliance shall be determined no sooner than five seconds after insertion of the image receptor.

e. The positive beam limitation system shall be capable of operation, at the discretion of the operator, such that the size of the field may be made smaller than the size of the image receptor through stepless adjustment of the field size. The minimum field size at a SID of 100 centimeters shall be equal to or less than 5 centimeters by 5 centimeters.

f. The positive beam limitation system shall be designed such that if a change in image receptor does not cause an automatic return to positive beam limitation function as described in LAC 33:XV.606.A.5.b, then any change of image receptor size or SID shall cause the automatic return.

5. X-Ray Systems Other Than Those Described in LAC 33:XV.606.A.1, 2, 3, and 4, including Veterinary Systems Prior to February 21, 1991. These systems shall meet the following requirements:

A.5.a. - B.2.b.iv. ...

v. a visible signal shall indicate when an exposure has been terminated at the limits specified in LAC 33:XV.606.B.2.b.iv, and manual resetting shall be required before further automatically timed exposures can be made.

3. - 6. ...

a. stationary X-ray systems shall be required to have the X-ray control, including the exposure switch, permanently mounted in a protected area so that the operator is required to remain in that protected area during the entire exposure; and

b. - b.ii. ...

7. Operator Protection for Veterinary Systems and Panoramic Dental Systems. All stationary, mobile, or portable X-ray systems used for veterinary work or

panoramic dental systems shall be provided with either a 6.5 feet (2 meters) high protective barrier for operator protection during exposures, or shall be provided with means to allow the operator to be at least 12 feet (3.7 meters) from the tube housing assembly during exposures. Otherwise, in cases where animals are held, the operator and ancillary personnel shall be protected by a minimum of 0.25 mm lead equivalent from scatter radiation and 0.5 mm from the useful beam.

8. Multiple Tubes. Where two or more radiographic tubes are controlled by one exposure switch, the tube or tubes which have been selected shall be clearly indicated before initiation of the exposure. This indication shall be both on the X-ray control and at or near the tube housing assembly which has been selected.

C. Source-to-Skin Distance. All mobile or portable radiographic systems shall be provided with means to limit the source-to-skin distance to be equal to or greater than 30 centimeters, except veterinary equipment.

D. Exposure Reproducibility. When all technique factors are held constant, including control panel selections associated with automatic exposure control (phototiming) systems, the coefficient of variation of exposure for both manual and phototimed systems shall not exceed 0.05. This requirement shall be deemed to have been met if, when 10 exposures are made at identical technique factors, the difference between the maximum exposure (E_{max}) and the minimum exposure (E_{min}) shall be less than or equal to 10 percent of the average exposure (E):

$$(E_{max} - E_{min}) \leq 0.1 E$$

E. Radiation from Capacitor Energy Storage Equipment in Standby Status. Radiation emitted from the X-ray tube when the exposure switch or timer is not activated shall not exceed a rate of 2 milliroentgens (0.516 $\mu\text{C}/\text{kg}$) per hour at 5 centimeters from any accessible surface of the diagnostic source assembly, with the beam-limiting device fully open, the system fully charged, and the exposure switch, timer, or any discharge mechanism not activated. Compliance shall be determined by measurements averaged over an area of 100 square cm, with no linear dimensions greater than 20 cm.

F. ...

G. Linearity. The following requirements apply when the equipment is operated on a power supply as specified by the manufacturer for any fixed X-ray tube potential within the range of 40 percent to 100 percent of the maximum rated.

1. Equipment Having Independent Selection of X-Ray Tube Current (mA). The average ratios of exposure to the indicated milliamperere-seconds product (C/kg/mAs or mR/mAs) obtained at any two consecutive tube current settings shall not differ by more than 0.10 times their sum. This is:

$$(X_1 - X_2) \leq 0.10 (X_1 + X_2)$$

where:

X_1 and X_2 are the average C/kg/mAs (or mR/mAs) values obtained at any two consecutive mAs selector settings.

2. Equipment Having a Combined X-Ray Tube Current Exposure Time Product (mAs) Selector. The average ratios of exposure to the indicated milliamperere-seconds product (C/kg/mAs or mR/mAs) obtained at any two

consecutive mAs selector settings shall not differ by more than 0.10 times their sum. This is:

$$(X_1 - X_2) \leq 0.10 (X_1 + X_2)$$

where:

X_1 and X_2 are the average C/kg/mAs (or mR/mAs) values obtained at any two consecutive mAs selector settings.

3. Measuring Compliance. Determination of compliance shall be based on 10 exposures, of no less than 0.05 seconds each, taken within a time period of one hour, at each of the two settings. These two settings may include any two focal spot sizes provided that neither focal spot size is equal to or less than 0.45 millimeter, in which case the two settings shall be restricted to the same focal spot size. For purposes of this requirement, focal spot size is the nominal focal spot size specified by the X-ray tube manufacturer.

H. Portable Radiographic X-Ray Systems. A tube stand or other mechanical support shall be used for portable X-ray systems except during veterinary field operations where it is impractical to do so.

I. Systems Designed for Mammography. Systems designed for mammography use shall meet all applicable sections of the most current Mammography Quality Standards Act.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2001 et seq. and 2104.B.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Nuclear Energy Division, LR 13:569 (October 1987), amended by the Office of Air Quality and Radiation Protection, Radiation Protection Division, LR 19:1421 (November 1993), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:2586 (November 2000), LR 27:1237 (August 2001), amended by the Office of the Secretary, Legal Affairs and Criminal Investigations Division, LR 48:2940 (December 2022).

§607. Dental Radiographic Systems

A. In addition to the provisions of LAC 33:XV.603 and 604, the requirements of this Section apply to dental radiographic facilities using intraoral, panoramic, and cephalometric systems. Dental facilities using cone beam computed tomography (CBCT) technology shall follow applicable provisions of LAC 33:XV.610.G.

1. Warning Label

a. On systems manufactured on or before June 10, 2006, the control panel containing the main power switch shall bear the warning statement, or the warning statement in LAC 33:XV.607.A.1.b, legible and accessible to view: "WARNING: This X-ray unit may be dangerous to patient and operator unless safe exposure factors and operating instructions are observed."

b. On systems manufactured after June 10, 2006, the control panel containing the main power switch shall bear the warning statement, legible and accessible to view:

"WARNING: This X-ray unit may be dangerous to patient and operator unless safe exposure factors, operating instructions, and maintenance schedules are observed."

2. - 2.c....

3. Radiation Exposure Control for Certified Systems. The following requirements shall be met.

a. - b. ...

i. Means shall be provided to terminate the exposure at a preset time interval, a preset product of current and time, a preset number of pulses, or a preset radiation exposure to the image receptor;

ii. - iii. ...

c. Exposure Indication. The X-ray control shall provide visual indication observable at or from the operator's protected position whenever X-rays are produced. In addition, a signal audible to the operator shall indicate that the exposure has terminated.

$$(T_{\max} - T_{\min}) \leq 0.10T$$

d. Exposure Duration (Timer) Reproducibility. With a timer setting of 0.5 seconds or less, the difference between the maximum exposure time (T_{\max}) and the minimum exposure time (T_{\min}) shall be less than or equal to 10 percent of the average time (T), when 10 timing tests are performed:

e. Exposure Control Location and Operator Protection. Each X-ray control shall be located in such a way as to meet the following requirements. Except for units designed to be hand-held, the exposure control shall allow the operator to be:

- i. behind a protective barrier at least 6.5 feet (2.0 m) high; or
- ii. at least 12 feet (3.7 m) from the tube housing assembly while making exposures; and
- iii. the operator's protected area shall provide means to view the patient during the X-ray procedure.

f. Administrative controls include the following.

i. For human use:

(a). patient and film holding devices shall be used when the techniques permit;

(b). except for units designed to be hand-held, the tube housing and the PID shall not be hand-held during an exposure;

(c). the X-ray system shall be operated in such a manner that the useful beam at the patient's skin does not exceed the requirements of LAC 33:XV.607.A.2.a; and

(d). dental fluoroscopy without image intensification shall not be used.

ii. For Nonhuman Use

(a). Except for units designed to be hand-held, the tube housing and the PID shall not be hand-held during the exposure.

(b). The X-ray system shall be operated in such a manner that the useful beam at the patient's skin does not exceed the requirements of LAC 33:XV.607.A.2.a.

(c). Dental fluoroscopy without image intensification shall not be used.

(d). An operator shall wear a 0.25 lead equivalent apron during an exposure or a personal dosimetry badge.

(e). Unless required to restrain an animal, the operator shall stand at least six feet away from the useful beam and the animal during radiographic exposures.

(f). No individual, other than the operator, shall be in the X-ray room or area while exposures are being made unless such individual's assistance is required.

(g). When an animal must be held in position during radiography, mechanical supporting or restraining devices shall be used when technique permits.

4. Exposure Reproducibility. The coefficient of variation shall not exceed 0.05 when all technique factors are held constant. This requirement shall be deemed to have been met if, when 10 exposures are made within a period of one hour at identical technique factors, the difference between the maximum exposure value (E_{\max}) and the minimum exposure value (E_{\min}) shall be less than or equal to 10 percent of the average exposure (E):

5. - 7. ...

8. Source-to-Skin Distance. X-ray systems designed for use with an intraoral image receptor shall be provided with means to limit source-to-skin distance to not less than 18 centimeters.

9. Hand-Held Intraoral Equipment. In addition to the standards in this Chapter, the following applies specifically to hand-held devices.

a. The hand-held X-ray system shall be equipped with a backscatter shield of not less than 0.25 mm lead equivalent and 15.2 cm (6 inches) in diameter that is positioned as close as practicable to the distal end of the position indication device.

b. The facility shall maintain documentation that each operator has completed training as specified by the manufacturer.

c. The facility shall adopt and follow protocols provided by the manufacturer regarding the safe operation of the device.

d. If the operator has difficulty in holding the device stationary during the exposure, the operator shall use a stand to immobilize the device.

e. The registrant shall secure the hand-held device from unauthorized removal or use.

10. Multiple Tubes. Where two or more radiographic tubes are controlled by one exposure switch, the tube which has been selected shall be clearly indicated prior to initiation of the exposure. Only the selected tube can be energized. This indication shall be both on the X-ray control panel and at or near the tube housing assembly which has been selected.

11. Mechanical Support of Tube Head. The tube housing assembly supports shall be adjusted such that the tube housing assembly will remain stable during an exposure unless tube housing movement is a designed function of the X-ray system.

12. Battery Charge Indicator. On battery-powered generators, visual means shall be provided on the control panel to indicate whether the battery is in a state of charge adequate for proper operation.

13. Locks. All position locking, holding, and centering devices on the X-ray system components and systems shall function as intended.

B. Additional Requirements for Extraoral, Panoramic, and Cephalometric Units.

1. X-ray systems designed for use with extraoral image receptors and when used with an extraoral image receptor, shall be provided with means to limit the X-ray field in the plane of the image receptor so that such field does not exceed each dimension of the image receptor by more than 2 percent of the SID, when the axis of the X-ray beam is perpendicular to the plane of the image receptor. In addition, means shall be provided to align the center of the X-ray field with the center of the image receptor to within 2

percent of the SID, or means shall be provided to both size and alignment of the X-ray field such that the X-ray field at the plane of the image receptor does not extend beyond any edge of the image receptor. These requirements may be met with:

a. an assortment of removable, fixed-aperture, beam-limiting devices sufficient to meet the requirement for each combination of image receptor size and SID for which the unit is designed. Each such device shall have clear and permanent markings to indicate the image receptor size and SID for which it is designed; or

b. a beam-limiting device having multiple fixed apertures sufficient to meet the requirements for each combination of image receptor size and SID for which the unit is designed. Permanent, clearly legible markings shall indicate the image receptor size and SID for which each aperture is designed and shall indicate which aperture is in position for use.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2001 et seq. and 2104.B.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Nuclear Energy Division, LR 13:569 (October 1987), amended by the Office of Air Quality and Radiation Protection, Radiation Protection Division, LR 19:1421 (November 1993), amended by the Office of the Secretary, Legal Affairs Division, LR 33:449 (March 2007), amended by the Office of the Secretary, Legal Affairs and Criminal Investigations Division, LR 48:2942 (December 2022).

§610. Computed Tomography X-Ray Systems

Contrast Scale—Repealed.

CS—Repealed.

CT Conditions of Operation—Repealed.

CT Gantry—Repealed.

CTN—Repealed.

CT Number—Repealed.

Dose Profile—Repealed.

Elemental Area—Repealed.

Multiple Tomogram System—Repealed.

Noise—Repealed.

Nominal Tomographic Section Thickness—Repealed.

Picture Element—Repealed.

Reference Plane—Repealed.

Scan—Repealed.

Scan Increment—Repealed.

Scan Sequence—Repealed.

Scan Time—Repealed.

Single Tomogram System—Repealed.

Tomographic Plane—Repealed.

A. Requirements for CT Equipment

1. Technical and Safety Information. The technical and safety information relating to the conditions of operation, dose information, and imaging performance provided by the CT manufacturer shall be maintained by the facility.

2. Termination of Exposure.

a. Means shall be provided to terminate the X-ray exposure automatically by either de-energizing the X-ray source or shuttering the X-ray beam in the event of equipment failure affecting data collection. Such termination shall occur within an interval that limits the total scan time to no more than 110 percent of its preset value through the use of either a backup timer or devices that monitor equipment function.

b. A visible signal shall indicate when the X-ray exposure has been terminated through the means required by LAC 33:XV.610.A.2.a.

c. The operator shall be able to terminate the X-ray exposure at any time during a scan, or series of scans under CT X-ray system control, of greater than 0.5 second duration.

3. Tomographic Plane Indication and Alignment

a. For any single tomogram system, means shall be provided to permit visual determination of the tomographic plane or a reference plane offset from the tomographic plane.

b. For any multiple tomogram system, means shall be provided to permit visual determination of the location of a reference plane. This reference plane can be offset from the location of the tomographic planes.

c. If a mechanism using a light source is used to satisfy LAC 33:XV.610.A.3.a or b, the light source shall allow visual determination of the location of the tomographic plane or reference plane under ambient light conditions of up to 500 lux.

4. Beam On and Shutter Status Indicators and Control Switches.

a. The CT X-ray control and gantry shall provide visual indication whenever X-rays are produced.

b. Each emergency button or switch shall be clearly labeled as to its function.

5. Indication of CT Conditions of Operation. The CT X-ray system shall be designed such that the CT conditions of operation to be used during a scan or a scan sequence shall be indicated prior to the initiation of a scan or a scan sequence. On equipment having all or some of these conditions of operation at fixed values, this requirement may be met by permanent markings. Indication of CT conditions of operation shall be visible from any position from which scan initiation is possible.

6. Additional Requirements Applicable to CT X-ray Systems Containing a Gantry Manufactured After September 3, 1985

a. The total error in the indicated location of the tomographic plane or reference plane shall not exceed 5 millimeters.

b. If the X-ray production period is less than 0.5 second, the indication of X-ray production shall be actuated for at least 0.5 second. Indicators at or near the gantry shall be discernible from any point external to the patient opening where insertion of any part of the human body into the primary beam is possible.

c. The deviation of indicated scan increment versus actual increment shall not exceed +1 millimeter with any mass from zero to 100 kilograms resting on the support device. The patient support device shall be incremented from a typical starting position to the maximum incremented distance or 30 centimeters, whichever is less, and then returned to the starting position. Measurement of actual versus indicated scan increment may be taken anywhere along this travel.

d. Premature termination of the X-ray exposure by the operator shall necessitate resetting of the CT conditions of operation prior to the initiation of another scan.

B. Facility Design Requirements

1. Aural Communication. Provision shall be made for two way aural communication between the patient and the operator at the control panel.

2. Viewing Systems. Provisions shall be made as follows:

a. windows, mirrors, closed-circuit television, or an equivalent shall be provided to permit continuous observation of the patient during irradiation and shall be so located that the operator can observe the patient from the control panel; and

b. when the primary viewing system is by electronic means, an alternate viewing system (which may be electronic) shall be available for use in the event of failure of the primary viewing system.

C. CT Surveys, Performance Evaluations, Routine Quality Control, and Operating Procedures

1. Radiation Protection Surveys

a. All CT X-ray systems installed after February 20, 1991, shall have a radiation protection survey completed by, or under the general supervision of, a qualified expert within 30 days of installation. Existing systems not previously surveyed shall have a survey completed by, or under the general supervision of, a qualified expert. The survey shall be completed in no less than 12 months, and no more than 14 months, from [promulgation date], the effective date of these regulations. In addition, such surveys shall be done after any change in the facility or equipment that might cause a significant increase in radiation hazard.

b. The registrant shall obtain a written report of the survey from the qualified expert, and a copy of the report shall be made available to the department upon request.

2. System Performance Evaluations

a. The testing of the CT X-ray system shall be at intervals of no less than 12 months, and no more than 14 months, performed by, or under the general supervision of, a qualified expert who assumes the responsibility and signs the final performance evaluation report.

b. Evaluation standards and tolerances shall be established by the qualified expert and maintained by the facility. These standards and tolerances shall meet nationally recognized standards and tolerances for the CT X-ray system.

c. The evaluation of a CT X-ray system shall be performed within 30 days after initial installation and at intervals of no less than 12 months, and no more than 14 months thereafter. In addition, the qualified expert shall complete an evaluation of the CT system within 30 days or after any change or replacement of components which, in the opinion of the qualified expert, could cause a change in the radiation output or image quality.

d. The evaluation shall include but not be limited to:

i. geometric factors and alignment including:

(a). alignment light accuracy; and

(b). table increment accuracy;

ii. image localization from scanned projection radiograph (localization image);

iii. radiation beam width;

iv. image quality including:

(a). high-contrast (spatial) resolution;

(b). low-contrast resolution;

(c). image uniformity;

(d). noise; and

(e). artifact evaluation;

v. CT number accuracy;

vi. image quality for acquisition workstation display devices;

vii. a review of the results of the routine QC required under LAC 33:XV.610.C.3;

viii. a safety evaluation of audible and visual signals, posting requirements; and

ix. dosimetry.

e. The measurement of the radiation output of a CT X-ray system shall be performed with a calibrated dosimetry system. The calibration of such system shall be traceable to a national standard. The dosimetry system shall be calibrated per manufacturer recommendations not to exceed two years.

3. Routine Quality Control. A routine QC program on the CT system shall:

a. be developed by a qualified expert and include acceptable tolerances for points evaluated;

b. incorporate the use of a water equivalent phantom. At a minimum, noise, CT number, and artifacts shall be evaluated;

c. be completed at time intervals and under system conditions specified by the qualified expert. The interval shall not exceed one week; and

d. be documented and maintained for inspection by the department.

4. Operating Procedures

a. The operator of the CT X-ray system shall meet the minimum operator requirements of these regulations and be specifically trained on the operational features of the unit by a manufacturer's applications specialist or a qualified expert.

b. The following information shall be readily available to the CT operator:

i. instructions on performing routine QC, including the use of the CT phantom(s), a schedule of routine QC appropriate for the system, allowable variations set by the qualified expert for the indicated parameters, and the results of at least the most recent routine QC completed on the system; and

ii. if the qualified expert evaluation or routine QC of the CT X-ray system identifies that a system operating parameter has exceeded a tolerance established by the qualified expert, use of the CT X-ray system on patients shall be limited to those uses permitted by established written instructions of the qualified expert.

D. CT Radiation Protocol Committee (RPC). The registrant shall develop and maintain an RPC in accordance with the following.

1. Members of the RPC.

a. Members of the RPC shall include but not be limited to the:

i. lead CT radiologist;

ii. lead CT technologist;

iii. qualified expert; and

iv. other individuals as deemed necessary by the registrant (e.g., radiation safety officer, chief medical or administrative officer, radiology department administrator/manager).

b. If the registrant has more than one site with CT, they may establish a system-wide RPC.

c. Two or more registrants may form a cooperative RPC as long as each facility has a representative on the committee.

d. If the registrant has already established a radiation safety committee, the requirements of this Subsection may be delegated to that committee if the members meet the requirements of LAC 33:XV.610.D.1.

2. Responsibilities of the RPC. The RPC shall:

a. review existing CT protocols along with the evaluation and implementation of new and innovative technologies that can improve image quality and/or lower patient dose in comparison with the older protocol;

b. review the capabilities of the individual CT scanner to ensure maximum performance is achieved;

c. determine and review the protocols used frequently or that could result in significant doses. This review shall include acquisition and reconstruction parameters, image quality, and radiation dose. At a minimum, the facility shall review the following clinical protocols, if performed, at 12 month intervals:

- i. pediatric head;
- ii. pediatric abdomen;
- iii. adult head;
- iv. adult abdomen;
- v. adult chest; and
- vi. brain perfusion;

d. establish and implement written protocols, or protocols documented in an electronic reporting system that include, but are not limited to, the following:

- i. a method to be used to monitor the CT radiation output;
- ii. a standardized protocol naming policy;
- iii. a DRL and alert value for CT procedures reviewed in LAC 33:XV.610.D.2.c. Alert values may be applied by using trigger values in conformance with NEMA XR-29 or facility-established values and procedures as defined by the qualified expert;
- iv. actions to be taken for cases when the dose alert value was exceeded which may include patient follow-up; and

v. a process determining who has access and authority to make changes to the protocol management systems, including a method to prevent inadvertent or unauthorized modifications to a CT protocol;

e. if CT fluoroscopy is performed, the RPC shall establish and implement operating procedures and training designed to minimize patient and occupational radiation exposure;

f. provide a report to the radiation safety committee, or in the absence of a radiation safety committee, the person responsible for radiation safety. Report shall be provided at intervals of no less than 12 months, and no more than 14 months; and

g. at a minimum, the RPC members in LAC 33:XV.610.D.1.a.i-iii shall meet as often as necessary to conduct business, but at 12 month intervals.

3. Records

a. A record of each RPC meeting shall be maintained. The record shall include the date, names of individuals in attendance, minutes of the meeting, and any action taken.

b. The registrant shall maintain a record of the RPC policies and procedures.

c. The registrant shall maintain a record of radiation output information so the radiation dose may be estimated in accordance with established protocols (e.g., SSDE). The record shall include:

- i. patient identification;
- ii. type and date of examination;
- iii. identification of the CT system used; and
- iv. the dose values the CT system provides (e.g.,

CTDI_{vol}, DLP, SSDE).

E. Reserved.

F. PET CT and SPECT CT Systems. CT systems solely used to calculate attenuation coefficients in nuclear medicine studies shall meet the requirements in Subsections A – D of this Section, unless the following criteria are met.

1. In lieu of LAC 33:XV.610.C.2, a qualified expert shall complete a performance evaluation of the CT system following manufacturer's protocol. The evaluation shall be completed at intervals of no less than 12 months, and no more than 14 months.

2. In lieu of LAC 33:XV.610.C.3, routine QC checks shall be completed at intervals not to exceed one week. These checks shall be established and documented by a qualified expert following manufacturer's protocol.

G. Cone Beam Computed Tomography (CBCT) Systems

1. CBCT facilities shall meet LAC 33:XV.604, 606.B and C, and 610.A.2-6, as applicable.

2. Beam Alignment. The X-ray field in the plane of the image receptor shall not exceed beyond the edge of the image receptor by more than 2 percent of the SID, when the axis of the X-ray beam is perpendicular to the plane of the image receptor. In addition, the center of the X-ray field shall be aligned with the center of the image receptor to within 2 percent of the SID.

3. A performance evaluation shall be performed by, or under the general supervision of, a qualified expert. The evaluation shall follow nationally recognized standards and tolerances. The evaluation shall be performed within 30 days of the initial installation, at intervals of no less than 12 months, and no more than 14 months, and within 30 days after any change or replacement of components which, in the opinion of the qualified expert, could cause a change in the radiation output or image quality. The facility shall maintain documentation of the established standards and tolerances and testing results.

4. The registrant shall follow the quality control recommendations provided by the CBCT manufacturer. In the absence of manufacturer provided quality control recommendations, the registrant shall implement and document quality control guidelines established by the qualified expert in accordance with nationally recognized guidelines.

5. The registrant or radiation protocol committee, if established, shall implement and document a policy addressing deviations from established protocols.

6. The CBCT X-ray system shall only be operated by an individual who has been specifically trained in its operation.

7. The following information shall be readily available to the CBCT operator:

a. instructions on performing routine quality control, including the use of the CBCT phantom(s), a schedule of routine quality control appropriate for the system, allowable variations set by the qualified expert, if required, for the indicated parameters, and the results of at least the most recent routine quality control completed on the system.

8. Exemption. A qualified expert performance evaluation on CBCT systems capable of operating at no greater than 100 kV or 20 mA shall be performed at intervals not to exceed 24 months, or an interval approved by the department.

9. Exemption. The registrant using fluoroscopy systems capable of CBCT shall meet LAC 33:XV.610.G, except LAC 33:XV.610.A.2-6 in LAC 33:XV.610.G.1.

H. Veterinary CT Systems. CT systems, including CBCT systems, solely used in nonhuman imaging shall meet the requirements of LAC 33:XV.610.C.1 (radiation protection surveys) and are otherwise exempt from the standards of LAC 33:XV.610.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2001 et seq. and 2104.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Nuclear Energy Division, LR 13:569 (October 1987), amended by the Office of Air Quality and Radiation Protection, Radiation Protection Division, LR 19:1421 (November 1993), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:2586 (November 2000), amended by the Office of the Secretary, Legal Affairs and Criminal Investigations Division, LR 48:2944 (December 2022).

§611. Dual-Energy X-ray Absorptiometry (DXA) (Bone Densitometry)

A. DXA systems shall be:

1. registered in accordance with Chapter 2 of these regulations; and

2. at a minimum, maintained and operated in accordance with the manufacturer's specifications.

B. Operator Requirements. Operators shall complete training specific to patient positioning and the operation of the DXA system.

C. During the operation of any DXA system:

1. in the absence of a survey performed by or under the supervision of a qualified expert determining the minimum distance the operator may be from the patient and radiation source, the operator, ancillary personnel, and members of the general public shall be positioned at least two meters from the patient and DXA system during the examination.

D. Quality Assurance. In addition to the applicable requirements in LAC 33:XV.603.F.1, a facility performing DXA shall conform to the DXA system manufacturer recommendations and recommendations of recognized professional societies, such as the International Society for Clinical Densitometry or the American College of Radiology.

E. Records. The registrant shall keep the following records for a minimum of three years:

1. the maintenance and QC tests as prescribed by LAC 33:XV.611.A.2 and 611.D; and

2. operator training records as prescribed by LAC 33:XV.611.B.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2001 et seq. and 2104.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of the Secretary, Legal Affairs and Criminal Investigations Division, LR 48:2947 (December 2022).

§699. Appendices A, B, C, and D

Appendix A Information on Radiation Shielding Required for Plan Reviews

* * *

Appendix B Design Requirements for an Operator's Booth

A. - B. ...

1. When a door or movable panel is used as an integral part of the booth structure, it shall have an interlock that will prevent an exposure when the door or panel is not closed.

B.2. - D.1.a. ...

b. the operator can have full view of any occupant of the room, and the operator can view any entry into the room. If any door that allows access to the room cannot be seen from the booth, then that door shall have an interlock controlling the exposure that will prevent the exposure if the door is not closed.

D.2. - D.4.b. ...

Appendix C Information to be Submitted by Persons Proposing to Conduct Healing Arts Screening

Persons requesting that the department approve a healing arts screening program shall submit the following information for evaluation and approval.

A. - B. ...

C. A detailed description of the X-ray examinations proposed in the screening program, i.e., type and number of views.

D. Description of the population to be examined in the screening program, i.e., age range, sex, physical condition, and other appropriate information.

E. - F. ...

G. A description of the X-ray quality control program.

H. A copy of the protocol information for the X-ray examination procedures to be used.

I. - J. ...

K. The name and address of the practitioner licensed in Louisiana who will interpret the radiograph(s).

L. Procedures to be used in advising the individuals screened and their practitioner of the healing arts or health care provider of the results of the screening procedure and any further medical needs indicated.

M. Procedures for the retention or disposition of the radiograph(s) and other records pertaining to the X-ray examination(s).

N. - P. ...

Q. Frequency of screening of individuals.

R. The duration of the screening program.

Appendix D

A. Each installation using a radiographic X-ray system and using analog image receptors (radiographic film) shall have available suitable equipment for handling and processing radiographic film in accordance with the following provisions:

1. manually developed film:

a. processing tanks for manually developed film shall be constructed of mechanically rigid, corrosion resistant material;

b. the temperature of solutions in the tanks for manually developed film shall be maintained within the range of 60°-80°F (16°-27°C). Film shall be developed in accordance with the time-temperature relationships recommended by the film manufacturer or, in the absence of such recommendations, with the following time-temperature chart.

Time-Temperature Chart		
Thermometer Reading (Degrees)		Minimum Developing Time (Minutes)
°C	°F	
26.7	80	2
26.1	79	2
25.6	78	2 1/2
25.0	77	2 1/2
24.4	76	3
23.9	75	3
23.3	74	3 1/2
22.8	73	3 1/2
22.2	72	4
21.7	71	4
21.1	70	4 1/2
20.6	69	4 1/2
20.0	68	5
19.4	67	5 1/2
18.9	66	5 1/2
18.3	65	6
17.8	64	6 1/2
17.2	63	7
16.7	62	8
16.1	61	8 1/2
15.6	60	9 1/2

c. devices shall be utilized for manually developed film that will:

i. indicate the actual temperature of the developer; and

ii. signal the passage of a preset time appropriate to the developing time required;

2. automatic processors and other closed processing systems:

a. films shall be developed by automatic processors and other closed processing systems in accordance with the time-temperature relationships recommended by the film manufacturer; in the absence of such recommendations, the film shall be developed using the following chart.

Developer Temperature		Minimum Immersion Time*
°C	°F	
35.5	96	19
35	95	20
34.5	94	21
34	93	22
33.5	92	23
33	91	24
32	90	25
31.5	89	26
31	88	27
30.5	87	28
30	86	29
29.5	85	30

*Immersion time only, no crossover time included.

b. the specified developer temperature and immersion time shall be posted in the darkroom or on the automatic processor in a manner that provides sufficient and legible notice to persons present in these areas;

3. other requirements:

a. pass boxes, if provided, shall be so constructed as to exclude light from the darkroom when cassettes are placed in or removed from the boxes, and shall incorporate adequate shielding from stray radiation to prevent exposure of undeveloped film;

b. the darkroom shall be light tight and use proper safelighting such that any film type in use exposed in a cassette to X-radiation sufficient to produce an optical density from one to two when processed shall not suffer an increase in density greater than 0.1 (0.05 for mammography) when exposed in the darkroom for two minutes with all safelights

on. If used, daylight film handling boxes shall preclude fogging of the film;

c. darkrooms typically used by more than one individual shall be provided a positive method to prevent accidental entry while undeveloped films are being handled or processed;

d. film shall be stored in a cool, dry place and shall be protected from exposure to stray radiation. Film in open packages shall be stored in a light tight container;

e. film cassettes and intensifying screens shall be inspected periodically and shall be cleaned and replaced as necessary to best assure radiographs of acceptable diagnostic quality;

f. outdated X-ray film shall not be used for human diagnostic radiographs, unless the film has been stored in accordance with the manufacturer's recommendations and a sample of the film passes a sensitometric test for normal ranges of base plus fog and speed; and

g. film developing solutions shall be prepared in accordance with the directions given by the manufacturer of the chemicals, and shall be maintained in strength by replenishment or renewal so that full development of film is accomplished within the time specified by the manufacturer.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2001 et seq. and 2104.B.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Nuclear Energy Division, LR 13:569 (October 1987), amended by the Office of Air Quality and Radiation Protection, Radiation Protection Division, LR 19:1421 (November 1993), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:2586 (November 2000), amended by the Office of the Secretary, Legal Affairs and Criminal Investigations Division, LR 48:2947 (December 2022).

Courtney J. Burdette
General Counsel

2212#021

RULE

**Office of the Governor
Division of Administration
Office of Group Benefits**

**Health Benefits—Pre-Existing Condition Limitation
(LAC 32:I:1509)**

In accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq., as authorized pursuant to R.S. 42:801 and 42:802, the Office of the Governor, Division of Administration, Office of Group Benefits, has repealed LAC 32:I:1509. The provisions of the Rule no longer apply to the benefits offered by the Office of Group Benefits, due to the passage of the federal Patient Protection and Affordable Care Act. This Rule is hereby adopted on the day of promulgation.

Title 32

**EMPLOYEE BENEFITS
Part I. General Provisions**

Chapter 15. Participation by Active or Retired Members of the Louisiana National Guard

§1509. Health Benefits—Pre-Existing Condition Limitation

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 42:801(C), 802(B)(2), and 42:808.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Office of Group Benefits, LR 31:2010 (August 2005), repealed LR 48:1948 (December 2022).

David W. Couvillon
Chief Executive Officer

2212#011

RULE

Department of Health Behavior Analyst Board

Continuing Education (LAC 46:VIII.803 and 807)

In accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq., the Behavior Analyst Board has amended LAC 46:VIII.803 and 807. This amendment establishes new deadlines for licensed behavior analyst and state certified assistant behavior analyst to complete continuing education hours within biennial reporting periods beginning in July of 2024. This amended Rule also deletes two categories previously listed as acceptable for continuing professional development. Continuing education is an ongoing process consisting of learning activities that increase professional development. This Rule is hereby adopted on the day of promulgation.

Title 46

PROFESSIONAL AND OCCUPATIONAL STANDARDS

Part VIII. Behavior Analysts

Chapter 8. Continuing Education Requirements for Licensed Behavior Analysts and State Certified Assistant Behavior Analysts

§803. Requirements

A. For the reporting period that begins July 2026 and henceforth, licensed behavior analysts will be required to report 32 total credits of continuing professional development, 4 of which must be in Ethics. State certified assistant behavior analysts will be required to report 20 total credits of continuing professional development, four of which must be in ethics. Certificants/licensees should not repeat a continuing education event in order to obtain additional continuing credits. The hours must conform to the distribution listed below.

1. Only for the reporting period of July 2024, credits of continuing professional development will be required in the following amounts and must conform to the distribution listed below.

a. Licensed behavior analyst must report 24 total credits of continuing professional development, three of which must be in ethics.

b. State certified assistant behavior analyst must report 15 total credits of continued professional development, three of which must be in Ethics.

B. Within each reporting period, four of the required hours or credits of continuing professional development must be within the area of ethics.

C. Certificants/licensees can accumulate continuing professional development credits in seven categories.

1. - 2.b....

3. - 3.c.Repealed.

4. - 5.c....

6. - 6.b.Repealed.

7. - 7.b....

HISTORICAL NOTE: Promulgated by the Department of Health, Behavior Analyst Board, LR 42:1514 (September 2016), amended by the Department of Health, Behavior Analyst Board, LR 43:1961 (October 2017), LR 48:2949 (December 2022).

§807. Noncompliance

A. - B. ...

C. If the certificant/licensee fails to meet continuing professional development requirements by the appropriate date, the certificate/license shall be regarded as lapsed at the close of business June 30th of the year for which the certificant/licensee is seeking renewal.

D. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3713.

HISTORICAL NOTE: Promulgated by the Department of Health, Behavior Analyst Board, LR 42:1515 (September 2016), amended by the Department of Health, Behavior Analyst Board, LR 43:1962 (October 2017), LR 48:2949 (December 2022).

Rhonda Boe
Executive Director

2212#007

RULE

Department of Health Behavior Analyst Board

Ethical Standards (LAC 46:VIII.1001)

In accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq., the Behavior Analyst Board has amended §1001 by updating to the current Professional and Ethical Compliance Code which provides authority to enforce ethical standards. This Rule is hereby adopted on the day of promulgation.

Title 46

PROFESSIONAL AND OCCUPATIONAL STANDARDS

Part VIII. Behavior Analysts

Chapter 10. Ethical Standards

§1001. Professional and Ethical Compliance Code

A. The Louisiana Behavior Analyst Board incorporates by reference and maintains that Licensed Behavior Analysts, State Certified Assistant Behavior Analysts and Registered Line Technicians shall follow the Behavior Analyst Certification Board's (hereinafter referred to as BACB's) Professional and Ethical Compliance Code, approved by the BACB's Board of Directors on August 7, 2014, effective January 1, 2016 and updated January 1, 2022. This updated code replaces the Professional and Ethical Compliance Code (2014) and now serves as the BACB's guide on ethical matters and as the basis for disciplinary complaints and will also be the Louisiana Behavior Analyst Board's (hereinafter referred to as LBAB) guide on ethical matters and as such enforceable by the LBAB. The information regarding the code can be found on the BACB's official web site, bacb.com, under the ethics section.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3704

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Behavior Analyst Board, LR 42:1515 (September 2016), amended LR 48:2949 (December 2022).

Rhonda Boe
Executive Director

2212#006

RULE

**Department of Health
Behavior Analyst Board**

**Licensing and Administrative Fees
(LAC 46:VIII.305)**

In accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq., the Behavior Analyst Board has amended §305 in order to add the stipulation not to exceed the maximum amounts listed. The board has lowered renewal fees for licensure and certification for the past two years through the filing of Emergency Rules. The amendment allows the board to lower fees without the necessity of an Emergency Rule. This Rule is hereby adopted on the day of promulgation.

Title 46

**PROFESSIONAL AND OCCUPATIONAL
STANDARDS**

Part VIII. Behavior Analysts

Chapter 3. Application Procedures and Board Fees

§305. Licensing and Administrative Fees

A. Licensing Fees

Application for Licensed Behavior Analyst	\$400
Application for State Certified Assistant Behavior Analyst	\$250
Registration for Line Technicians	\$50.00
Temporary Licensure	\$125
Annual Renewal – Behavior Analyst 2022 Only	\$300
Annual Renewal – Behavior Analyst	\$200
Annual Renewal—Assistant Behavior Analyst 2022 Only	\$187.50
Annual Renewal - Assistant Behavior Analyst	\$125.00
Annual Renewal - Line Technicians	\$50.00
Jurisprudence Examination	\$75
Criminal Background Check	\$50

B. Administrative Fees

Late fees	\$50.00
Duplicate copy of license	\$15.00
Official Name Change on License	\$25.00
License Verification	\$15.00
Insufficient Check Fee	\$15.00
Copies of documents	\$2/page

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3714.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Behavior Analysts Board, LR 40:1930 (October 2014), amended by the Department of Health, Behavior Analyst Board, LR 48:2950 (December 2022).

Rhonda Boe
Executive Director

2212#005

RULE

**Department of Health
Behavior Analyst Board**

Renewal Requirements (LAC 46:VIII.401 and 402)

In accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq., the Behavior Analyst Board has amended §401 A, B, C, and D., §402 A, and B in order to change the renewal deadline date to a time of year that does not create a financial hardship. The change creates a six-month gap and the amendments address additional changes required to complete the cycle to accommodate the gap. The amendment also lowers renewal fees for licenses and certificates. The amendment also lowers renewal fees for registered line technicians for one renewal period only. This Rule is hereby adopted on the day of promulgation.

Title 46

**PROFESSIONAL AND OCCUPATIONAL
STANDARDS**

Part VIII. Behavior Analysts

**Chapter 4. License, Certification and Registration
Renewal Process**

§401. Renewal Process

A. A licensed behavior analyst shall renew their current license every year by July 1st, beginning in 2024. The renewal period shall open in May and will close June 30th annually. The licensed behavior analyst must submit the required renewal forms, renewal fee and proof of fulfillment of all continuing education requirements, as approved by the board. Renewals for 2022 only shall be due by December 31, 2022 and the renewal fee shall be \$300 to cover one and a half years, specifically January 1, 2023 through June 30, 2024. Thereafter, renewal fees shall be \$200 annually and cover one year, specifically July 1 through June 30.

B. A state certified assistant behavior analyst shall renew their current license every year by July 1, beginning in 2024. The renewal period shall open in May and will close June 30 annually. The state certified assistant behavior analyst must submit the required renewal forms, renewal fee and proof of fulfillment of all continuing education requirements, as approved by the board. Renewals for 2022 only shall be due by December 31, 2022 and the renewal fee shall be \$187.50 to cover one and a half years, specifically January 1, 2023 through June 30, 2024. Thereafter, renewal fees shall be \$125 annually and cover one year, specifically July 1 through June 30.

C. A licensed behavior analyst shall renew the registration of all registered line technicians under their supervision every year by July 1st beginning in 2024. The renewal period shall open in May and close June 30 annually. The licensed behavior analyst in conjunction with the registered line technicians must complete the proper renewal forms accompanied with the renewal fee as determined by the Board. Renewals for 2022 only shall be due by December 31, 2022 and the renewal fee shall be \$50 to cover one and a half years, specifically January 1, 2023 through June 30, 2024. Thereafter, renewal fees shall be \$50 annually and cover one year, specifically July 1st through June 30.

D. A license, certificate or registration renewal will be valid for one year beginning July 1 through June 30 for each renewal period, with the exception of the year specifically noted above.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3709.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Behavior Analysts Board, LR 40:1932 (October 2014), amended by the Department of Health, Behavior Analyst Board, LR 48:2950 (December 2022).

**Subchapter B. Supervision Requirements
for Registered Line Technicians (RLT)**

§402. Noncompliance—Renewal Process

A. Noncompliance shall include, in part, incomplete forms, unsigned forms, failure to file all of the required renewal forms by June 30, failure to postmark the renewal package by June 30 and failure to report a sufficient number of acceptable continuing education credits as determined by the board. Noncompliance in the year 2022 only will have a deadline of December 31, thereafter deadline will be June 30.

B. If a license, certificate or registration is not renewed by June 30, due notice having been given, the license, certificate, or registration shall be regarded as lapsed effective July 1, with the exception of the renewal year 2022 as outlined above. An individual shall not practice or provide with supervision applied behavior analysis in Louisiana while the license, certificate, or registration is lapsed.

C. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3709.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Behavior Analysts Board, LR 40:1932 (October 2014), amended by the Department of Health, Behavior Analyst Board, LR 48:2951 (December 2022).

Rhonda Boe
Executive Director

2212#008

RULE

**Department of Health
Board of Speech-Language Pathology and Audiology**

Speech-Pathology and Audiology
(LAC 46:LXXV.Chapters 1-7)

Editor's Note: This Rule is being repromulgated to correct citation errors. The original Rule may be viewed on pages 2735-2754 of the November 20, 2022 *Louisiana Register*.

In accordance with the provisions of the Administrative Procedures Act, R.S. 49:950 et seq., and through the authority granted in R.S. 37:3085, the Board of Speech-Language Pathology and Audiology has amended its current regulations to make technical changes and clarifications, edits to definitions, remove the clinical practicum hour requirement for audiologists, add a waiver for audiology applicants, revise the duties of speech-language pathology assistant license and provisional speech-language pathology assistant licenses, as well as, revise the procedural rules for investigation of complaints. This Rule is hereby adopted on the day of promulgation.

**Title 46
PROFESSIONAL AND OCCUPATIONAL
STANDARDS**

Part LXXV. Speech Pathology and Audiology

Chapter 1. General Rules

§103. Definitions

A. ...

Accredited Educational Institution—college or university that holds regional accreditation.

Accredited Educational Program—a graduate program in audiology or speech-language pathology that is accredited by the Council for Academic Accreditation in Audiology and Speech-Language Pathology (CAA) or the Accreditation Commission for Audiology Education (ACAE).

Aides—individuals not licensed by the Louisiana Board of Examiners for Speech-Language Pathology and Audiology (LBESPA) who, after appropriate training, perform tasks that are prescribed, directed, and supervised by speech-language pathologists or audiologists licensed in accordance with R.S. 37:2659(A) or (B). Licensed audiologists and licensed speech-language pathologists are legally, ethically, and morally responsible for the services provided by aides working under their direction.

Assistant Licensee—an individual who meets the qualifications established by R.S. 37:2659(F), and works under the direct supervision of a licensed speech-language pathologist and performs only those duties specified in §119. May engage in the provision of services via telehealth delivery as directed by their supervisor, provided all supervision guidelines are met.

* * *

Criminal History Record Information—information collected by state and federal criminal justice agencies consisting of identifiable descriptions and notations of arrests, detentions, indictments, bills of information or any other formal criminal charges, and any disposition arising therefrom, including sentencing, criminal correctional supervision and release.

* * *

Direct Supervision—the supervisor observing the licensee engaging in a specified clinical activity with a patient/client in order to obtain knowledge and provide guidance regarding the supervisee's clinical work. The supervisor shall accomplish this task either by being physically present in the room or through the use of a secure live video, live stream or web cam.

* * *

Facilitator—the individual at the client site who assists with the delivery of telehealth services at the direction of the audiologist or speech-language pathologist.

* * *

Full-Time Supervised Professional Employment/Experience—a minimum of 36 weeks engaged in the provision of clinical services. Volunteer services are not acceptable.

Grace Period—the period in which an applicant may be employed while an initial application for licensure is being considered by the board. The grace period cannot exceed 60 days from the date that the application is received by the board.

* * *

Indirect Supervision—the utilization of alternative methods, other than direct supervision, to acquire knowledge of a supervisee’s clinical work, e.g. review of client folders and record keeping, scheduling, and planning.

Nine Months of Full-Time Supervised Postgraduate Professional Employment/Experience—repealed.

On-Site In-View Observation—repealed.

Part-Time Employment/Experience—a minimum of 15 hours, but less than 30 clock hours per week.

Part-Time Postgraduate Professional Employment Experience—part-time experience greater than or equal to a minimum of 15 hours per week up to 72 weeks of employment experience.

Provisional Assistant Licensee—an individual who meets the qualifications established in R.S. 37: 2659(G) and works under the direct supervision of a licensed speech-language pathologist and performs only those duties specified in §121. This person has completed a minimum of 100 of 225 supervised clinical practicum hours and is working to complete the remaining hours on-the-job and/or through a regionally accredited educational institution or its cooperating programs. May not engage in the provision of services via telehealth delivery; however, the individual may function as a facilitator given appropriate training.

Supervised On-the-Job Training—direct supervision hours which have been obtained during paid employment, and documented on the form provided by the board.

Telehealth—also known as telepractice, is a mode of delivering audiology and speech-language pathology services that utilizes information and communication technologies to enable the diagnosis, consultation, treatment, education care management, and self-management of clients at a distance from the audiologist or speech-language pathologist provider. Telehealth allows services to be accessed when providers are in a distant site and patients are in the originating site. Telehealth facilitates self-management and caregiver support for patients and includes synchronous interactions and asynchronous store and forward transfers.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 14:705 (October 1988), amended LR 22:346 (May 1996), LR 27:197 (February 2001), LR 28:1781 (August 2002), LR 30:2307 (October 2004), LR 33:2192 (October 2007), LR 37:2392 (August 2011), amended by the Department of Health, Board of Speech-Language Pathology and Audiology, LR 42:1665 (October 2016), LR 45:249 (February 2019), LR 48:2735 (November 2022), repromulgated LR 49:2951 (December 2022).

§105. Designations

A. - A.2. ...

3. Repealed.

4. PL-SLP—Provisional Speech-Language Pathologist

5. R-SLP—Restricted Speech-Language Pathologist

B. ...

1. When signing formal and informal professional documents, speech-language pathology assistants and provisional speech-language pathology assistants shall write their full license title, e.g., B.A., SLP assistant or B.A.,

provisional SLP assistant. speech-language pathology assistants and provisional speech-language pathology assistants shall always identify themselves as such in professional interactions.

C. Titles and academic credential designations shall represent earned degrees obtained through regionally accredited university programs. To appropriately represent the level of education in the area of practice, when listing an educational designation, the licensee shall list the highest degree earned in audiology or speech-language pathology. In addition, graduate degrees earned in other disciplines must specify the area in which the degree was earned [e.g., B.S. (speech-language therapy), M.Ed. (administration)]. When listing credentials, licensees should sequentially list their name, educational designation, license designation, and professional certification, e.g., M.A., L-SLP, CCC-SLP.

D. Telehealth registrants must list their field of practice, audiology or speech-language pathology, and indicate “limited to telepractice only”.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 22:346 (May 1996), amended LR 27:197 (February 2001), LR 30:2308 (October 2004), LR 33:2192 (October 2007), 48:2736 (November 2022), repromulgated LR 49:2950 (December 2022).

§107. Qualifications for Licensure

A. Coursework Requirements—Audiology License. The applicant shall submit official transcripts from one or more regionally accredited colleges or universities (including programs in candidacy) evidencing completion of at least 75 semester credit hours of post-baccalaureate coursework for applicants who completed a doctoral program after January 1, 2005.

B. Coursework Requirements—Audiology License. The following coursework requirements apply to applicants who completed a master's program after January 1, 1994.

1. The applicant shall submit official transcripts from one or more regionally accredited colleges or universities evidencing completion of at least 75 semester hours of coursework which constitutes a well-integrated program.

2.a. - b. ...

C. Coursework Requirements—Audiology License. The following coursework requirements apply to applicants who completed a master's program which was begun prior to January 1, 1994.

1. - 2.c. ...

D. Coursework Requirements—Speech-Language Pathology License and Provisional Speech-Language Pathology License. The applicant shall submit official transcripts from one or more regionally accredited colleges or universities (including programs in candidacy) evidencing completion of 75 semester credit hours, including at least 36 at the graduate level, from an accredited speech-language pathology program for applicants who began a graduate program after January 1, 2004.

E. - F.2.b. ...

c. A maximum of 6 academic semester credit hours associated with clinical practicum may be counted toward the minimum of 30 semester credit hours of professional coursework, but those hours may not be used to satisfy the minimum of 12 semester credit hours in speech/language

disorders, 6 hours in language disorders, or 3 hours in audiology, or the 21 graduate credits in the professional area for which the license is sought.

*If seeking licensure in both speech-language pathology and audiology, at least 15 graduate level semester hours in each area are required.

G. - H.1.c. ...

2. Audiology License

a. The program or clinical director from an accredited educational institution must verify that the individual has met the breadth and depth of clinical experiences.

b. - c. ...

3. Speech-Language Pathology Assistant License

a. 225 clinical practicum hours are required, the first 100 of which shall have been obtained through a regionally accredited educational institution or its cooperating programs. Of the 100 hours obtained through a regionally accredited educational institution, 75 shall be obtained through direct patient/client contact. No simulation experiences will be accepted. The remaining 25 hours may be obtained through observation of assessment and therapy. It is recommended that the direct patient/client contact hours be obtained in at least two practicum sites with one site being a public school setting. The first 75 hours of direct patient/client contact shall be obtained in the following categories:

i. - ii. ...

iii. the remaining 35 hours may be obtained in the areas of speech, language or hearing disorders. A maximum of 5 of these hours may be in the area of audiology. It is recommended that a minimum of 20 hours be obtained in articulation.

b. The remaining 125 hours must be obtained on-the-job and/or through a regionally accredited educational institution or its cooperating programs. Simulation experiences are not accepted.

4. - 4.a.i.(b). ...

(c). the remaining 35 hours may be obtained in the areas of speech, language or hearing disorders. A maximum of 5 of these hours may be in the area of audiology. It is recommended that a minimum of 20 hours be obtained in articulation.

b. The additional 125 hours required to upgrade to the speech-language pathology assistant license shall be obtained within three years of the date of issuance of the provisional assistant license and may be obtained by completing the remaining hours on-the-job and/or through a regionally accredited educational institution or its cooperating programs. Those hours obtained through supervised on-the-job training must consist of direct supervision hours and will only be accepted from the date that the application for license is received by the board.

c. A provisional speech-language pathology assistant must request, in writing, deferment of the three-year period to complete licensure upgrade requirements. Such deferment may only be requested if there is an extenuating circumstance, such as inability to obtain employment in the area of speech-language pathology. The license must be renewed annually. Such deferment may only be held for a period of three years from the time of board approval.

i. If the licensee has never worked as a provisional speech-language pathology assistant, a notarized statement shall be submitted to the board annually.

ii. ...

iii. Licensees on inactive status may retain their license by payment of the annual renewal fee. In order to resume practice as a speech-language pathology assistant, licensees on inactive status shall demonstrate completion of 5 clock hours of continuing education in the area of licensure for each year that inactive status was maintained (maximum of 25 hours).

I. Equivalency Requirements—Speech-Language Pathology, Provisional Speech-Language Pathology, or Audiology License

1. Individuals who do not possess a graduate degree in either audiology or speech-language pathology but wish to obtain a license through the equivalency process shall meet the coursework, practicum and examination requirements for the area in which licensure is sought as defined in the board's rules entitled coursework requirements: audiology license; coursework requirements: speech-language pathology license and provisional speech-language pathology license; clinical practicum hour requirements and examination requirement.

J. Postgraduate Professional Employment/Experience

1. A graduate-level speech-language pathologist must submit verification of 36 weeks of full-time postgraduate professional employment/experience or its full-time equivalent.

2. Repealed.

K. Examination Requirement—Speech-Language Pathology License, Provisional Speech-Language Pathology License, Audiology License

1. The board recognizes only the educational testing service's specialty area examinations for audiology and speech-language pathology as the licensure examination for audiology and/or speech-language pathology. Scores received directly from the applicant are not acceptable for licensing purposes.

2. The passing scores for the audiology and speech-language pathology area examinations are determined by the educational testing service.

3. If an individual has never held a license to practice audiology or speech-language pathology in another state, and if the degree program was completed greater than 10 years from the date of application, the passing score on the specialty area examination for audiology or speech-language pathology must have been obtained within the last 5 years.

L. - L.1.c. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 14:706 (October 1988), amended LR 22:346 (May 1996), LR 27:197 (February 2001), repromulgated LR 27:1690 (October 2001), amended LR 28:1781 (August 2002), LR 30:2308 (October 2004), LR 33:2192 (October 2007), LR 37:2393 (August 2011), LR 39:1042 (April 2013), amended by the Department of Health, Board of Speech-Language Pathology and Audiology, LR 42:1666 (October 2016), LR 48:2736 (November 2022), repromulgated LR 49:2952 (December 2022).

§109. Licensure Application Procedures

A. - B. ...

C. Official transcripts shall be sent to this board directly from the college or university from which the academic requirements were earned.

D. Documentation of supervised clinical practicum hours shall be submitted on university forms signed by a clinical supervisor or director, and must be submitted along with the application form. The hours submitted must reflect the depth and breadth of clinical experiences across the lifespan.

E. The initial license fee submitted to this board with the application form shall be paid by credit card.

F. - G. ...

H. Documentation of 36 weeks of postgraduate professional employment/experience, a passing score on the educational testing service's specialty area examination, and verification of supervised clinical practicum hours may be waived for individuals who submit verification that they hold the certificate of clinical competence from the American Speech-Language-Hearing Association or proof of certification from the American Board of Audiology (ABA) with proof of passing the national exam. Documentation must be submitted with the application form.

I. - L. ...

M. Applicants who have not obtained licensure within one year of the board's receipt of the application shall be deemed to have abandoned the application, resulting in mandatory reporting to the appropriate federal data bank. An applicant may request a withdrawal of the application subject to review and approval by the board.

N. Individuals holding an unrestricted audiology or speech-language pathology license from another state shall be allowed to practice in Louisiana for five consecutive days within each renewal period upon proof of current licensure submitted to the board office 10 days prior to the scheduled activity.

O. When there is probable cause to believe that an applicant practiced illegally in Louisiana as an audiologist, speech-language pathologist, and/or speech-language pathology assistant, the board may offer a consent agreement and order which will grant the individual a license, subject to the following specified terms and conditions.

1. Within 90 days of the date of the consent agreement and order, the applicant shall take and pass an open book examination regarding R.S. 37:2650-2666, the board's rules and regulations, and ethical questions.

a. Open book test fee shall be \$30. The retest fee shall be \$10 per section.

b. Applicants have 4 1/2 hours to complete all sections of the test.

c. The open book examination or any section may be re-taken anytime within the 90 days.

d. Notice of the consent agreement and order shall be published and reported.

e. If the applicant fails to successfully complete all requirements set forth in the above paragraphs, the applicant's license shall be suspended without further notice until the board receives and accepts documentation of the applicant's completion of the consent agreement and order requirements.

P. Temporary Registration during a Declared Public Health Emergency

1. In a public health emergency lawfully declared as such by the governor of Louisiana, the requirement for a Louisiana license as an audiologist, speech-language pathologist, or speech-language pathology assistant may be waived by the board at that time to those out-of-state audiologists, speech-language pathologists, or speech-language pathology assistants, whose licenses, certifications or registrations are current and unrestricted in another jurisdiction of the United States, for a period of time not to exceed the duration and scope of R.S. 29:769(E), as more particularly set forth in this Section.

2. The following requirements for temporary registration may be imposed pursuant to the declared state of emergency and shall be in accordance with rules promulgated by the board.

3. An audiologist, speech-language pathologist, or speech-language pathology assistant not licensed in Louisiana, whose licenses, certifications or registrations are current and unrestricted in another jurisdiction of the United States, may gratuitously provide audiology and speech-language pathology services if:

a. the audiologist, speech-language pathologist, or speech-language pathology assistant has photo identification and a license to verify a current and unrestricted license, certification or registration in another jurisdiction of the United States, and properly registers with the board prior to providing audiology or speech-language pathology services in Louisiana as follows:

i. the audiologist, speech-language pathologist, or speech-language pathology assistant is engaged in a legitimate relief effort during the emergency period, and provides satisfactory documentation to the board of the location site(s) that he/she will be providing gratuitous audiology or speech-language pathology services;

ii. the audiologist, speech-language pathologist, or speech-language pathology assistant shall comply with the Louisiana Speech-Language Pathology and Audiology Practice Act, board rules, and other applicable laws, as well as practice in good faith, and within the reasonable scope of his/her skill, training, and ability; and

iii. the audiologist, speech-language pathologist, or speech-language pathology assistant renders services on a gratuitous basis with no revenue of any kind to be derived whatsoever from the provision of services within the state of Louisiana.

4. This temporary registration period shall not exceed 60 days at the discretion of the board, with the potential extension of up to two additional periods not to exceed 60 days for each extension as determined appropriate and necessary by the board.

5. All interested audiologists, speech-language pathologists, and speech-language pathology assistants shall submit a copy of their respective current and unrestricted licenses, certifications or registrations issued in other jurisdictions of the United States and photographic identification, as well as other requested information, to the Louisiana Board of Examiners for Speech-Language Pathology and Audiology for registration with this agency

prior to gratuitously providing audiology or speech-language pathology services in Louisiana.

6. Should a qualified audiologist, speech-language pathologist, or speech-language pathology assistant registered with the board fail to comply with any requirement or condition established by this Section, the board may terminate his/her registration upon notice and hearing.

7. In the event an audiologist, speech-language pathologist, or speech-language pathology assistant fails to register with the board, but practices audiology or speech-language pathology, whether gratuitously or otherwise, then such conduct will be considered the unlawful practice of audiology or speech-language pathology and prosecuted accordingly.

Q. Volunteer Services. Individuals seeking to provide services on a voluntary basis shall hold an unrestricted out-of-state license in the area of practice, shall be deemed to meet all of the qualifications for license set forth by this Chapter, and shall abide by the Code of Ethics.

R. Licensing Military Members and Military Spouses

1. Expedited application for licensure in the area of audiology or speech-language pathology shall be granted to military members and military spouses licensed, certified or registered in another jurisdiction, while the individual is satisfying the requirement for licensure.

a. Applications shall be submitted in accordance with §109.

b. Military members shall submit with the application a copy of current military-issued identification and military orders.

c. Applicants who are the spouse of military personnel shall submit with the application a copy of current military-issued identification, marriage license, and an affidavit attesting that applicant is married to military personnel.

2. Military applicants shall submit:

a. military members—official, primary-source documentation verifying requirements met in accordance with §107 and §115;

b. military spouse—official, primary-source documentation verifying requirements met in accordance with §107 and §115.

3. Military members and military spouses shall be given a 60-day grace period for submission of official documentation from the date their notarized application and license fee are received by the board office, regardless of lapsed license status. The board may consider an extension of this grace period as per House Concurrent Resolution 74 of the 2015 Regular Session of the Louisiana Legislature.

4. The provisions of this Section shall not apply to any applicant receiving a dishonorable discharge or a military spouse whose spouse received a dishonorable discharge.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 14:707 (October 1988), amended LR 22:352 (May 1996), LR 27:199 (February 2001), LR 28:1974 (September 2002), LR 30:2311 (October 2004), LR 33:2193 (October 2007), LR 37:2393 (August 2011), repromulgated LR 37:2623 (September 2011), LR 39:1043 (April 2013), amended by the Department of Health, Board of Speech-Language Pathology

and Audiology, LR 42:1666 (October 2016), LR 45:251 (February 2019), LR 48:2738 (November 2022), repromulgated LR 49:2954 (December 2022).

§111. Application for Telehealth Registration

A. An application to practice audiology and/or speech-language pathology via telepractice shall be made on forms supplied by the board.

B. Criminal history record information must be submitted with the application form.

C. Proof of unrestricted, unencumbered current licensure granted in the home state based on standards at least equivalent to those in Louisiana shall be submitted.

D. Applicants shall provide official verification of licensure and/or registration status in each state, including any formal disciplinary action resulting in sanction and/or disciplinary proceedings which are pending.

E. The initial telehealth registration fee submitted to this board shall be paid by cashier's check, money order, or credit card.

F. Until an application has been approved by the board, the audiologist and/or speech-language pathologist shall not engage in delivery of telepractice services to Louisiana residents.

G. Applicants who have not obtained registration within one year of having submitted the application shall be deemed to have abandoned the application, resulting in mandatory reporting to the appropriate federal data bank. An applicant may request a withdrawal of the application subject to review and approval by the board.

H. In order for telehealth registration to remain current in Louisiana, the individual must maintain an unrestricted, unencumbered current license in another state, whose standards are at least equivalent to those in Louisiana. Telehealth registrants must report any previous or pending disciplinary actions in any state.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 48:2739 (November 2022), repromulgated LR 49:2955 (December 2022).

§113. Criminal History Record Information

A. In addition to any other requirements established by regulation, an applicant is required, as a condition for eligibility for licensure/registration, to:

1. submit a full set of fingerprints, in a form and manner prescribed by the board;

2. permit the board to obtain state and national criminal history record information on the applicant;

3. submit the fee for state and national criminal history record information on the applicant.

B. Any and all state or national criminal history record information obtained by the board from the bureau or FBI which is not already a matter of public record shall be deemed non-public and confidential information restricted to the exclusive use of the board, its members, investigators, agents, and attorneys in evaluating the applicant's suitability and eligibility for licensure/registration. No such information or records shall, except with the written consent of the applicant or by order of a court of competent jurisdiction, be released or otherwise disclosed by the board to any other person or agency.

C. An applicant who denies the existence or extent of criminal history record information on an application, which is discovered by information, records, or documentation provided by the state police, FBI, or any other state, national, or foreign jurisdiction shall, in addition to the potential disqualification of licensure for any of the causes specified in §141 of this Chapter, be deemed to have provided false, misleading, or deceptive information, or false sworn information on an application for licensure, and to have engaged in unprofessional conduct, providing additional cause for the board to suspend or revoke, refuse to issue, or impose probationary or other restrictions on any license held or applied for by an applicant in the state of Louisiana culpable of such violation, pursuant to R.S. 37:2662.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 48:2740 (November 2022) repromulgated LR 49:2955 (December 2022).

§115. Licensure by Reciprocity

A. The board may waive the examination for applicants who present proof of current licensure in another state with standards equivalent to those of Louisiana.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 14:707 (October 1988), amended LR 22:354 (May 1996), LR 30:2311 (October 2004), LR 48:2740 (November 2022) repromulgated LR 49:2956 (December 2022).

§117. Additional Requirements for International Applicants/Speakers of English as a Second Language

A. Any document required to be submitted to this board with an application for a license shall be in the English language, or accompanied by a certified translation thereof into the English language.

B. As a condition of the board's consideration of the license application of a graduate of a foreign college or university, the applicant shall provide the board with an evaluation of the applicant's transcript from an approved credentials evaluation agency. A list of approved agencies, and their addresses, may be obtained from the board.

C. The essence of the practice of audiology and speech-language pathology is communication; therefore an applicant whose primary language is not English shall:

1. submit a passing score on a nationally recognized English proficiency examination as approved by the board. The passing score must have been obtained within the past two years;

2. an English proficiency assessment may be conducted in-person by the board or its designees as a condition for licensure.

D. The clinical observation and clinical practicum for a speech-language pathologist educated outside the United States must consist of at least 400 patient contact hours, to include:

1. at least 25 hours in supervised observation prior to the clinical practicum. Patient contact hours in excess of the required minimum may be substituted for the required 25 hours of supervised observation;

2. at least 375 patient contact hours in speech-language pathology. Practicum experiences must be:

- a. across the scope of practice in speech-language pathology;

- b. with clients across the lifespan;

- c. across the range of clinical severity.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 14:707 (October 1988), amended LR 22:354 (May 1996), LR 27:201 (February 2001), LR 30:2311 (October 2004), LR 37:2394 (August 2011), LR 48:2740 (November 2022), repromulgated LR 49:2956 (December 2022).

§119. Requirements to Upgrade License

A. The provisional speech-language pathology licensee who has not passed the examination at the time of initial licensure shall submit the following to upgrade his/her license status:

1. an official copy of a passing score on the educational testing service area examination;

2. verification of thirty six weeks of full-time postgraduate professional employment/experience or its part-time equivalent in the field the license is held;

3. proof of supervision through date of upgrade (Form 100);

4. upgrade fee of \$30.

B. The provisional speech-language pathology licensee who has not completed the thirty six weeks of postgraduate professional employment/experience at the time of initial licensure shall submit the following to upgrade his/her license status:

1. verification of 36 weeks of full-time postgraduate professional employment/experience or its part-time equivalent in the field the license is held;

2. proof of supervision through date of upgrade (Form 100);

3. upgrade fee of \$30.

C. The provisional speech-language pathology assistant shall submit the following to upgrade the license status:

1. proof of 225 supervised clinical practicum hours shall be on file in the board's office. Only direct supervision hours and/or university practicum hours may be counted towards the 225 hours;

2. upgrade fee of \$30.

D. The restricted audiology or restricted speech-language pathology licensee who holds a master's degree or its equivalent in audiology or speech-language pathology shall submit the following documents to upgrade their license:

1. an official copy of a passing score on the educational testing service area examination;

2. verification of 36 weeks of post-graduate professional employment/experience or its part-time equivalent in the field in which the license is held;

3. proof of supervision through date of upgrade (Form 100);

4. upgrade fee of \$30.

E. Only those hours that have been obtained on-the-job as paid professional experience may be counted towards an upgrade.

F. Restricted speech-language pathology licensees who hold a bachelor's degree who wish to change their status to a

provisional speech-language pathology license shall submit an application for license and meet the requirements of R.S. 37:2659.

G. Speech-language pathology assistant licensees who wish to change their status to a provisional speech-language pathology license shall submit an application for license and meet the requirements of R.S. 37:2759.

H. Postgraduate professional employment/experience which counts toward upgrading the license status will only be accepted from the date that the licensee's application was received by the board.

I. It is the responsibility of the licensee to submit the documents and make a written request for upgrade of their license status. Licensees shall complete all supervision requirements consistent with the license held and immediately thereafter submit appropriate supervision forms to the board office along with a written request for license upgrade and the upgrade fee. The licensee shall remain under supervision until the upgrade has been approved by the board.

J. If a passing score of the educational testing service's specialty area examination in speech-language pathology is not submitted within one year from the date of issuance of the license, a provisional licensee must apply for a speech-language pathology assistant license. This individual may perform only those duties as specified in §121 and must be supervised in accordance with the requirements specified in §131.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 22:349 (May 1996), amended LR 27:197 (February 2001), LR 28:1971 (September 2002), LR 30:2312 (October 2004), LR 33:2194 (October 2007), LR 37:2394 (August 2011), LR 48:2740 (November 2022), repromulgated LR 49:2956 (December 2022).

§121. Duties: Speech-Language Pathology Assistant License and Provisional Speech-Language Pathology Assistant License

A.1. All duties performed by the speech-language pathology assistant licensee or provisional speech-language pathology assistant licensee shall be assigned by a licensed speech-language pathologist and shall be supervised in accordance with the rules and regulations specified by the board. Caseload assignments shall be consistent with the knowledge base and training of the licensee for the performance of the following tasks:

- a. conduct speech-language screenings. All screening reports shall be cosigned and interpreted by the supervising speech-language pathologist;
- b. perform hearing screenings limited to a pass/fail determination, for the purpose of initial identification of disorders, following specified protocols as approved by the supervising speech-language pathologist;
- c. provide direct treatment which is within the level of training and experience as prescribed by the supervising speech-language pathologist to a caseload of patients/clients who demonstrate communication disorders. Supervision of treatment shall be in accordance with the rules and regulations specified by the board;

d. follow treatment plans or protocols as developed and documented by the supervising speech-language pathologist;

e. document patient/client progress toward meeting established objectives as stated in the treatment plan;

f. schedule activities, prepare charts, records, graphs, or otherwise display data;

g. perform checks and maintenance of equipment; (Problem: Saving text that is not currently within this Section, hence losing text.)

h. with permission and guidance of the supervising speech-language pathologist, speech-language pathology assistants may participate in parent conferences, individualized educational program meetings (IEP), case conferences, interdisciplinary team conferences, and research projects. Provisional speech-language pathology assistants may participate in these activities only with the supervising speech-language pathologist present.

i. Speech-language pathology assistants may engage in telepractice as directed by their supervisor, provided all supervision guidelines are met. Provisional speech-language pathology assistants may not engage in telepractice.

2. Duties outside the Scope of Practice of a Speech-Language Pathology Assistant and Provisional Speech-Language Pathology Assistant

a. The speech-language pathology assistant licensee and provisional speech-language pathology assistant shall not:

i. perform clinical tasks without the knowledge and approval of the supervising speech-language pathologist;

ii. conduct evaluations, even under supervision;

iii. interpret test and assessment results;

iv. screen, diagnose, or treat clients for feeding and swallowing disorders;

v. demonstrate swallowing strategies or precautions to clients, family, or staff;

vi. work with a communication or related disorder unless s/he has had sufficient coursework with appropriate supervised practicum in that area obtained through a regionally accredited educational institution or its cooperating programs;

vii. provide patient/client or family counseling;

viii. select and/or discharge patients/clients for services without the approval of the supervising speech-language pathologist;

ix. disclose clinical or confidential information either orally or in writing to anyone not designated by the supervising speech-language pathologist and without the authorization of the patient/client or their designee;

x. make referrals for additional services without the approval of the supervising speech-language pathologist;

xi. participate in Individualized Family Service Plan (IFSP) meetings without the supervising speech-language pathologist.

xii. Provisional speech-language pathology assistants may not participate in parent conferences, Individualized Educational Program (IEP), Individualized Family Service Plan (IFSP) meetings, case conferences,

interdisciplinary team conferences, and research projects unless the supervising speech-language pathologist is present.

xiii. Provisional speech-language pathology assistants may not engage in telepractice; however, the individual may function as a facilitator given appropriate training

3. The speech-language pathology assistant and the provisional speech-language pathology assistant shall not perform any clinical task without the knowledge and approval of the supervising speech-language pathologist.

4. Failure to comply with these rules and regulations may result in disciplinary action against the assistant and/or the supervising speech-language pathologist.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 30:2312 (October 2004), amended LR 33:2194 (October 2007), LR 37:2394 (August 2011), amended by the Department of Health, Board of Speech-Language Pathology and Audiology, LR 45:255 (February 2019), LR 48:2741 (November 2022), repromulgated LR 49:2957 (December 2022).

§123. Fees

A. The board collects the following fees, which are non-refundable:

1. initial Louisiana license application—\$125;
2. dual license application—\$225;
3. renewal of license submitted on or before June 30, of each year—\$65:
 - a. dual licensure renewal—\$90;
4. delinquent renewal fee submitted between July 1 and July 31, of each year—\$130;
 - a. dual licensure renewal—\$180;
5. initial telehealth registration fee—\$50;
6. renewal of telehealth registration submitted on or before June 30, of each year—\$25;
7. renewal of telehealth registration submitted between July 1 and July 31, of each year—\$50;
8. licensure upgrade—\$30;
9. continuing education pre-approval fee for corporations or individuals who are not LBESPA licensees—\$50;
10. mailing lists—
 - a. \$200 for speech-language pathologists;
 - b. \$25 for audiologists;
 - c. \$25 for speech-language pathology assistants.
11. NSF or returned check—\$40;
12. open book test fee—\$30:
 - a. open book retest fee, per section—\$10;
13. publications to include law, rules, etc.—\$5 ea. plus postage and handling;
14. re-issuance of license or registration certificate—\$25;
15. subpoena within East Baton Rouge Parish—\$50:
 - a. subpoena plus state-allowed travel rate per mile outside East Baton Rouge Parish—\$50;
16. verification of license or registration (written)—\$10;
17. an additional fee may be charged for credit card transactions in accordance with state treasury rules.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 14:706 (October 1988), amended LR 22:350 (May 1996), LR 27:197 (February 2001), repromulgated LR 27:1691 (October 2001) amended LR 30:2313 (October 2004), LR 33:2195 (October 2007), LR 37:2395 (August 2011), amended by the Department of Health, Board of Speech-Language Pathology and Audiology, LR 42:1666 (October 2016), LR 48:2742 (November 2022), repromulgated LR 49:2958 (December 2022).

§125. Renewals

A. All licenses and registrations shall be renewed annually by June 30, to avoid delinquent renewal fees.

B. Initial licenses and registrations issued during the last quarter of the fiscal year, i.e., April, May, and June, will not be required to be renewed during that fiscal year. No continuing education hours will be required of the licensee or registrant for that period.

C. Licensees shall list on their renewal form the licensees (i.e., provisional speech-language pathologists, restricted speech-language pathologists, restricted audiologists, speech-language pathology assistants, or provisional speech-language pathology assistants) and aides that they are supervising.

D. It is the licensee and registrant's continuing obligation to keep the board informed of his/her current mailing address.

E. Licensees shall participate in continuing professional education activities for each license period, July 1-June 30, in accordance with §127.

F. Inactive status is granted to licensees who are retired or who do not practice audiology or speech-language pathology during the fiscal year, July 1-June 30.

1. Licensees on inactive status may retain their license by payment of the annual renewal fee.

2. These licensees shall complete the affidavit on the continuing education report and submit it at the time of licensure renewal.

3. The licensee may submit the required five hours of continuing education each year he/she is on inactive status or submit all of the hours the year he/she returns to work in the profession.

4. Licensees on inactive status or who are retired shall not supervise individuals or otherwise engage in the practice of audiology or speech-language pathology.

5. In order to resume the practice of audiology or speech-language pathology, licensees on inactive status shall demonstrate completion of 5 clock hours of continuing education in the area of licensure for each year that inactive status was maintained (maximum of 25 hours). In addition, a letter requesting a change to active status must be submitted to the board office prior to resuming the practice of audiology or speech-language pathology.

G. Licensees who hold a license requiring supervision and who are not working in the field of audiology and/or speech-language pathology shall submit a notarized statement at the time of license renewal attesting to the fact that they did not work in the profession during the license period.

H. The board may refuse to consider any renewal application which is not complete in every detail, including submission of every document required by the application form and instructions. The board may, in its discretion,

require additional information as a condition for consideration of the application.

I. Delinquent Renewal

1. Delinquent requests for renewals will be accepted by the board through July 31, provided the delinquent renewal fee is paid in accordance with §123, and the continuing education requirements have been met.

2. A licensee whose license lapsed on August 1, and applies to reinstate prior to the following June 30, is required to submit a completed application, proof of continuing education, initial license fee and delinquent renewal fee in accordance with §123 and §127.

3. A licensee whose license lapsed on August 1, and applies for reinstatement after June 30, of the following year, is required to submit a completed application, proof of continuing education, and is subject to the initial license fee and the requirements of §127.

4. A telehealth registrant whose registration lapsed on August 1, must complete the initial application process for telehealth registration.

J. Conditional Renewal

1. Licensees who previously held a full, valid license which was obtained under the grandfather clause of Act 260 of the 1978 Regular Session of the Louisiana Legislature, whether delinquent or lapsed, for a period not to exceed five years, shall be eligible for licensure renewal or reinstatement upon meeting the continuing education requirement and submitting the appropriate renewal fee in accordance with §123. If the license has lapsed for a period of more than five years, applicants shall reapply in accordance with the requirements enumerated in R.S. 37:2651 et seq., as amended by Act 892 of the 1995 Regular Session of the Louisiana Legislature.

2. Licensees who previously held a restricted license which was obtained under Act 260 of the 1978 Regular Session of the Louisiana legislature, whether delinquent or lapsed, shall be eligible for licensure renewal or reinstatement, upon meeting the continuing education requirement and submitting the appropriate renewal fee as required in accordance with §123 and §127.

3. Licensees who allow their license to lapse (August 1) shall submit documentation of completion of five clock hours of continuing education (maximum of 25 hours) in the area of licensure for each year that the license has lapsed in addition to meeting the license requirements enumerated in R.S. 37:2650 et seq.

4. Licensees who have allowed their license to lapse for a period of five years or greater, and do not hold a current audiology or speech-language pathology license in another state, must submit evidence of 25 continuing education hours directly related to the clinical practice of the license being sought and must have been obtained within the past 18 months.

5. Licensees who have allowed their license to lapse for a period of 10 years or greater, and do not hold a current audiology or speech-language pathology license in another state, must submit a passing score on the educational testing service's specialty area examination for audiology or speech-language pathology, as applicable to the license being

sought, achieved no more than five years prior to the submission of the request for reinstatement.

6. Renewal of a license will not be granted until all requirements including mandated continuing education hours have been completed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 14:707 (October 1988), amended LR 22:351 (May 1996), LR 27:198 (February 2001), LR 28:1972 (September 2002), LR 30:2314 (October 2004), LR 33:2195 (October 2007), LR 37:2395 (August 2011), LR 39:1043 (April 2013), amended by the Department of Health, Board of Speech-Language Pathology and Audiology, LR 42:1667 (October 2016), LR 45:256 (February 2019), LR LR 48:2742 (November 2022), repromulgated LR 49:2958 (December 2022).

§127. Continuing Education Requirements

A. Each licensee shall complete continuing professional education activities of at least 10 clock hours each license period, July 1-June 30.

B. Of the 10 hours, five shall be educational activities directly related to the scope of practice of the licensee and must be designed to increase the knowledge and skills in the area of licensure.

C. Of the 10 hours, five may be in areas related to the professions of audiology and speech-language pathology. Such activities shall increase knowledge and skills pertinent to practice. Examples include: billing; coding and reimbursement; record-keeping; ethics; supervision.

D. Audiologists who dispense shall ensure that at least 3 of the total 10 hours are in areas directly related to hearing aid dispensing, such as business/practice management, marketing, aural habilitation/ rehabilitation, diagnostic assessment, characteristics of hearing aids and their application, etc.

E. Dual licensees shall complete 15 hours per year with a minimum of five hours in audiology and five hours in speech-language pathology; the remaining five may be in areas related to the professions of audiology and speech-language pathology. Related activities shall increase knowledge and skills pertinent to practice. Examples include: billing; coding and reimbursement; record-keeping; ethics; supervision.

F. Out-of-state audiologists and speech-language pathologists who hold telehealth registration shall complete the continuing education requirements consistent with the license the individual possesses for the state in which the provider is located. Telehealth registrants residing in states which do not require continuing education for audiologists and/or speech-language pathologists shall complete the annual continuing education requirements specified in this Section and may be audited.

G. Continuing education events occurring in the month of June will be accepted for the collection period in which they occur or they may be counted in the following collection period which begins on July 1. Hours from one event may not be divided between two collection periods.

H. The graduated scale for the collection of continuing education hours is based on the date an applicant receives his/her initial license or registration.

License/Registration Received	Hours Required
April, May, June	0
January, February, March	3
October, November, December	6
July, August, September	10

I. In the case of extenuating circumstances, when the licensee does not fulfill the continuing education requirements, the licensee shall submit a written request for extension to the board for consideration.

J. Continuing education hours accrued during the applicant's grace period will be accepted.

K. Acceptable continuing education sponsors and activities that are directly related to the practice of audiology and/or speech-language pathology:

1. board-sponsored activities;
2. presentations that are directly in the area of communication disorders sponsored by professional organizations such as American Academy of Audiology (AAA), American Speech-Language-Hearing Association (ASHA), Louisiana Academy of Audiology (LAA), Louisiana Speech-Language-Hearing Association (LSHA), Speech Pathologists and Audiologists in Louisiana Schools (SPALS), Louisiana Society for Hearing Aid Specialists, etc. Business meetings, luncheons, award ceremonies, receptions, and other non-content area events are not recognized as acceptable continuing education activities;

3. activities provided by ASHA-approved continuing education providers or AAA-approved continuing education activities that are directly in the area of communication disorders;

4. meetings of related professional organizations that are directly in the area of communication disorders (e.g., Council for Exceptional Children, International Dyslexia Association);

5. college courses in the area of licensure, with the exception of clinical practicum, taken for credit or official audit (3 semester hours or 6 quarter hours=10 hours of continuing education);

6. distance learning (video conferences, telephone seminars and internet courses sponsored by universities, schools, clinics, state agencies, hospitals, professional organizations, or related professional organizations) that are directly in the area of communication disorders;

7. workshops and in-services that are university, school, clinic, hospital or state agency sponsored (maximum of five hours in a related area) that are directly in the area of communication disorders. Only content area workshop and in-service time shall count as earned continuing education. Documentation of staff development content must be separated from employee meeting activities such as announcements, review of deadlines, event planning, and other non-content area activities.);

8. publication of an article in a peer-reviewed journal for the year in which it was published;

9. digital media (e.g. CD, DVD, online webinars, etc.) which is ASHA-approved or AAA-approved continuing education media that are directly in the area of communication disorders;

10. the presenting licensee may count 1 1/2 times the value of an activity the first time it is presented to allow for preparation time (example: a 3 hour workshop=4 1/2 hours). The activity will count for the actual hour value for each subsequent presentation of the same activity;

11. teaching at the college level in the area of communication disorders is not acceptable.

L. Pre-Approval Policy

1. Pre-approval is required for continuing education events that do not meet the requirements as listed under §127.K.1.-11, and pre-approval of continuing education events is required in those situations where it is unclear whether the topic is relevant to the profession or will further a professional's expertise in a particular area.

2. The licensee shall request pre-approval (minimum of 30 days in advance) of self-study activities, or other appropriate activities.

3. Individuals not licensed by LBESPA as well as corporations offering continuing education not addressed under §127.K., must submit a \$50 continuing education review fee along with the pre-approval request.

4. Licensees who elect to attend university classes/courses in audiology and/or speech-language pathology without payment of the university fee shall submit a self-study plan for pre-approval from the Louisiana Board of Examiners for Speech-Language Pathology and Audiology to receive continuing education credits.

5. Self-study activities in the area of communication disorders:

- a. digital media (maximum of 5 hours);

- b. reading of journal articles that contain self-examination questions. Articles shall be submitted for pre-approval (maximum of 5 hours).

6. Publication of diagnostic and/or therapeutic materials (maximum of 5 hours).

M. Recording of Continuing Education Activities

1. Licensees shall record all continuing education activities as prescribed by the board and submitted at the time of renewal.

2. Licensees shall maintain records of continuing education activities completed for three years.

3. Licensees shall not submit repeated continuing education activities for credit within a three-year period.

4. A percentage of licensees will be audited each year as a means of evaluating compliance with the continuing education requirements. The board may request, through random audit, verification of clock hours submitted, including information regarding content and attendance. If the title of the activity does not clearly state the content, a description and/or time-ordered agenda may be required.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 22:351 (May 1996), amended LR 27:199 (February 2001), LR 28:1973 (September 2002), LR 30:2314 (October 2004), LR 33:2196 (October 2007), LR 37:2395 (August 2011), LR 39:1043 (April 2013), amended by the Department of Health, Board of Speech-Language Pathology and

Audiology, LR 42:1667 (October 2016), LR 45:257 (February 2019), LR 48:2743 (November 2022), repromulgated LR 49:2959 (December 2022).

§129. Supervision Requirements for Restricted License and Provisional Speech-Language Pathology License

A. Restricted and provisional speech-language pathology licensees are required to undergo direct supervision by a licensed speech-language pathologist, licensed in accordance with R.S. 37:2659(B). Direct and indirect supervision must occur in every work setting in which the licensee is employed. An audiologist, licensed in accordance with R.S. 37:2659(A) may supervise these individuals for the purpose of hearing screening.

B. Prior to the initiation of supervision of an assistant or provisional assistant, training in the area of supervision is strongly recommended.

C. Prior to the initiation of supervision of a restricted or provisional licensee, training in the area of supervision is strongly recommended.

D. An individual may not be supervised by a provisional licensee, restricted licensee, assistant licensee, an individual on inactive status, a telehealth registrant, or an immediate family member.

E. Supervision must involve the direct participation of the supervisor in order for the supervisor to monitor, observe, evaluate, and make suggestions for improvement regarding the supervisee's professional employment.

F. Restricted and provisional speech-language pathology licensees must submit a supervisory agreement signed by the supervisor and supervisee as prescribed by the board. The form must be submitted to the board by the supervisee within 30 days of employment and submitted annually at the time of renewal. If there is a change in supervisor(s) at any time, a new supervisory agreement must be submitted to the board within 30 days of the change in supervision. If there are multiple supervisors for the same supervisee, all supervisors must sign the supervisory agreement.

G. Speech-language pathologists may share the supervision responsibility for Provisional or Restricted licensees, but each supervising speech-language pathologist shall complete and submit the necessary supervision forms.

H. Supervisory records, including supervision logs and other documentation of supervision, shall be maintained by both the supervisor and supervisee for a period of three years. Documentation of supervision may be requested by the board. Submission of inaccurate or falsified supervision documentation may result in disciplinary action.

I. The direct supervision of the licensee, whether employed full-time or part-time, shall include 16 hours annually.

1. At least eight shall be direct observation hours divided between the areas of diagnostics and management. The direct observations must be equal to or greater than a total of eight hours. Indirect supervision hours may include conferences, audio and video recordings, review of written records, staffings and discussions with other persons who have participated in the licensee's training.

2. For 12-month employees, two direct observation hours shall be conducted each quarter.

3. For nine-month employees, four direct observation hours shall occur in each semester. If the nine-month

employment is extended for a period of time, additional direct as well as indirect supervision hours must occur.

J. Documentation of supervision shall be submitted annually at the time of license renewal on Form 100 provided by the board.

K. Licensees shall complete all supervision requirements consistent with the license held and immediately thereafter submit appropriate supervision forms to the board office along with an application requesting a license upgrade, along with the upgrade fee. The licensee shall remain under supervision until the upgrade has been approved by the board.

L. The board will accept supervision provided out-of-state by an individual licensed or ASHA-certified in the area of practice. Supervision must be documented on Form 100.

1. Restricted and provisional speech-language pathology licensees who have not worked in Louisiana, may submit their clinical fellowship report as proof of supervision that was carried out during the license period. Otherwise licensees must submit at the time of license renewal, appropriate proof of supervision consistent with Louisiana supervision requirements.

M. Licensees who are not working in the field of speech-language pathology and who hold a license requiring supervision, shall submit a notarized statement at the time of license renewal attesting to the fact that they did not work in the profession during the license period.

N. All costs of supervision shall be borne by the licensee or his/her employer, but in no event will those costs be borne by the board.

O. When supervision requirements have not been met in accordance with §129, licensees shall complete additional months of supervision to replace months of incomplete supervision.

P. After three administrative complaints have been accepted by the board against a licensed supervisor, that supervisor may no longer be allowed to supervise for a period of five years.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 14:707 (October 1988), amended LR 22:352 (May 1996), LR 27:199 (February 2001), LR 28:1974 (September 2002) LR 30:2315 (October 2004), LR 33:2196 (October 2007), LR 37:2396 (August 2011), LR 39:1043 (April 2013), LR 48:2744 (November 2022), repromulgated LR 49:2961 (December 2022).

§131. Supervision Requirements for Speech-Language Pathology Assistant and Provisional Speech-Language Pathology Assistant Licensees

A. A supervising speech-language pathologist must have a minimum of one year of full-time professional speech-language pathology experience following the postgraduate professional/employment experience. Full time employment in a school system for the school year is considered to meet this requirement.

B. Prior to the initiation of supervision of an assistant or provisional assistant, training in the area of supervision is strongly recommended.

C. An individual may not be supervised by a provisional licensee, restricted licensee, assistant licensee, an individual

on inactive status, a telehealth registrant, or an immediate family member.

D. The supervision requirements specified in these regulations are minimum requirements. It is the responsibility of the speech-language pathologist to design and provide a supervision system that protects patient/client care and maintains the highest possible standards of quality.

E. Supervision must involve the direct participation of the supervisor in order for the supervisor to monitor, observe, evaluate, and make suggestions for improvement regarding the supervisee's employment.

F. The supervisor is responsible for ensuring that the assistant does not make decisions regarding evaluation, management and future disposition of clients.

G. The supervisor is responsible for initial consultation with the assistant regarding coursework and practicum experiences prior to caseload assignment. The supervising speech-language pathologist shall assign only those tasks for which the assistant has been trained.

H. Decision-making regarding specification of on-going treatment protocol and necessary modifications, is the responsibility of the supervisor. The level of supervision required is considered the minimum necessary to ensure appropriate patient/client care.

I. The supervising speech-language pathologist shall be readily available for consultation with the assistant licensee. This includes personal contact, telephone, or other means of communication.

J. Speech-language pathology assistants and provisional speech-language pathology assistants must submit a supervisory agreement signed by the supervisor and supervisee as prescribed by the board. The form must be submitted to the board by the supervisee within 30 days of employment. If there is a change in supervisor(s) at any time, a new supervisory agreement must be submitted to the board within 30 days of the change in supervision. If there are multiple supervisors for the same supervisee, all supervisors must sign a supervisory agreement.

K. Speech-language pathologists may share the supervision responsibility for speech-language pathology assistants or provisional speech-language pathology assistants, but each supervising speech-language pathologist shall complete and submit the necessary supervision forms.

L. Supervisory records, including supervision logs and other documentation of supervision, shall be maintained by both the supervisor and supervisee for a period of three years. Documentation of supervision may be requested by the board. Submission of inaccurate or falsified supervision documentation may result in disciplinary action.

M. The board will accept supervision given out-of-state by a licensed or ASHA certified speech-language pathologist in the area of licensure. Licensees must submit at the time of license renewal, appropriate proof of supervision consistent with Louisiana supervision requirements.

N. Assistants who are not working in the field of speech-language pathology shall submit a notarized statement at the time of license renewal attesting to the fact that they did not work in the profession during the license period.

O. Although more than one speech-language pathologist may provide supervision of an assistant licensee and

provisional assistant licensee, at no time may a licensed speech-language pathologist supervise or be listed as a supervisor for more than three assistant or provisional assistant licensees. When multiple supervisors are used, the supervisors are encouraged to coordinate and communicate with each other.

P. Provisional speech-language pathology assistants and speech-language pathology assistants must undergo direct supervision as well as indirect supervision in every work setting in which the licensee is employed.

Q. Documentation of supervision shall be submitted annually at the time of license renewal on Form 200 provided by the board.

R. Supervision Requirements for the Speech-Language Pathology Assistant

1. A minimum of one clock hour of direct supervision shall be completed in the primary work setting each week for each licensee. If the assistant is employed in more than one work setting, additional direct supervision must occur in the secondary work setting.

2. A minimum of one clock hour of indirect supervision shall be completed each week for each licensee. These methods should include, but are not limited to:

- a. specifying protocols for speech-language screenings and assessments conducted by the assistant licensee;
- b. specifying protocols for hearing screenings conducted by the assistant licensee;
- c. approving treatment plans or protocols and documenting approval;
- d. monitoring patient/client progress toward meeting established objectives;
- e. monitoring, scheduling, charting and data collection;
- f. directing maintenance of equipment;
- g. directing research projects, in-service training and public relations programs;
- h. conducting telephone conferences.

3. If circumstances prohibit a supervisor from completing the minimum supervision requirements (§131.R.1 and 2) in a given week, the remaining supervision shall be completed the following week in conjunction with the required supervision hours for that week.

4. When the supervising speech-language pathologist is unavailable for supervision for more than one week, arrangements shall be made for another qualified supervisor or the speech-language pathology assistant shall be transferred to other duties.

5. Speech-Language Pathology Assistant Full-Time and Part-Time Supervision Requirements

Hours Worked	Required Direct Supervision	Required Indirect Supervision
21-40 hours	1 hour/week	1 hour/week
20 hours or less	1 hour/every 2 weeks	1 hour/every 2 weeks

6. Assistant licensees shall be supervised only by a speech-language pathologist licensed under the provisions of R.S. 37:2659(B) with the exception of hearing screenings which may be supervised by an audiologist, licensed under the provisions of R.S. 37:2659(A).

S. Supervision Requirements for the Provisional Speech-Language Pathology Assistant

1. A minimum of three clock hours of direct supervision shall be completed in the primary work setting each week for each licensee. If the provisional speech-language pathology assistant is employed in more than one work setting, additional direct supervision must occur in the secondary work setting.

2. A minimum of two clock hours of indirect supervision shall be completed each week for each licensee.

3. These activities should include, but are not limited to:

- a. specifying protocols for speech-language screenings and assessments conducted by the assistant licensee;
- b. specifying protocols for hearing screenings conducted by the assistant licensee;
- c. approving treatment plans or protocols and documenting approval;
- d. monitoring patient/client progress toward meeting established objectives;
- e. monitoring scheduling, charting and data collection;
- f. directing maintenance of equipment;
- g. directing research projects, in-service training and public relations programs;
- h. conducting telephone conferences.

4. If extenuating circumstances prohibit a supervisor from completing the minimum supervision requirements (§131.S.1 and 2) in a given week, the remaining supervision shall be completed the following week in conjunction with the required supervision hours for that week.

5. When the supervising speech-language pathologist is out for more than one week, arrangements shall be made for another qualified supervisor or the provisional speech-language pathology assistant shall be transferred to other duties.

6. When supervision requirements have not been met, in accordance with §131 licensees shall complete additional months of supervision to replace months of incomplete supervision.

7. After three administrative complaints have been accepted by the board against a licensed supervisor, that supervisor may no longer be allowed to supervise for a period of five years.

8. Provisional Speech-Language Pathology Assistant Full-Time and Part-Time Supervision Requirement

Hours Worked	Required Direct Supervision	Required Indirect Supervision
21-40 hours	3 hours/week	2 hours/week
20 hours or less	1.5 hours/every 2 weeks	1 hour/every 2 weeks

9. Provisional assistant licensees shall be supervised by a speech-language pathologist licensed under the provisions of R.S. 37:2659(B) with the exception of hearing screenings which may be supervised by an audiologist, licensed under the provisions of R.S. 37:2659(A).

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 14:707 (October 1988), amended LR

22:353 (May1996), LR 27:200 (February 2001), repromulgated LR 27:1691 (October 2001), amended LR 30:2316 (October 2004), LR 33:2197 (October 2007), LR 37:2396 (August 2011), LR 48:2745 (November 2022), repromulgated LR 49:2961 (December 2022).

§133. Independent Practice

A. Licensed audiologists and speech-language pathologists, by virtue of academic coursework, clinical practicum, and professional experience, are qualified to engage in the autonomous or independent practice of the professions. Individuals who hold a license, i.e., provisional, restricted, assistant or provisional assistant, mandating supervision during the practice of the professions may not engage in the autonomous or independent practice of audiology or speech-language pathology.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 33:2198 (October 2007), LR 48:2746 (November 2022), repromulgated LR 49:2963 (December 2022).

§135. Telehealth

A. Telehealth, regardless of where the service is rendered or delivered, constitutes the practice of audiology or speech-language pathology and shall require Louisiana licensure for in-state practitioners and telehealth registration for out-of-state licensed practitioners.

B. A provider of telehealth services shall be competent in both the type of services provided and the methodology and equipment used to provide the services.

C. A provider of telehealth services must use methods for protecting client information that include authentication and encryption technology.

D. The standard of care shall be the same as if the audiology or speech-language pathology services were delivered face-to-face. It is the responsibility of the provider to determine candidacy and to ensure that the client is comfortable with the technology being utilized.

E. The client shall be notified of telehealth services including but not limited to the right to refuse telehealth services, options for service delivery, and instructions on filing and resolving complaints, in all applicable jurisdictions.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 39:1044 (April 2013), amended by the Department of Health, Board of Speech-Language Pathology and Audiology, LR 42:1668 (October 2016), LR 48:2747 (November 2022), repromulgated LR 49:2963 (December 2022).

§137. Hearing Aid Dispensing

A. Audiologists who dispense hearing aids shall meet the coursework and practicum requirements for dispensing as specified in R.S. 37:2650 et seq.

B. Audiologists who dispense hearing aids shall maintain annual calibration records on audiometric equipment.

C. Audiologists who dispense hearing aids shall, regardless of the method of service delivery, comply with the following:

1. Audiologists shall ensure that a pre-purchase evaluation includes:

- a. a case history;
- b. an otoscopic examination;

c. a basic audiological test battery conducted within the preceding six-month period in a sound-treated environment unless the patient's physical condition prohibits accomplishment of these procedures. The battery shall include:

- i. basic comprehensive audiometry;
- ii. appropriate tolerance testing;

d. middle ear measurements shall also be obtained when indicated.

2. Audiologists shall provide the consumer with a minimum 30-day trial period on all new hearing aids purchased.

3. Audiologists shall inform the consumer of the total cost of the hearing aid, including any fees for returning the aid at the end of the trial period.

4. Audiologists shall conduct a post-fitting evaluation that includes functional gain measurements conducted in a sound treated environment and/or real ear measurements unless the patient's physical conditions prohibit accomplishment of these procedures.

5. Audiologists who engage in the fitting or selling of hearing aids shall deliver to each person supplied with a hearing aid, a bill of sale which shall contain the dispenser's signature, address and license number, together with a description of the make, model and serial number of the hearing aid and the amount charged. The bill of sale shall also indicate whether the hearing aid is new, used, or reconditioned.

D. Licensed Audiologists who did not hold a doctoral degree and were not registered to dispense hearing aids prior to August 1, 2016 and who wish to include hearing aid dispensing as a component of their practice, must have proof of appropriate training, education and experience in the area of hearing aid dispensing. These audiologists who wish to include dispensing as part of their practice shall submit a self-study for pre-approval by the board. Upon culmination, the audiologist must submit a report documenting completion. An audiologist who meets the qualifications for licensure but lacks the coursework and practicum requirements necessary for dispensing of hearing aids may fulfill these requirements by:

1. Completing nine months of postgraduate professional employment/experience under the supervision of a licensed dispensing audiologist, and

2. Providing proof of the successful completion of a study course by the National Institute for Hearing Instruments Studies, or its equivalent. Equivalency for National Institute for Hearing Instruments Studies is defined as:

a. an individualized program of study that shall include:

i. hearing aid technology and dispensing courses sponsored by hearing aid manufacturers to include a minimum of 15 clock hours;

ii. workshops in the area of hearing aid technology and dispensing sponsored by professional organizations or individual practitioners to include a minimum of 15 clock hours;

iii. successful completion of university coursework in the area of hearing aid technology and dispensing.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 22:353 (May 1996), amended LR 27:201 (February 2001), LR 28:1975 (September 2002), LR 30:2317 (October 2004), LR 33:2198 (October 2007), LR 37:2398 (August 2011), repromulgated LR 37:2624 (September 2011), amended by the Department of Health, Board of Speech-Language Pathology and Audiology, LR 42:1668 (October 2016), LR 48:2747, (November 2022) repromulgated LR 49:2963 (December 2022).

§139. Qualifications and Duties of Aides

A. Audiologists and Speech-language pathologists are legally, ethically, and morally responsible for the services provided by aides working under their direction.

B. Requirements for the use of aides follow.

1. A licensed audiologist or speech-language pathologist may utilize an aide who meets the following qualifications. The aide shall:

- a. be of good moral character;
- b. be at least 18 years old;
- c. possess appropriate communication skills;
- d. have a high school diploma or G.E.D.

2. The supervising audiologist or speech-language pathologist is responsible for determining that the aide is qualified and prepared for the duties which s/he will be assigned. It is recommended that the aide be afforded continuing education opportunities. Appropriate areas of training may include:

- a. normal processes in speech, language and hearing;
- b. disorders of speech, language and hearing;
- c. record-keeping and data compilation;
- d. utilization of equipment and materials;
- e. professional ethics and their application to the aide's duties;
- f. administration of hearing screening tests.

C. Supervision

1. The licensed audiologist or speech-language pathologist shall provide periodic direct observation for each aide at least once per month during the initial year of the aide's employment. Speech-language pathology aides are required to undergo direct supervision by a licensed speech-language pathologist, licensed in the area in accordance with R.S. 37:2659(B). Audiology aides are required to undergo direct supervision by a licensed audiologist, licensed in the area in accordance with R.S. 37:2659(A). Audiology aides and Speech-language pathology aides may not be supervised by a provisional licensee, restricted licensee, assistant licensee, an individual on inactive status, a telehealth registrant, or an immediate family member.

2. The direct observation in subsequent years shall be established by the supervising audiologist or speech-language pathologist on an individual basis but shall be no less than once every three months.

3. The supervising audiologist or speech-language pathologist shall be readily available for consultation with the aide at all times.

4. Documentation of direct supervision shall be maintained by the supervising audiologist or speech-

language pathologist and shall be submitted to the board upon request.

5. The supervising audiologist or speech-language pathologist shall report to the board at the time of licensure renewal, the names and employment locations of aides.

D. The speech-language pathology aide may engage in activities limited to those that are planned and directed by the supervising speech-language pathologist. Providing that the preparation, training, and supervision are appropriate, the following tasks may be assigned to speech-language pathology aides:

1. setting up room and equipment;
2. clearing room and storing equipment;
3. preparing materials (such as making copies, typing forms) for use by the speech-language pathologist;
4. checking equipment to determine if the equipment is performing adequately;
5. transporting patients/clients to and from sessions;
6. assisting with field trips;
7. performing hearing screenings limited to pure-tone air conduction screening and screening tympanometry;
8. recording, charting, graphing, or otherwise displaying objective data relative to the patient's/client's performance.

E. The audiology aide may engage in activities limited to those that are planned and directed by the supervising audiologist. Providing that the preparation, training, and supervision are appropriate, the following tasks may be assigned to audiology aides:

1. setting up room and equipment;
2. clearing room and storing equipment;
3. preparing materials (such as making copies, typing forms) for use by the audiologist;
4. checking equipment to determine if the equipment is performing adequately;
5. transporting patients/clients to and from sessions;
6. assisting with field trips;
7. performing hearing screening tests and pure-tone air conduction threshold tests without interpretation;
8. recording, charting, graphing, or otherwise displaying objective data relative to the patient/client's performance.

F. Only the audiologist or speech-language pathologist shall exercise independent judgment in the provision of professional services. Specifically, the audiologist or speech-language pathologist may not delegate any of the following to the aide:

1. speech-language screening;
2. evaluation, diagnosis, or therapy with individuals with speech, language or hearing disorders;
3. interpretation of test and assessment results or discussion of confidential information despite the fact that this information may have been requested by the patient/client, parent or referring agency;
4. performance of any procedure for which the aide has not been trained.

G. Exemption. Aides employed on or before April 1996 may continue to operate under the provisions of Chapter 3, §§301-305 of the *Louisiana Register* 16:409 (May 1990) of the Louisiana Board of Examiners for Speech Pathology and Audiology.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 16:409 (May 1990), amended LR 22:355 (May 1996), LR 27:201 (February 2001), LR 28:1781 (August 2002), LR 30:2318 (October 2004), LR 33:2199 (October 2007), LR 48:2748 (November 2022), repromulgated LR 49:2964(December 2022).

§141. Disciplinary Actions

A. This board may refuse to issue, may suspend or revoke a license for the practice of audiology or speech-language pathology or otherwise discipline an applicant or licensee, upon finding that the applicant or licensee has violated any provisions of R.S. 37:2650 et seq., or any of the rules or regulations.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 14:707 (October 1988), amended LR 22:354 (May 1996), LR 28:1975 (September 2002), LR 30:2319 (October 2004), LR 33:2200 (October 2007), LR 48:2748 (November 2022), repromulgated LR 49:2965 (December 2022).

Chapter 3. Impaired Practitioner Program

§301. Purpose

A. - B.7. ...

C. The applicant or licensee will be responsible for executing all required releases of information and authorizations required for the board to obtain information from any monitor, treatment or service provider concerning the licensee's progress and participation in the program.

D. - G. ...

H. The board will, to the full extent permissible, maintain an agreement or consent agreement and order relating to the licensee's participation in the Impaired Practitioner Program as a confidential matter. The board retains the discretion to share information it deems necessary with those persons providing evaluation/assessment, therapy, treatment, supervision, monitoring or drug/alcohol testing or reports. Violation of any terms, conditions or requirements contained in any consent agreement and order, or board decision can result in a loss of the confidential status.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 30:2319 (October 2004), amended LR 37:2398 (August 2011), LR 48:2749 (November 2022), repromulgated LR 49:2965 (December 2022).

Chapter 5. Procedural Rules

§501. Investigation of Complaints

A. The board is authorized to receive from any person, a complaint(s) against licensees, registrants, applicants, or other persons engaging in practices which violate or are alleged to violate the provisions of R.S. 37:2650 et seq.

B. Any complaint bearing on a licensee or registrant's professional competence, conviction of a crime, unauthorized practice, mental competence, neglect of practice, or violation of state law or ethical standards where applicable to the practice of audiology or speech-language pathology shall be submitted to the board.

C. Once a written complaint is received, the board shall designate a board member consultant to assist in the investigatory process. The board member consultant will assist the investigator by providing information related to the

area of practice. Following completion of the investigation, the investigator and the board member consultant may recommend disposal of the complaint informally through correspondence or conference with the licensee, registrant, and/or the complainant, which may result in a private letter of concern or a consent agreement and order. If the licensee or registrant stipulates to the complaint and waives her/his right to a formal hearing, the board may impose appropriate sanctions without delay.

D. The board's designated investigator shall have authority to investigate the nature of the complaint through conference, correspondence, and other investigative procedures, directed to those parties or witnesses involved. The board's designated investigator shall send the involved licensee or registrant notice by certified mail, return receipt requested, of the investigation containing a short summary of the complaint. All subsequent letters to the involved licensee or registrant, all letters to the complainant, or any other witness, shall be sent with a designation "personal and confidential" clearly marked on the outside of the envelope.

E. The designated investigator shall conclude the investigation as quickly as possible, without compromising thoroughness. Unless good cause is shown by the designated investigator satisfactory to the board, which may extend the time for the investigation, the investigation and recommendations to the board shall be delivered to the board member consultant within 60 days of the date that the designated investigator first received the assignment from the board.

F. Following an investigation, the designated investigator shall report to the board member consultant and together they will make a recommendation to the board for either dismissal of the complaint or proceeding to an informal hearing, consent agreement and order, or formal hearing. Following the completion of the investigation, the board member consultant will be recused from final adjudication, deliberations, and voting.

G. If the designated investigator and board member consultant's recommendation for an informal hearing is accepted by the board, the designated investigator shall notify the licensee or registrant of the time, date, and place of the informal hearing and of the issues to be discussed. The licensee or registrant shall appear on a voluntary basis. The licensee or registrant shall be advised that the hearing will be informal, no attorneys will be present, and no transcript of the hearing will be made. Any witnesses who testify will not be placed under oath, and no subpoenas will be issued. The licensee or registrant shall be informed that any statements made at the informal hearing will not be used or introduced at a formal hearing, unless all parties consent. If the licensee or registrant notifies the designated investigator that s/he does not wish an informal hearing, or if the licensee fails or refuses to attend an informal hearing, the informal hearing shall not be held. In that event, the board shall initiate a formal disciplinary hearing.

H. A complaint may be resolved by:

1. a private letter of concern to the licensee, registrant, or other appropriate parties.
2. a consent agreement and order approved by the board and entered into by the licensee or registrant.

I. The designated investigator, along with the board member consultant, shall recommend to the board the

initiation of a formal disciplinary hearing if the investigation discloses any of the following: the complaint is sufficiently serious to require a formal adjudication; the licensee or registrant fails to respond to the correspondence by the designated investigator concerning the complaint; the licensee or registrant's response to the designated investigator discloses that further action is necessary; an informal hearing is held but does not resolve all of the issues; or the licensee or registrant refuses to comply with the recommended remedial action.

J. The board member consultant shall submit any recommended action to the board in brief, concise language, without any reference to the particulars of the investigation, to any findings of fact or any conclusions of law arrived at during the investigative process.

K. The board shall have the authority to delegate to the designated investigator any alleged violations of the Speech-Language Pathology and Audiology Act, R.S. 37:2650 et seq., and any alleged violations of any and all rules and regulations adopted by the board pursuant thereto, prior to board action on those alleged violations. If requested by the board, the designated investigator shall submit to the board's executive director the complete investigation file. Final authority for appropriate action rests solely with the board including formal notification to the complainant, licensee, or registrant.

L. At no time shall the designated investigator investigate any case as authorized by the board where the investigator has any personal or economic interest in the outcome of the investigation, or is personally related to or maintains a close friendship with the complainant, the licensee, the registrant, or any of the witnesses involved. In such event, the designated investigator shall immediately notify the board, who shall appoint a substitute investigator for disposition of that particular case.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 17:373 (April 1991), amended LR 22:356 (May 1996), LR 30:2320 (October 2004), LR 33:2200 (October 2007), LR 37:2398 (August 2011), amended by the Department of Health, Board of Speech-Language Pathology and Audiology, LR 42:1668 (October 2016), LR 48:2749 (November 2022), repromulgated LR 49:2965 (December 2022).

§503. Compliance Hearings

A. The board shall provide a compliance hearing to a rejected applicant for licensure or registration provided that the rejected applicant requests a compliance hearing in writing within 30 days of the receipt of the notice of rejection. The applicant's request for a compliance hearing shall state with specificity the reason(s) why the application should be accepted.

B. ...

C. The purpose and intent of the compliance hearing is to provide a forum for the applicant, licensee, or registrant to present documentary evidence, in the form of affidavits, public records, official records, letters, etc., along with testimony under oath to establish that the applicant, licensee, or registrant does, in fact, meet the lawful requirements for issuance of a license or registration, or the retention of the license or registration. The board shall have the authority to administer oaths, hear the testimony, and conduct the

hearing. The applicant, licensee, or registrant may be represented by counsel, or may represent her/himself.

D. In any compliance hearing, the burden of proof shall rest with the applicant, licensee, or registrant.

E. Within 30 days after the compliance hearing, the board shall forward its final decision, including specific reasons thereof, by certified mail, return receipt requested, to the applicant, licensee, or registrant.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 17:374 (April 1991), amended LR 22:357 (May 1996), LR 27:201 (February 2001), LR 30:2321 (October 2004), LR 37:2399 (August 2011), LR 48:2750 (November 2022), repromulgated LR 49:2966 (December 2022).

§505. Formal Disciplinary Hearings

A. If, after completion of the investigation, the board determines that the circumstances may warrant the withholding, denial, suspension, or revocation of a license or registration, or other disciplinary action, the board shall initiate a formal disciplinary hearing. The board shall promptly notify the attorney general who is authorized and directed to appear on behalf of the state. The hearing shall be held before the board only after the involved licensee or registrant is given at least 30-days' notice by certified mail, return receipt requested. The notice shall include the following:

A.1. - E. ...

F. It is the licensee and registrant's continuing obligation to keep the board informed of her/his whereabouts. Accordingly, if notice of the hearing cannot be delivered by mail because of a licensee or registrant's change of address and the new address is not provided to the board, the board may hold the hearing in the licensee or registrant's absence, after making reasonable efforts to obtain the licensee or registrant's new address.

G. Within 15 days of the licensee or registrant's receipt of notice, s/he may file a written answer to the notice, denying some or all of the charges, or offering any explanation or asserting whatever defense s/he deems applicable.

H. - J. ...

K. If the board finds by a preponderance of the evidence that the withholding, denial, suspension, or revocation of a license or registration, or other disciplinary action is warranted, the board shall sanction said individual according to the provisions of R.S. 37:2662(B):

1. refuse to issue a license or registration;
2. refuse to renew a license or registration;
3. issue a public letter of reprimand;
4. require restitution of costs and expenses incurred by the board related to the enforcement of R.S. 37:2650 et seq.;
5. impose probationary conditions;
6. impose a fine for each violation not to exceed \$1,000 per violation;
7. suspend a license or registration;
8. revoke a license or registration;
9. restrict the license by limiting or reducing the scope of practice; and/or
10. otherwise discipline a licensee or registrant.

L. A final decision or order adverse to a party in an adjudication proceeding shall be in writing or stated in the

record within 45 days of the formal procedure. A final decision shall include findings of fact and conclusions of law. Findings of fact, if set forth in statutory language, shall be accompanied by a concise and explicit statement of the underlying facts supporting the findings. Parties shall be notified by the board, either personally or by certified mail, return receipt requested, of any decision or order. Upon request, a copy of the decision or order shall be mailed to each party and to her/his attorney of record.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 17:374 (April 1991), amended LR 22:357 (May 1996), LR 30:2321 (October 2004), amended by the Department of Health, Board of Speech-Language Pathology and Audiology, LR 42:1669 (October 2016), LR 48:2750 (November 2022), repromulgated LR 49:2967 (December 2022).

§507. General Procedural Rules for Hearings

A. The board is empowered to issue subpoenas upon receipt of a written request from the licensee, registrant, or attorney general at least 15 days in advance of any scheduled hearing. The board shall issue said subpoenas upon receipt of said written request and receipt of any and all fees for subpoenas as provided for in §123.A. promulgated by the board.

B. - H. ...

I. Upon request by either the licensee, registrant, or the attorney general, witnesses shall be sequestered and not allowed in the hearing chambers during the hearing or permitted to discuss their testimony with other witnesses prior to the conclusion of the hearing.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 17:374 (April 1991), amended LR 22:358 (May 1996), LR 27:201 (February 2001), LR 28:1975 (September 2002), LR 30:2322 (October 2004), LR 37:2399 (August 2011), LR 48:2751 (November 2022), repromulgated LR 49:2967 (December 2022).

§512. Summary Suspension of License/Registration

A. The board may suspend an existing license or registration because of a person's conviction of a felony or misdemeanor if the crime directly relates to the duties and responsibilities of the licensee or registrant. The board may also suspend an existing license or registration if there are allegations of fact that the board believes demonstrates a substantial likelihood that the licensee or registrant poses a risk of harm to the public health, safety or welfare.

B. If the board finds that public health, safety or welfare imperatively requires emergency action, and incorporates a finding to that effect in its order, summary suspension of a license or registration may be ordered pending proceedings for revocation or other action. These proceedings shall be promptly instituted and determined.

C. Following the proceedings, the notice to summarily suspend an existing license or registration shall be serviced personally upon the respondent or by certified mail or by other reasonable means. The notice shall inform the licensee or registrant of the opportunity, including the time and place, to appear before the board to show cause regarding why the license or registration should not be suspended. The opportunity for the licensee or registrant to be heard shall

occur from 2 to 10 days following the summary suspension of the license or registration.

D. ...

AUTHORITY NOTE: Promulgated in accordance with R. S. 37:2651-2666.

HISTORICAL NOTE: Promulgated by the Department of Hospitals, Louisiana Board of Examiners for Speech-Language Pathology and Audiology, LR 33:2201 (October 2007), LR 48:2751 (November 2022) repromulgated LR 49:2967 (December 2022).

Chapter 7. Code of Ethics

§701. Preamble

A. The Code of Ethics of the Louisiana Board of Examiners for Speech-Language Pathology and Audiology specifies professional standards that govern clinical and scientific practice, direct professional conduct, provide for proper implementation of professionals' responsibilities to those served, and ensure the welfare of the consumer.

B. Any action that violates the intent and purpose of this code shall be considered unethical. Although the Code of Ethics cannot be inclusive of all specific situations, failure to delineate any particular responsibility or practice in this Code of Ethics shall not be construed as denial of the existence of such responsibilities or practices.

C. Principles of ethics form the underlying moral basis for the Code of Ethics. Individuals shall observe these principles as affirmative obligations under all conditions of professional activity.

D. Rules of ethics are specific statements of minimally acceptable as well as unacceptable professional conduct which are applicable to all individuals.

E. Rules of Ethics for Audiology, Speech-Language Pathology, Provisional Speech-Language Pathology, and Restricted Speech-Language Pathology Licensees

1. Principle of Ethics I. Licensees shall honor their responsibility to hold paramount the welfare of persons they serve professionally or who are participants in research and scholarly activities, provide professional services with honesty and compassion, and respect the rights of those served. The licensee shall take all reasonable precautions to avoid harm to the individual served professionally.

a. Individuals shall provide all clinical services and scientific activities competently.

b. Individuals shall use every resource, including interprofessional collaboration and referral when applicable, to ensure that appropriate service is provided.

c. Individuals shall not discriminate in the delivery of professional services or in the conduct of research and scholarly activities on the basis of race, ethnicity, citizenship, sex, gender identity/gender expression, sexual orientation, age, religion, national origin, disability, culture, language, or dialect.

d. Individuals shall not misrepresent their credentials nor those under their supervision including aides, assistants, technicians, other support personnel, students, research interns, or individuals completing the postgraduate professional employment/experience, and they shall fully inform those they serve professionally of the name, role, and credentials of persons providing services.

e. Individuals may delegate tasks related to the provision of clinical services to students, aides, assistants, technicians, or other support personnel only if those persons are adequately trained and appropriately supervised. The

responsibility for the welfare of those served remains with the fully licensed individual.

f. Individuals shall not delegate tasks that require the unique skills, knowledge, judgment or credentials that are within the scope of practice of their profession to aides, assistants, technicians, other support personnel or nonprofessionals over whom they have supervisory authority.

g. Individuals shall obtain consent from the persons they serve only after a description of and discussion about the nature and possible risks and effects of services to be rendered, technology to be employed, and products to be dispensed. Consumers shall also be informed about possible effects of not engaging in treatment or following clinical recommendations. When the consumer is incapable of providing informed consent, individuals should seek authorization from a legally authorized/appointed representative or family member.

h. Individuals shall enroll and include persons as participants in research only if participation is voluntary, without coercion, and with informed consent.

i. Individuals shall accurately represent the intended purpose of a service, product, or research endeavor and shall abide by established standards for clinical practice and the responsible conduct of research.

j. Individuals shall evaluate the effectiveness of services rendered, technology employed, and products dispensed and shall provide services or dispense products only when benefit can reasonably be expected.

k. Individuals shall not guarantee, directly or by implication, the results of any treatment or procedure; however, they may make a reasonable statement of prognosis.

l. Individuals shall use independent and evidence-based clinical judgment, keeping paramount the welfare of those served.

m. Individuals shall not provide clinical services solely by correspondence but may provide services via telepractice consistent with professional standards and state and federal regulations.

n. Individuals shall protect the confidentiality of any professional or personal information about persons served professionally or participants involved in research and scholarly activities, and may disclose confidential information only when doing so is necessary to protect the welfare of the person or of the community, is legally authorized, or is otherwise required by law.

o. Individuals shall protect the confidentiality and security of records of professional services rendered, research and scholarly activities conducted, and products dispensed. Access to these records shall be allowed only when doing so is necessary to protect the welfare of the person or of the community, is legally authorized, or is otherwise required by law.

p. Individuals shall maintain timely records and accurately record and bill for services provided and products dispensed, and shall not misrepresent services rendered, products dispensed, or research and scholarly activities conducted.

q. Individuals whose professional practice is adversely affected by substance abuse or other health-related conditions are impaired practitioners and shall seek

professional assistance and, where appropriate, withdraw from the affected areas of practice.

r. Individuals who have knowledge a practitioner is unable to provide professional services with reasonable skill and safety shall report this information to the appropriate authority including the licensure board.

s. Individuals shall provide reasonable notice and information about alternatives for obtaining care in the event that the individual can no longer provide professional services.

2. Principle of Ethics II. Individuals shall honor their responsibility to achieve and maintain the highest level of professional competence and performance consistent with prevailing practice standards.

a. Individuals shall engage in only those aspects of the professions that are within the scope of their practice and competence, considering their level of licensure, registration, education, training and experience.

b. Individuals who engage in research shall comply with institutional, state, and federal regulations that address any aspects of research.

c. Individuals shall enhance and refine their professional competence and expertise through engagement in lifelong learning applicable to their professional activities and skills.

d. Individuals in administrative or supervisory roles shall not require or permit their professional staff to provide services or conduct research activities that exceed their competence, education, training, experience, and licensure status.

e. Individuals in administrative or supervisory roles shall not require or permit their professional staff to provide services or conduct clinical activities that compromise their independent and objective professional judgment.

f. Individuals shall make use of technology and instrumentation consistent with accepted professional practice guidelines and shall ensure that all technology and instrumentation used to provide services or to conduct research and scholarly activities are in proper working order and are properly calibrated. When such technology is not available, an appropriate referral should be made.

3. Principle of Ethics III. Individuals shall honor their responsibility to the public when advocating for communication, swallowing, and vestibular needs of the public, and shall provide accurate information involving any aspect of the professions.

a. Individuals shall not misrepresent their credentials, competence, education, training, experience, or scholarly contributions.

b. Individuals shall avoid engaging in conflicts of interest whereby personal, financial, or other considerations have the potential to influence or compromise professional judgment and objectivity.

c. Individuals shall not misrepresent research and scholarly activities, diagnostic information, services rendered, results of services provided, products dispensed, or the effects of products dispensed.

d. Individuals shall not defraud through intent, ignorance, or negligence, or engage in any scheme to defraud in connection with obtaining payment, reimbursement, or grants and contracts for services provided, research conducted, or products dispensed.

e. Individuals' statements to the public shall provide accurate and complete information about the nature and management of communication disorders, about the professions, about professional services, about products, and about research and scholarly activities.

f. Individuals' statements to the public shall adhere to prevailing professional norms and shall not contain misrepresentations when advertising, announcing, and promoting their professional services and products or when reporting research results.

g. Individuals shall not make false statements regarding areas of professional practice, and shall complete all materials honestly and without omission.

4. Principle of Ethics IV. Individuals shall uphold the dignity and autonomy of the professions, maintain collaborative and harmonious interprofessional and intraprofessional relationships, and accept the professions' self-imposed standards.

a. Individuals shall work collaboratively, when appropriate, with members of one's own profession and members of other professions to deliver the highest quality of care.

b. Individuals shall exercise independent professional judgment in recommending and providing professional services when an administrative mandate, referral source, or prescription prevents keeping the welfare of persons served paramount.

c. Individuals' statements to colleagues about professional services, research results, and products shall adhere to prevailing professional standards and shall contain no misrepresentations.

d. Individuals shall not engage in any form of conduct that adversely reflects on the professions or on the individual's fitness to serve persons professionally.

e. Individuals shall not engage in dishonesty, negligence, fraud, deceit, or misrepresentation.

f. Applicants for licensure or registration, and individuals making disclosures shall not make false statements and shall complete all application and disclosure materials honestly and without omission.

g. Individuals shall not engage in any form of harassment, power abuse, or sexual harassment.

h. Individuals shall not engage in sexual activity with students, patients/clients, research participants, speech-language pathology assistants, aides, or licensees over whom they exercise professional authority or power.

i. Individuals shall not allow anyone under their supervision to engage in any practice that violates any provision of the practice act or Rules and Regulations including the Code of Ethics.

j. Individuals shall assign credit only to those who have contributed to a publication, presentation, protocol, process, or product. Credit shall be assigned in proportion to the contribution and only with the contributor's consent.

k. Individuals shall not engage in plagiarism and shall reference the source when using other persons' ideas, research, presentations, or products in written, oral, or any other media presentation or summary.

l. Individuals shall not discriminate in their relationships with colleagues, assistants, other support personnel, students, and members of other professions and disciplines on the basis of race, ethnicity, citizenship, sex,

gender identity/gender expression, sexual orientation, age, religion, national origin, disability, culture, language, or dialect.

m. Individuals shall comply with local, state, and federal laws and regulations applicable to professional practice, research ethics, and the responsible conduct of research.

n. Individuals shall inform the board of any violations of the practice act and the Rules and Regulations including the Code of Ethics.

o. Individuals shall cooperate fully with the board on matters of professional conduct relative to the practice act and the Rules and Regulations including the Code of Ethics, and shall not make false statements of fact or withhold relevant facts necessary to fairly adjudicate complaints.

p. Individuals who have been publicly sanctioned or denied a license, registration, or a professional credential by any professional association, professional licensing authority or board, or other professional regulatory body shall self-report by notifying the board in writing within 30 days of the final action or disposition. Such written notification shall consist of a certified copy of the final action, sanction, or disposition.

q. Individuals who have been convicted, been found guilty, or entered a plea of *nolo contendere* to any misdemeanor involving dishonesty, physical harm or the threat of physical harm to the person or property of another, or any felony, shall self-report by notifying the Board in writing within 30 days of the conviction, plea, or finding of guilt. Such written notification shall consist of a certified copy of the conviction, plea, *nolo contendere* record, or minute/docket entry.

F. Rules of Ethics for Speech-Language Pathology Assistant and Provisional Speech-Language Pathology Assistant Licensees

1. Principle of Ethics I. Licensees shall honor their responsibility to hold paramount the welfare of persons they serve or who are participants in research and scholarly activities, provide services with honesty and compassion, and respect the rights of those served. The licensee shall take all reasonable precautions to avoid harm to the individual served.

a. Individuals shall provide clinical services and scientific activities competently, and engage only in those activities prescribed by the supervising speech-language pathologist.

b. Individuals shall not discriminate in the delivery of services or in the conduct of research and scholarly activities on the basis of race, ethnicity, citizenship, sex, gender identity/gender expression, sexual orientation, age, religion, national origin, disability, culture, language, or dialect.

c. Individuals shall not misrepresent their credentials and shall fully inform those they serve of their name, role, and credentials.

d. Speech-language pathology assistants shall not interpret test or assessment results, guarantee results, make referrals, discharge patients/clients, nor provide patient/client or family counseling.

e. Provisional speech-language pathology assistant licensees shall not provide services via telepractice, interpret test or assessment results, guarantee results, make referrals,

discharge patients/clients, provide patient/client or family counseling.

f. Individuals shall protect the confidentiality of clinical or personal information about persons served or participants involved in research and scholarly activities, and shall not disclose confidential information orally or in writing to anyone not designated by the supervising speech-language pathologist and without the authorization of the patient/client or their designee.

g. Individuals shall protect the confidentiality and security of records of services rendered, research and scholarly activities conducted, and products dispensed. Access to these records shall not be allowed unless directed by the supervising speech-language pathologist.

h. Individuals shall maintain timely and adequate records of services rendered, shall not charge for services not rendered, and shall not misrepresent services rendered, or research and scholarly activities conducted.

i. Individuals whose services are adversely affected by substance abuse or other health-related conditions are impaired practitioners and shall seek professional assistance and, where appropriate, withdraw from the affected areas of practice.

j. Individuals who have knowledge that a licensee is unable to provide services with reasonable skill and safety shall report this information to the appropriate authority including the licensure board.

2. Principle of Ethics II. Individuals shall honor their responsibility to achieve and maintain the highest level of competence and performance.

a. Individuals shall engage in only those aspects of service provision that are within the scope of their practice and competence, considering their level of licensure, education, training and experience.

b. Individuals shall hold the appropriate qualifications for the area(s) in which they are providing services. Individuals shall engage in lifelong learning throughout their careers.

c. Individuals shall not provide services unless appropriately supervised.

d. Individuals shall not provide services for which the licensee has not been properly prepared.

e. Individuals shall utilize technology and instrumentation as directed by the supervising speech-language pathologist, ensuring that proper working order is maintained and calibration has been established.

3. Principle of Ethics III. Individuals shall honor their responsibility to the public by providing accurate information in all communications.

a. Individuals shall not misrepresent their credentials, competence, education, training or experience.

b. Individuals shall not participate in professional activities that constitute a conflict of interest.

c. Individuals shall not misrepresent research and scholarly activities, services rendered or any information, or engage in any scheme or maneuver to defraud in connection with obtaining payment or reimbursement for services.

d. Individuals shall not make false statements regarding areas of practice, and shall complete all materials and documents honestly and without omission.

4. Principle of Ethics IV. Individuals shall honor their responsibilities and their relationships with colleagues and

members of other professions and disciplines. Individuals shall maintain harmonious interprofessional and intraprofessional relationships and accept the standards delineated for assistants.

a. Individuals' statements to colleagues about services, research, or products shall adhere to prevailing standards and contain no misrepresentations.

b. Individuals shall not engage in dishonesty, negligence, fraud, deceit, or misrepresentation.

c. Applicants for licensure and individuals making disclosures shall not make false statements and shall complete all application and disclosure materials honestly and without omission.

d. Individuals shall not engage in any form of harassment, power abuse, or sexual harassment, or any other form of conduct that adversely reflects on service delivery or on the individual's fitness to serve persons.

e. Individuals shall not engage in sexual activity with a patient/client or research participant.

f. Individuals shall assign credit only to those who have contributed to a publication, presentation, protocol, process, or product. Credit shall be assigned in proportion to the contribution and only with the contributor's consent.

g. Individuals shall not engage in plagiarism and shall reference the source when using other persons' ideas, research, presentations, or products in written, oral, or any other media presentation or summary.

h. Individuals shall not discriminate in their relationships with colleagues and members of other professions and disciplines on the basis of race, ethnicity, citizenship, sex, gender identity/gender expression, sexual orientation, age, religion, national origin, disability, culture, language or dialect.

i. Individuals shall comply with local, state, and federal laws and regulations applicable to practice and research.

j. Individuals shall inform the board of any violations of the practice act or the Rules and Regulations including the Code of Ethics.

k. Individuals shall cooperate fully with the board on matters of professional conduct relative to the practice act or the Rules and Regulations including the Code of Ethics, and shall not make false statements of fact or withhold relevant facts necessary to fairly adjudicate complaints.

l. Individuals who have been publicly sanctioned or denied a license or a professional credential by any professional association, professional licensing authority or board, or other professional regulatory body shall self-report by notifying the board in writing within 30 days of the final action or disposition. Such written notification shall consist of a certified copy of the final action, sanction, or disposition.

m. Individuals who have been convicted, been found guilty, or entered a plea of nolo contendere to any misdemeanor involving dishonesty, physical harm or the threat of physical harm to the person or property of another, or any felony, shall self-report by notifying the Board in writing within 30 days of the conviction, plea, or finding of guilt. Such written notification shall consist of a certified copy of the conviction, plea, nolo contendere record, or minute/docket entry.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 17:370 (April 1991), amended LR 22:360 (May 1996), LR 30:2324 (October 2004), LR 33:2201 (October 2007), LR 37:2399 (August 2011), LR 39:1044 (April 2013), LR 48:2751 (November 2022) repromulgated LR 49:2968 (December 2022).

Jolie Jones
Executive Director

2212#010

RULE

Department of Health Bureau of Health Services Financing and Office for Citizens with Developmental Disabilities

Early and Periodic Screening, Diagnosis and Treatment Health Services EarlySteps Reimbursement Rate Increase (LAC 50:XV.7107)

The Department of Health, Bureau of Health Services Financing and the Office for Citizens with Developmental Disabilities has amended LAC 50:XV.7101 in the Medical Assistance Program as authorized by R.S. 36:254 and pursuant to Title XIX of the Social Security Act. This Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq. This Rule is hereby adopted on the day of promulgation.

Title 50

PUBLIC HEALTH—MEDICAL ASSISTANCE

Part XV. Services for Special Populations

Subpart 5. Early and Periodic Screening, Diagnosis, and Treatment

Chapter 71. Health Services

§7107. EarlySteps Reimbursement

A. Effective for dates of service on or after January 1, 2011, the reimbursement for certain Medicaid-covered health services rendered in the EarlySteps Program shall be reduced by 2 percent of the rate in effect on December 31, 2010.

1. The following services rendered in the natural environment shall be reimbursed at the reduced rate:

- a. audiology services;
- b. speech pathology services;
- c. occupational therapy;
- d. physical therapy; and
- e. psychological services.

2. Services rendered in special purpose facilities/inclusive child care and center-based special purpose facilities shall be excluded from this rate reduction.

B. Effective for dates of service on or after July 1, 2022, the reimbursement for Medicaid covered health services rendered in the EarlySteps Program (Part C of IDEA) shall be increased by 30 percent of the rate in effect on January 1, 2011.

1. The increased rate shall be applied to services provided in the following settings :

a. natural environment that includes a child's home and settings in the community where children of the same age with no disabilities or special needs participate;

b. special purpose facility/inclusive child care that includes settings such as a child care center, nursery schools, or preschools where at least 50 percent of the children have no disabilities or developmental delays, and

c. center-based special purpose facility that is a facility where only children with disabilities or developmental delays are served.

2. The following services shall be reimbursed at the increased rate:

- a. audiology services;
- b. speech language pathology services;
- c. occupational therapy;
- d. physical therapy; and
- e. psychological services.

C. - C.2. Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 30:800 (April 2004), amended LR 31:2030 (August 2005), LR 35:69 (January 2009), amended by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 37:1599 (June 2011), amended by the Department of Health, Bureau of Health Services Financing and the Office for Citizens with Developmental Disabilities, LR 48:2971 (December 2022).

Implementation of the provisions of this Rule may be contingent upon the approval of the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), if it is determined that submission to CMS for review and approval is required.

Dr. Courtney N. Phillips
Secretary

2212#052

RULE

Department of Health Bureau of Health Services Financing

Intermediate Care Facilities for Persons with Intellectual Disabilities Dedicated Program Funding Pool Payments (LAC 50:VII.32917)

The Department of Health, Bureau of Health Services Financing has amended LAC 50:VII.32917 in the Medical Assistance Program as authorized by R.S. 36:254 and

pursuant to Title XIX of the Social Security Act. This Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq. This Rule is hereby adopted on the day of promulgation.

Title 50

PUBLIC HEALTH—MEDICAL ASSISTANCE

Part VII. Long-Term Care

Subpart 3. Intermediate Care Facilities for Persons with Intellectual Disabilities

Chapter 329. Reimbursement Methodology

Subchapter A. Non-State Facilities

§32917. Dedicated Program Funding Pool Payments

A. - B.5. ...

C. Effective for providers active and Medicaid certified as of July 1, 2022, a one-time, lump sum payment will be made to non-state, non-public intermediate care facilities for individuals with intellectual disabilities (ICFs/IID).

1. Methodology

a. Payment will be based on each provider's specific pro-rated share of an additional dedicated program funding pool totaling \$27,974,178.

b. The pro-rated share for each provider will be determined utilizing the provider's percentage of program Medicaid days for dates of service in a three consecutive month period selected by the department occurring between January 1, 2022 and December 31, 2022.

c. If the additional dedicated program funding pool lump sum payments exceed the Medicare upper payment limit in the aggregate for the provider class, the department shall recoup the overage using the same means of distribution in §32917.C.1.b above.

d. The one-time payment will be made on or before June 30, 2023.

e. All facilities receiving payment shall be open and operating as an ICF/IID at the time the payment is made.

f. Payment of the one-time, lump sum payment is subject to approval by the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS).

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 46:28 (January 2020, amended LR 48:2972 (December 2022).

Implementation of the provisions of this Rule may be contingent upon the approval of the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), if it is determined that submission to CMS for review and approval is required.

Dr. Courtney N. Phillips
Secretary

2212#053

RULE

**Department of Health
Bureau of Health Services Financing**

Pediatric Day Health Care
Licensing Standards
(LAC 48:I.Chapter 52)

The Department of Health, Bureau of Health Services Financing has amended LAC 48:I.Chapter 52 as authorized by R.S. 36:254 and R.S. 40:2131-2141. This Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq. This Rule is hereby adopted on the day of promulgation.

Title 48

PUBLIC HEALTH—GENERAL

Part I. General Administration

Subpart 3. Licensing and Certification

Chapter 52. Pediatric Day Health Care Facilities

Subchapter B. Licensing Procedures

§5205. General Provisions

A. - G. ...

H. The PDHC facility shall provide for the installation and operation of cameras that record both video and audio at its licensed premises.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2193–40:2193.4.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 35:2761 (December 2009), amended by the Department of Health, Bureau of Health Services Financing, LR 48:2973 (December 2022).

§5213. Changes in Licensee Information or Personnel

A. - D.3....

E. Any request for a duplicate license must be accompanied by the appropriate fees.

F. - F.2. ...

G. A change of ownership of the PDHC facility shall not be submitted at the time of annual renewal of the PDHC facility's license.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2193–40:2193.4.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 35:2763 (December 2009), amended by the Department of Health, Bureau of Health Services Financing, LR 48:2973 (December 2022).

Subchapter C. Administration and Organization

§5233. Policy and Procedures

A. - E.5.

F. The director of the PDHC facility shall develop and share with all facility employees and the parents or guardians of children served at the facility a policy relative to cameras that record both video and audio at the facility that, at minimum, provides for all of the following:

1. the location and placement of cameras that record both video and audio in any room in which children may be cared for, except the interior of a restroom or any other area in which a child's bare body is normally exposed;

2. a requirement that written notice of the cameras that record both video and audio be provided to facility employees, the parents or guardians of children served at the facility, and authorized visitors;

3. a requirement that all employees who provide services at the facility receive training concerning the use of cameras that record both video and audio;

4. provisions relative to the duration of retention of video and audio data recorded by the devices required in §5205 and procedures for data storage and disposal;

5. procedures for protecting children's privacy and for determining to whom, and under what circumstances, video or audio data may be disclosed. Such policies shall restrict authorization to review video or audio data recorded by cameras at PDHC facilities to the following persons, exclusively:

a. the director of the PDHC facility;

b. the secretary of the department or his/her designee;

c. the parents or guardians of a recorded child, pursuant to an allegation or evidence of abuse, neglect or injury;

d. any member of law enforcement while investigating, in his official capacity, an allegation or evidence of abuse, neglect or injury; and

e. any party designated in a subpoena issued by a court of law;

6. a requirement that any person who views a recording showing what he believes could be a violation of state or federal law shall report the suspected violation to the appropriate law enforcement agency;

7. a requirement that any cameras that record both video and audio installed pursuant to §5205 be in compliance with the National Fire Protection Association *Life Safety Code*, as adopted by the Office of State Fire Marshal; and

8. a requirement that any video and audio recordings made by cameras at PDHC facilities, installed and operated in accordance with §5205, shall be kept confidential and are not public records; however, such a recording may be viewed by a party designated in Subsection F.5 of this Section.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2193–40:2193.4.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 35:2768 (December 2009), amended by the Department of Health, Bureau of Health Services Financing, LR 48:2973 (December 2022).

Subchapter F. Facility Responsibilities

§5265. Staffing Requirements

A. - F.1.g. ...

2. Each direct care staff person employed by the facility shall have at least the following qualifications and experience:

a. - b. ...

c. be currently registered with the Certified Nurse Aide (CNA) Registry or Direct Service Worker (DSW) Registry as a CNA or DSW in good standing and without restrictions;

d. - e. ...

G. Nursing and Direct Care Staffing Levels

1. PDHC facilities shall have sufficient nursing and direct care staff to meet the needs of each infant and child receiving services in the PDHC facility in accordance with the plan of care.

2. - 3. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2193-40:2193.4.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 35:2773 (December 2009, amended by the Department of Health, Bureau of Health Services Financing, LR 48:2973 (December 2022)).

Subchapter G. Safety and Emergency Preparedness

§5281. Emergency Preparedness

A. - J.5. ...

K. Inactivation of License due to Declared Disaster or Emergency

1. - 1.a.v. ...

b. the licensed PDHC facility resumes operating as a PDHC facility in the same service area within one year of the issuance of such an executive order or proclamation of emergency or disaster;

EXCEPTION: If the PDHC facility requires an extension of this timeframe due to circumstances beyond the PDHC facility's control, the department will consider an extended time period to complete construction or repairs. Such written request for extension shall show the PDHC facility's active efforts to complete construction or repairs and the reasons for request for extension of the PDHC facility's inactive license. Any approval for extension is at the sole discretion of the department.

1.c. - 2....

3. Upon completion of repairs, renovations, rebuilding or replacement of the facility, a PDHC facility which has received a notice of inactivation of its license from the department shall be allowed to reinstate its license upon the following conditions being met:

a. the PDHC facility shall submit a written license reinstatement request to the licensing agency of the department as soon as possible prior to the anticipated date of reopening;

b. ...

c. the license reinstatement request shall include a completed licensing application with approval from the Office of Public Health and the Office of State Fire Marshal; and

3.d. - 7....

L. Inactivation of Licensure due to a Non-Declared Disaster or Emergency

1. A PDHC facility in an area or areas which have been affected by a non-declared emergency or disaster may seek to inactivate its license, provided that the following conditions are met:

a. the PDHC facility shall submit written notification to the Health Standards Section (HSS) within 30 days of the date of the non-declared emergency or disaster stating that:

i. the PDHC facility has experienced an interruption in the provision of services as a result of events that are due to a non-declared emergency or disaster;

ii. the facility intends to resume operation as a PDHC facility in the same service area;

iii. the PDHC facility attests that the emergency or disaster is the sole causal factor in the interruption of the provision of services; and

iv. the PDHC facility's initial request to inactivate does not exceed one year for the completion of repairs, renovations, rebuilding or replacement of the facility.

NOTE: Pursuant to these provisions, an extension of the 30 day deadline for initiation of request may be granted at the discretion of the department.

b. the PDHC facility continues to pay all fees and costs due and owed to the department including, but not limited to, annual licensing fees and outstanding civil monetary penalties and/or civil fines; and

c. the PDHC facility continues to submit required documentation and information to the department, including but not limited to cost reports.

2. Upon receiving a completed written request to temporarily inactivate a PDHC facility's license, the department shall issue a notice of inactivation of license to the PDHC facility.

3. Upon receipt of the department's approval of request to inactivate the PDHC facility's license, the PDHC facility shall have 90 days to submit plans for the repairs, renovations, rebuilding or replacement of the facility, if applicable, to the OSFM and OPH as required.

4. The facility shall resume operating as a PDHC facility in the same service area within one year of the approval of renovation/construction plans by the OSFM and the OPH as required.

EXCEPTION: If the PDHC facility requires an extension of this timeframe due to circumstances beyond the PDHC facility's control, the department will consider an extended time period to complete construction or repairs. Such written request for extension shall show the PDHC facility's active efforts to complete construction or repairs and the reasons for request for extension of the PDHC facility's inactive license. Any approval for extension is at the sole discretion of the department.

5. Upon completion of repairs, renovations, rebuilding or replacement of the PDHC facility which has received a notice of inactivation of its license from the department, the facility shall be allowed to reinstate its license upon the following conditions being met:

a. the PDHC facility shall submit a written license reinstatement request to the licensing agency of the department;

b. the license reinstatement request shall inform the department of the anticipated date of opening and shall request scheduling of a licensing or physical environment survey, where applicable; and

c. the license reinstatement request shall include a completed licensing application.

6. Upon receiving a completed written request to reinstate a PDHC facility's license, the department may conduct a licensing or physical environment survey. The department may issue a notice of reinstatement if the PDHC facility has met the requirements for licensure including the requirements of this Subsection.

7. No change of ownership (CHOW) of the PDHC facility shall occur until such PDHC facility has completed repairs, renovations, rebuilding or replacement construction and has resumed operations as a PDHC facility.

8. The provisions of this Subsection shall not apply to a PDHC facility which has voluntarily surrendered its license and ceased operation.

9. Failure to comply with any of the provisions of this Subsection shall be deemed a voluntary surrender of the PDHC facility's license.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2193-40:2193.4.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 35:2777 (December 2009), amended by the Department of Health, Bureau of Health Services Financing, LR 48:2974 (December 2022).

Dr. Courtney N. Phillips
Secretary

2212#054

RULE

Department of Health Bureau of Health Services Financing

Pediatric Day Health Care Program
Reimbursement Rate Increase
(LAC 50:XV.28101)

The Department of Health, Bureau of Health Services Financing has amended LAC 50:XV.28101 in the Medical Assistance Program as authorized by R.S. 36:254 and pursuant to Title XIX of the Social Security Act. This Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq. This Rule is hereby adopted on the day of promulgation.

Title 50

PUBLIC HEALTH—MEDICAL ASSISTANCE

Part XV. Services for Special Populations

Subpart 19. Pediatric Day Health Care Program

Chapter 281. Reimbursement Methodology

§28101. General Provisions

A. - B. ...

C. Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 36:1558 (July 2010), amended LR 39:1286 (May 2013), amended by the Department of Health, Bureau of Health Services Financing, LR 43:83 (January 2017), LR 48:2975 (December 2022).

Implementation of the provisions of this Rule may be contingent upon the approval of the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), if it is determined that submission to CMS for review and approval is required.

Dr. Courtney N. Phillips
Secretary

2212#055

RULE

Department of Health Bureau of Health Services Financing

Pharmacy Benefits Management Program
Copayment and Maximum Quantity
(LAC 50:XXIX.111 and 119)

The Department of Health, Bureau of Health Services Financing has amended LAC 50:XXIX.111 and §119 in the Medical Assistance Program as authorized by R.S. 36:254 and pursuant to Title XIX of the Social Security Act. This Rule is promulgated in accordance with the provisions of the

Administrative Procedure Act, R.S. 49:950 et seq. This Rule is hereby adopted on the day of promulgation.

Title 50

PUBLIC HEALTH—MEDICAL ASSISTANCE

Part XXIX. Pharmacy

Chapter 1 General Provisions

§111. Copayment

A. - A.1. ...

2. The pharmacy provider shall collect a copayment from the Medicaid beneficiary for each drug dispensed and covered by Medicaid. The following pharmacy services are exempt from the copayment requirements:

a. - b. ...

c. family planning services;

d. preventive medications as designated by the U.S. Preventive Services Task Force's A and B recommendations; and

e. services provided during a federal public health emergency (PHE).

A.3. - B.5. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, LR 32:1055 (June 2006), amended by the Department of Health, Bureau of Health Services Financing, LR 43:1181 (June 2017), LR 43:1553 (August 2017), LR 46:34 (January 2020), LR 48:2975 (December 2022).

§119. Maximum Quantity

A. ...

B. When maintenance drugs are prescribed and dispensed for chronic illnesses they shall be in quantities sufficient to effect economy in dispensing and yet be medically sound. Maintenance type drugs should be prescribed and dispensed in at least a month's supply after the initial fill. A 90-day supply is allowed on maintenance drugs after a beneficiary has been on the same drug and strength for 60 days. Contraceptives should be dispensed in a six-month supply, after a beneficiary has been on the same drug and strength for six months, unless the beneficiary or prescriber requests a smaller supply.

C. For patients in nursing homes, the pharmacist shall bill for a minimum of a month's supply of medication unless the treating physician specifies a smaller quantity for a special medical reason. A 90-day supply is allowed on maintenance drugs after a beneficiary has been on the same drug and strength for 60 days.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 32:1056 (June 2006), amended by the Department of Health, Bureau of Health Services Financing, LR 43:1182 (June 2017), LR 46:34 (January 2020), LR 48:2975 (December 2022).

Implementation of the provisions of this Rule may be contingent upon the approval of the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), if it is determined that submission to CMS for review and approval is required.

Dr. Courtney N. Phillips
Secretary

2212#056

RULE

**Department of Health
Bureau of Health Services Financing
and
Office for Citizens with Developmental Disabilities**

Targeted Case Management
Reimbursement Methodology
EarlySteps Reimbursement Rate Increase
(LAC 50:XV.10701)

The Department of Health, Bureau of Health Services Financing and the Office for Citizens with Developmental Disabilities has amended LAC 50:XV.10701 in the Medical Assistance Program as authorized by R.S. 36:254 and pursuant to Title XIX of the Social Security Act. This Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq. This Rule is hereby adopted on the day of promulgation.

Title 50

PUBLIC HEALTH—MEDICAL ASSISTANCE

Part XV. Services for Special Populations

Subpart 7. Targeted Case Management

Chapter 107. Reimbursement

§10701. Reimbursement

A. Reimbursement for case management services for the Infant and Toddler Program (EarlySteps):

1. Effective for dates of service on or after July 1, 2022, case management services provided to participants in the EarlySteps Program shall be reimbursed at a flat rate for each approved unit of service.

a. The standard unit of service is equivalent to one month and covers both service provision and administrative (overhead) costs.

b. Service provision includes the core elements in:

- i. Section 10301 of this Subpart;
- ii. the case management manual; and
- iii. EarlySteps practices.

A.2. - E. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 30:1040 (May 2004), amended LR 31:2032 (August 2005), LR 35:73 (January 2009), amended by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 35:1903 (September 2009), LR 36:1783 (August 2010), amended by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Public Health, LR 39:97 (January 2013), amended by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 39:3302 (December 2013), LR 40:1700, 1701 (September 2014), LR 41:1490 (August 2015), amended by the Department of Health, Bureau of Health Services Financing, LR 44:63 (January 2018), LR 47:1128 (August 2021), amended by the Department of Health, Bureau of Health Services Financing and the Office for Citizens with Developmental Disabilities, LR 48:2976 (December 2022).

Implementation of the provisions of this Rule may be contingent upon the approval of the U.S. Department of

Health and Human Services, Centers for Medicare and Medicaid Services (CMS), if it is determined that submission to CMS for review and approval is required.

Dr. Courtney N. Phillips
Secretary

2212#057

RULE

**Department of Health
Office of Public Health**

Medical Marijuana Regulation
(LAC 51:XXIX.101-907)

Under the authority of R.S. 40:4 and 40:5, and in accordance with R.S. 49:950 et seq., the Administrative Procedure Act, state health officer, acting through the Department of Health, Office of Public Health (LDH/OPH), has enacted a new Part of Title 51 of the *Louisiana Administrative Code* (also known as the *Louisiana State Sanitary Code*) as a consequence of changes made to medical marijuana regulations under Act No. 491 and Act No. 492 of the 2022 Louisiana Legislature. The following changes authorize the LDH/OPH the ability to transition to conducting oversight of the manufacture and distribution of medical marijuana products, which could affect the health of Louisiana’s citizens and visitors. Further, this Rule will provide the state health officer the ability to make critical decisions that protect human health.

This Rule adds a new Part, Part XXIX, to Title 51 of the *Louisiana Administrative Code*, consisting of nine Chapters enumerating the various provisions of the regulation of medical marijuana. Chapter 1 explains definitions that are unique to this regulation. Chapter 3 specifies the enabling legislation and notes that the products to be regulated herein are subject to federal law. Chapter 5 describes the permitting process for contractors and the licensure process for the two statutorily-prescribed licensees. Chapter 7 lists the inspection requirements for medical marijuana facilities and the operational requirements for the firms. Chapter 9 indicates the requirements for medical marijuana testing laboratories. This Rule is hereby adopted on the day of promulgation.

Title 51

PUBLIC HEALTH—SANITARY CODE

Part XXIX. Medical Marijuana

Chapter 1. General Requirements

§101. Definitions

A. Except as may be otherwise defined in any provision of this Part, and unless the context or use thereof clearly indicates otherwise, the following words and terms used in this Part of the *Sanitary Code* are defined for the purposes thereof, and for purposes of any other Parts which are adopted or may hereafter be adopted, as follows:

Immature Plant—nonflowering medical marijuana (as defined below) plant that is no taller than eight inches produced from a cutting, clipping or seedling.

Licensee—as defined in La. R.S. 40:1046(H)(2)(a), the Louisiana State University Agricultural Center or the Southern University Agricultural Center.

Louisiana Medical Marijuana Tracking System (LMMTS)—the required seed-to-sale tracking system that tracks medical marijuana from either the seed or immature plant stage until the plant material is sold as a finished product to a licensed medical marijuana pharmacy or destroyed.

Medical Marijuana—any parts of the plant genus *Cannabis* and all derivatives of all strains of this genus, whether growing or not; the seeds thereof; the resin extracted therefrom; any compound, mixture, or preparation of such plant, its seeds, or resin, including tetrahydrocannabinol (THC), cannabidiol (CBD), and all other naturally-occurring phytocannabinoids, whether produced directly or indirectly by extraction. This term does not include the mature stalks of such plant; fiber produced from such stalks; oil or cake made from the seeds of such plant; any other compound, salt, derivative, mixture, or preparation of such mature stalks (except for the resin extracted therefrom); fiber, oil, or cake; or sterilized seed incapable of germination.

Medical Marijuana Waste—medical marijuana that is unusable or that cannot be processed into a useable form.

Permittee—contractor employed by the licensee to grow, cultivate, process, transport, and distribute medical marijuana.

Therapeutic Marijuana—see *Medical Marijuana*.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1046 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 48:2976 (December 2022).

Chapter 3. Authority; Preemption

§301. Authority

A. The rules specified in this Part are promulgated under the authority of R.S. Title 40, Chapter 4, Part X-E (R.S. 40:1046 et seq.).

B. In accordance with the provisions of 21 U.S.C. 812, medical marijuana remains classified as a Schedule I Controlled Dangerous Substance by the government of the United States. No Louisiana law or regulation may preempt or supersede federal law, and the products regulated in the rules described in this Part remain subject to such laws as are applicable to Schedule I substances.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1046 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 48:2977 (December 2022).

Chapter 5. Licensure and Permitting

§501. Licensure of Authorized Entities

A. The department shall issue a nontransferable license to the Louisiana State University Agricultural Center and to the Southern University Agricultural Center to produce medical marijuana. Such license shall be renewable annually on July 1. Requirements for renewal include the maintenance of a contractual relationship with a single permittee.

B. No other entity is authorized to receive a license for the production of medical marijuana.

C. Licensees shall comply with all applicable requirements of R.S. Title 40, Chapter 4, Part X-E (R.S. 40:1046 et seq.), including payment of all fees, allowance of all inspections, and provision of all information required thereunder.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1046 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 48:2977 (December 2022).

§503. Permitting

A. Licensees shall contract with only one permittee, and this permittee shall apply to the department for an annual permit to engage in growing, cultivating, processing, transporting, and distributing medical marijuana.

B. Permits are nontransferable and subject to an application review process and a license fee of \$100,000.00. Permits expire on and shall be renewed annually on July 1.

C. Permittees shall comply with all applicable requirements of R.S. Title 40, Chapter 4, Part X-E (R.S. 40:1046 et seq.), including payment of all fees, allowance of all inspections, and provision of all information required thereunder.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1046 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 48:2977 (December 2022).

§505. Application Process

A. Applications for permitting shall be made using documents supplied by the department for this purpose.

B. Applicants shall supply the following information as a condition of receiving a new permit:

1. detailed plans of the facility, including a site plan and plumbing, electrical, mechanical, HVAC, and drainage schedules as well as schedules of finishes for floors, walls, and ceilings in all areas;

2. plans including layouts and lists of equipment used for surveillance of the facility, including cameras, motion-sensing devices, locking mechanisms, points of secured entry and egress, and monitoring stations;

3. proposed hours of operation and approximate estimated staffing levels;

4. product safety plans, including the protocol for processing each kind of medical marijuana manufactured at the site, including procedures for identifying, monitoring, and controlling any relevant biological, physical, or chemical hazards reasonably likely to occur during the growth, cultivation and harvesting, and production and packaging phases of the operation;

5. lists of required per-batch production records used for the manufacture of medical marijuana, including relevant laboratory testing of raw materials, components, excipients, and other constituents;

6. a recall plan;

7. a document provided by the licensee affirming that all criminal background checks on contractor personnel required by R.S. 40:1047 have been completed to the licensee's satisfaction; and

8. any other information or plans required to be provided under R.S. Title 40, Chapter 4, Part X-E (R.S. 40:1046 et seq.).

C. As a condition of renewal of a permit, the permittee shall supply the following additional information in writing to the department by January 10 of the renewal year:

1. the gross quantity of medical marijuana grown during the preceding calendar year;
2. a detailed report of associated production costs, including seed, fertilizer, labor, advisory services, construction and maintenance, and irrigation;
3. a detailed list of items for which subcontractors were employed and the associated costs for each service rendered by subcontractors;
4. the total quantity of medical marijuana generated as a finished product within that year and the quantity distributed to each licensed marijuana pharmacy;
5. costs paid to the licensee related to medical marijuana production; and
6. any other information or plans required to be provided under R.S. Title 40, Chapter 4, Part X-E (R.S. 40:1046 et seq.).

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1046 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 48:2977 (December 2022).

Chapter 7. Inspections and Operational Requirements

§701. Inspections

A. Permittee facilities require a preoperational or initial inspection and this shall follow review and acceptance of the plans required in §505. Inspections are designed to ensure the following:

1. the facility is of solid construction and designed in such a way to secure the knowledge of the nature of its operations from a casual observer by means of odor control and secure enclosed spaces;
2. the facility, staff, and documents meet the necessary minimum standards to ensure the production of safe medical marijuana;
3. operational documents as described in §505.B are maintained on-premises;
4. the firm has current access to the Louisiana Medical Marijuana Tracking System (LMMTS);
5. the facility has adequate site and product security measures in place, including visitor logs and employee activity records;
6. the facility has an inventory tracking system as described in §703-§705 of this Chapter in place;
7. the facility has complete personnel records in place;
8. compliance with the requirements of §715 of this Part; and
9. the facility complies with all applicable requirements of R.S. Title 40, Chapter 4, Part X-E (R.S. 40:1046 et seq.).

B. As a condition of its permit, the permittee shall allow the State Health Officer or his/her designee(s) to review all records relevant to the operations and management of the permitted facility.

C. Routine inspections of permitted facilities to assess continued compliance shall occur no less frequently than twice per fiscal year. Complaint-based inspections may be conducted at any time during business hours and without prior notice.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1046 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 48:2978 (December 2022).

§703. Product and Site Security

A. Permittee facilities shall maintain an onsite security system that includes, at a minimum, the following components:

1. secured locks on doors throughout the facility;
2. audible alarms and a system of video and audio surveillance cameras with recording capabilities that meets the following additional requirements:
 - a. video surveillance shall cover all points of entry and exit and restricted-access areas;
 - b. video surveillance shall have accurate date and time stamps;
 - c. video surveillance recordings shall be maintained for at least 30 days.
3. a “panic” device with the ability to contact law enforcement;
4. a “duress” device capable of contacting law enforcement by means of a “silent alarm” and;
5. restricted access to sensitive areas (where medical marijuana products are cultivated, extracted, processed or stored).

B. Surveillance systems shall be monitored onsite between the hours of 8:00 and 17:00, but off-site monitoring may be provided during other hours.

C. Restricted-access areas shall be noted in the firm’s security plan and posted with suitable signage. These areas shall remain locked during all hours and access shall be controlled by means of employee badge scanners or similar devices.

D. Visitors shall be required to sign a log indicating their firm, purpose of visit, and date and time in and out of the facility. Visitors shall be allowed on the premises for official purposes only and shall be issued visitor badges for the duration of their visits. Visitors shall not remain in restricted-access areas unaccompanied by an authorized staff member unless no medical marijuana is present in the area at the time of the visit.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1046 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 48:2978 (December 2022).

§705. Louisiana Medical Marijuana Tracking System

A. Permittee facilities shall possess and maintain required hardware and software to connect to the Louisiana Medical Marijuana Tracking System.

B. Each plant and medical marijuana product originating at the facility shall be assigned a unique tag and identification number for tracking purposes.

C. Within 24 hours of the occurrence of one of the following events, it shall be documented in the LMMTS:

1. purchase or other acquisition of marijuana plants or seeds, including immature plants and seedlings;
2. sale, transfer or transport of medical marijuana to another contractor, approved laboratory, or medical marijuana pharmacy;
3. disposal of medical marijuana waste.

D. All records relating to transactions referenced in Subsection C., above, must be maintained for at least the current calendar year as well as the three preceding calendar years (if applicable).

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1046 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 48:2978 (December 2022).

§707. Inventory Control

A. Permittee facilities shall maintain an inventory of medical marijuana, including medical marijuana waste, on their premises and update these records no less frequently than once per week.

B. Medical marijuana waste shall be tracked in the LMMTS and stored in a restricted-access area until it is incinerated or removed to a composting facility or landfill.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1046 et seq.

HISTORICAL NOTE: Adopted by the Louisiana Department of Health, Office of Public Health, LR 48:2979 (December 2022).

§709. Toxic Chemical Use and Storage

A. Permittee facilities shall handle and store any chemicals for direct or indirect contact with medical marijuana in accordance with its written operations plan and the manufacturer's directions.

B. Restricted-use pesticides shall only be handled by individuals with the required certifications.

C. Permittees shall maintain records of material safety data sheets (MSDS) for all chemicals currently in use at the facility.

D. When applying pesticides to a crop, the facility shall maintain the following records:

1. date and time of application;
2. name of the individual applying the pesticide;
3. batch numbers of all chemicals used; and
4. the amount and name of the chemicals used, including the EPA registration number, if applicable.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1046 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 48:2979 (December 2022).

§711. Transportation of Medical Marijuana

A. Permittee facilities shall generate an inventory manifest prior to transporting any medical marijuana to a licensed marijuana pharmacy, laboratory, contractor or disposal site. The manifest shall include the following items:

1. name of the originating firm;
2. name of the receiving facility;
3. quantity expressed in terms of weight measure or unit of each type of medical marijuana comprising the shipment;
4. the date and approximate departure and arrival times of the shipment;
5. the identity of the agents involved in the transportation; and
6. the make, model, and license plate number of the transport vehicle.

B. Prior to initiating transport, the originating facility shall supply a copy of the inventory manifest referenced in Subsection A to the receiving facility.

C. Upon receipt, the receiving facility shall update the relevant records in the LMMTS, except that the shipment shall be refused if unaccompanied by a valid, unaltered LMMTS inventory-manifest document.

D. Shipments that are refused under the provisions of Subsection C shall be returned to the originating facility at its expense and the appropriate documentation shall be

generated and provided to the transporter and the receiving facility prior to returning the materials to the receiver. Updates to the material records in the LMMTS shall be made as needed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1046.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 48:2979 (December 2022).

§713. Sampling Requirements

A. Permittees shall sample every batch of product to ensure compliance with the standards of quality outlined below. Permittees shall not release any batch of product for sale until the representative sample has been verified as compliant. Batches may be tested prior to portioning or packaging.

B. Sample verification shall be by means of the issuance of a certificate of analysis from the approved laboratory conducting the sample analysis issued to the Louisiana Department of Health and the originating facility no later than 24 hours after testing is complete.

C. Any batch with a sample failing one or more of the tests (by exceeding allowable limits for contaminants or residues) shall be remediated or destroyed, at the option of the permittee. A batch shall only be remediated once, and if subsequent sampling fails to correct the exceedance, the affected batch shall be destroyed.

D. Sample medical marijuana waste held at an approved laboratory shall be destroyed within 60 days of completion of testing.

E. Minimally-processed plant material shall be subject to all testing requirements below except testing for solvent residues.

F. Medical marijuana samples shall be required to meet the following standards of quality:

1. microbiological contaminants:
 - a. mold/yeast <10,000 CFU/g;
 - b. pathogenic *Escherichia coli* and *Salmonella* spp. < 1CFU/g;
 - c. aflatoxins < 20 ppb;
 - d. ochratoxins < 20 ppb.
2. solvent residues:
 - a. butanes < 800 ppm;
 - b. heptanes < 500 ppm;
 - c. benzene <1 ppm;
 - d. toluene <1 ppm;
 - e. hexanes < 10 ppm;
 - f. xylenes < 1ppm;
 - g. ethanol < 5,000 ppm.
3. heavy-metal contaminants:
 - a. arsenic < 10 ppm;
 - b. cadmium < 4.1 ppm;
 - c. lead < 10 ppm;
 - d. mercury < 2 ppm.
4. pesticide residues: see Table 1 for maximum contaminant levels for finished products; any pesticide not listed shall not have detectable residues in finished products.
5. homogeneity: each aliquot shall have a variance of no more than plus or minus 15 percent of the total average result for THC content.
6. potency: the product shall have a variance of no more than plus or minus 15 percent of the THC content specified on the product label.

G. Table 1. Category I and II Pesticide Residue Maximum Contaminant Levels (MCL) in parts per million (ppm) by dosage form

Name	Ingested	Inhaled
Category I (includes aldicarb, carbofuran, chlorpyrifos, coumaphos, daminozide, dichlorvos, dimethoate, ethoprop(hos), etofenprox, fenoxycarb, imazalil, methocarb, methyl parathion, mevinphos, paclobutrazol, propoxur, spiromamine, and thiacloprid)	0	0
Category II		
Abamectin	0.3	0.1
Acephate	5	0.1
Acetamiprid	5	0.1
Acequinocyl	4	0.1
Azoxystrobin	40	0.1
Bifentate	5	0.1
Bifenthrin	0.5	3
Boscalid	10	0.1
Captan	5	0.7
Carbaryl	0.5	0.5
Chlorantraniliprole	40	10
Clofentezine	0.5	0.1
Cyfluthrin	1	2
Cypermethrin	1	1
Diazinon	0.2	0.1
Dimethomorph	20	2
Etoxazole	1.5	0.1
Fenhexamid	10	0.1
Fenpyroximate	2	0.1
Fonicamid	2	0.1
Fludioxonil	30	0.1
Hexythiazox	2	0.1
Imidacloprid	3	5
Kresoxim-methyl	1	0.1
Malathion	5	0.5
Metalaxyl	15	2
Methomyl	0.1	1
Myclobutanil	9	0.1
Naled	0.5	0.1
Oxamyl	0.2	0.5
Pentachloronitrobenzene	0.2	0.1
Permethrin	20	0.5
Phosmet	0.2	0.1
Piperonylbutoxide	8	3
Prallethrin	0.4	0.1
Propiconazole	20	0.1
Pyrethrins	1	0.5
Pyradiben	3	0.1
Spinetoram	3	0.1
Spinosad	3	0.1
Spiromesifen	12	0.1
Spirotetramat	13	0.1
Tebuconazole	2	0.1
Thiamethoxam	4.5	5
Trifloxystrobin	30	0.1

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1046 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 48:2979 (December 2022).

§715. Basic Facility Requirements

A. Permittee facilities shall provide finishes to floors, walls, and ceilings that are durable, light in color, and easily cleanable.

B. Facilities shall be sufficient in size to allow space for the following:

1. orderly placement of equipment and materials to minimize the possibility of contamination;
2. receipt, storage, and withholding from use components pending sampling (if required), identification and release by quality assurance personnel;
3. holding of rejected components or finished products pending disposal or rework;
4. storage of containers, packaging and labeling;
5. manufacturing and processing operations;
6. packaging and labeling operations; and
7. storage of finished products.

C. Facilities shall provide lighting, ventilation, and screening as needed to do the following:

1. prevent contamination of products with extraneous adulterants;
2. minimize dissemination of microorganisms from one area to another.

D. Facilities shall provide locker rooms for storage of employee personal equipment and belongings.

E. Facilities shall provide a plumbing system designed and installed in accordance with the Louisiana State Uniform Construction Code. Additionally, the system shall include the following:

1. no cross-connections between any potable and non-potable water supply;
2. where all equipment is not clean-in-place, at least one three-compartment sink with compartments adequate in size to submerge the largest utensil used in manufacturing operations;
3. an adequate number of hand lavatories supplied with hot-and-cold running water through a mixer-type faucet and hand soap and paper towels located convenient to manufacturing operation areas;
4. at least one utility sink for the disposal of mop wastes;
5. adequate means of sanitary disposal of wastewater.

F. Facilities shall provide adequate means of conveyance, storage, and disposal of refuse and non-medical marijuana waste products so as to minimize the development of odors, prevent waste products from becoming an attractant to and harborage for vermin, and prevent contamination of components, finished products, facility surfaces, grounds or water supplies.

G. Facilities shall provide toilet rooms in accordance with the Louisiana State Uniform Construction Code. Additionally toilet rooms shall be maintained in proper working order and in a sanitary condition. Toilet rooms shall have self-closing doors and shall not open directly into manufacturing areas. Toilet rooms shall include signs directing employees to wash hands with soap and water after using the toilet.

H. Facilities shall be located on premises that are maintained free of the following:

1. disused equipment, waste, debris or other materials that may serve as harborages for or attractants to vermin;
2. overgrowth of vegetation;
3. poorly-drained areas; and
4. excessively-dusty areas.

I. Equipment used in manufacturing operations shall not be additive, reactive, or absorptive to any product or its components and shall be installed in such a manner as to facilitate cleaning and not to contribute to potential cross-contamination of finished products.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1046 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 48:2980 (December 2022).

Chapter 9. Approved Laboratories for Testing Medical Marijuana

§901. General Requirements

A. Permittee facilities shall only utilize approved laboratories, as defined in this Section, for testing of medical marijuana.

B. Prior to testing medical marijuana to verify compliance, a laboratory shall apply for and receive a medical marijuana laboratory license from the Louisiana Department of Health.

C. A laboratory holding or seeking a medical marijuana laboratory license shall comply with all applicable requirements of R.S. Title 40, Chapter 4, Part X-E (R.S. 40:1046 et seq.).

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1046 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 48:2981 (December 2022).

§903. Application Process

A. Applications for initial licensure and renewal of licensure shall be made using documents supplied by the department for this purpose.

B. Applicants shall be required to supply the following documentation as part of the application process:

1. proof of accreditation through the National Institute on Drug Abuse (NIDA), the National Environmental Laboratory Accreditation Conference (NELAC), or the International Organization for Standardization (ISO); or proof of operation of a licensed or permitted medical marijuana testing laboratory in another state for the previous 12 months, and accreditation or pending accreditation through ISO;

2. an affidavit that representatives of the State Health Officer shall be granted access to all areas of the facility utilized for medical marijuana testing upon request; and

3. documentation indicating that the firm is currently able to access and utilize the Louisiana Medical Marijuana Tracking System (LMMTS).

C. Approved medical marijuana testing laboratory licenses shall be renewable annually every December 31. Applications for renewal shall be submitted to the Louisiana Department of Health no later than October 31; applicants shall provide copies of current accreditation-verification and permit documents in order for a new license to be issued to the facility.

D. Failure to renew in a timely fashion shall trigger a requirement to destroy all medical marijuana located at the

facility after midnight on December 31. Any product remaining on the premises at that time shall be subject to seizure under the provisions of La. R.S. 40:632 et seq.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1046 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 48:2981 (December 2022).

§905. Exemptions

A. The Agricultural Chemistry Laboratory of the Louisiana Department of Agriculture and Forestry is exempt from the requirements of §901 and §903.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1046 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 48:2981 (December 2022).

§907. Records

A. Laboratories shall maintain all records related to testing of medical marijuana for no less than three years. Such records shall be made available for review to representatives of the State Health Officer upon request.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1046 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 48:2981 (December 2022).

Dr. Joseph Kanter
State Health Officer
and
Dr. Courtney N. Phillips
Secretary

2212#045

RULE

Department of Health Office of Public Health

Registration of Foods, Drugs, Cosmetics
and Prophylactic Devices—Hemp Products
(LAC 49:I:Chapter 5)

Under the authority of R.S. 40:4 and 40:5, and in accordance with R.S. 49:950 et seq., the Administrative Procedure Act, the state health officer, acting through the Department of Health, Office of Public Health (LDH-OPH), has reenacted and amended certain sections of Chapter 5 (Registration of Foods, Drugs, Cosmetics and Prophylactic Devices) of Title 49 (*Public Health—Food, Drugs, and Cosmetics*) of the *Louisiana Administrative Code*. The LDH/OPH finds it necessary to make changes to the *Louisiana Administrative Code* as a consequence of changes made to hemp regulations under Act No. 498 of the 2022 Louisiana Legislature. The following changes authorize the LDH/OPH the ability to properly register these items, inspect firms that manufacture such items for human consumption, and conduct oversight of labeling, which could affect the health of Louisiana's citizens and visitors.

This Rule amends §501 and §§517-537 of Chapter 5. §§517, 519 are recodified with new requirement language and the original §§531-533 are relocated to §§535-537. New language is implemented in the current §§531-533 to enact new requirements from the 2022 legislation. Changes to §501 amend existing definitions and add new definitions. This Rule is hereby adopted on the day of promulgation.

Title 49
PUBLIC HEALTH—FOOD, DRUGS, AND
COSMETICS

Part I. Regulations

Chapter 5. Registration of Foods, Drugs, Cosmetics and Prophylactic Devices

§501. Definitions

[Formerly 49:2.2100]

A. Unless otherwise specifically provided herein, the following words and terms used in this Chapter of Title 49, and all other Chapters of Title 49 which are adopted or may be adopted, are defined for the purposes thereof as follows.

* * *

Adult-Use Consumable Hemp Product—any consumable hemp product that contains more than 0.5 milligrams of THC per package.

* * *

Package—container or wrapping in which any consumer commodity is enclosed for the purposes of display or delivery to retail purchasers.

* * *

Serving—total quantity of discrete units or of liquid in a package a processor recommends for consumption at one time.

* * *

AUTHORITY NOTE: Promulgated in accordance with R.S. 3:1482(J), R.S. 40:4(A)(13), R.S. 40:5(A)(8)(17) and R.S. 40:604.

HISTORICAL NOTE: Adopted by the Louisiana State Board of Health, September 1968, amended by the Department of Health, Office of Public Health, LR 46:358 (March 2020), amended LR 47:479 (April 2021), amended LR 48:1290 (May 2022), amended LR 48:2982 (December 2022).

§517. Registration of Consumable Hemp Products

A. - B. ...

C. In lieu of the annual examination and administration charge normally collected under R.S. 40:628(B), the applicant for a consumable hemp product registration must provide (both initially and on or before July 1 of each year) the department with an application form, a cashier's check or money order made payable to the department in the amount of \$50 per each separate and distinct product, specimen copies of labeling in paper or electronic format, laboratory accreditation verification documentation, a copy of the current grower or processor's license issued by the authority of competent jurisdiction for the firm responsible for hemp crop from which the products are derived, and a list of all products the applicant wishes to register with the department. If the packet meets these regulatory requirements, the department will issue to the applicant an FD-8a certificate of consumable hemp product registration and the application information will be entered into the consumable hemp products database.

D. No person is authorized to distribute any consumable hemp products in the state of Louisiana unless that person has first obtained a certificate of consumable hemp product registration from the department, except that if a firm submits product labeling and supporting documentation for review to the department and does not receive a response in writing within 15 business days of that initial submission, the product may be sold after the fifteenth business day by any permitted wholesaler or retailer until the submitting

party receives notice in writing from the department that the product in question is accepted or rejected for registration.

E. Any firm may apply with the department for the designation of its products as "Louisiana hemp products," provided that those products are produced from hemp grown in Louisiana and are processed at a Louisiana-based manufacturer. These items will be designated with a special mark on the department's list of registered products once they have been registered with the department.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:4(A)(13), R.S. 3:1483(L) and R.S. 40:604.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 46:359 (March 2020), amended LR 47:479 (April 2021), amended LR 48:1290 (May 2022), amended LR 48:2982 (December 2022).

§519. Consumable Hemp Products Labeling Requirements: Certificate of Analysis

A. Consumable hemp products must bear labeling that includes a scannable bar code, QR code, or a web address linked to a document or website containing the certificate of analysis for that product.

B. - C.4. ...

5. a cannabinoid profile listing all major phytocannabinoid constituents by percentage of dry weight;

6. serving size for the product, total THC (as defined in R.S. 3:1481) per serving, number of servings per package, and total THC per package (expressed in terms of milligrams per gram);

7. the amount of any detected residual solvent in the product in the product in parts per million, except that this analyte will not be required for floral hemp material; detections may not meet or exceed the following amounts:

- a. butanes—800 ppm;
- b. heptanes—500 ppm;
- c. benzene—1 ppm;
- d. toluene—1 ppm;
- e. hexanes—10 ppm;
- f. xylenes—1 ppm;
- g. ethanol—5,000 ppm;

8. the amount of any detected pesticide residues in the product in parts per million; any detection above the limit of quantitation for a category I pesticide (see Table 1 of this Section) is defined as an exceedance and a basis for rejection of the product by the department; category II pesticides have maximum contaminant levels as defined in Table 1;

9. the amount of any microbiological contaminants in the product in appropriate units; total yeast/mold may not meet or exceed 10,000 colony-forming units per gram and total pathogenic *Escherichia coli* bacteria or *Salmonella* spp. may not meet or exceed 1 colony-forming unit per gram;

10. the amount of any detected heavy metal traces in the product in parts per million; detections may not meet or exceed the following amounts:

- a. arsenic (As)—10 ppm;
- b. cadmium (Cd)—4.1 ppm;
- c. lead (Pb)—10 ppm;
- d. mercury (Hg)—2 ppm.

D. No consumable hemp product may contain more than 0.3 percent delta-9 THC or one percent total THC on a dry-weight basis. Except for floral hemp material, no

consumable hemp product may contain more than eight milligrams of total THC per serving. Products registered prior to the effective date of this rule exceeding the per-serving threshold may be sold until January 1, 2023.

E. Table 1: Category I and II Pesticides

Name	Maximum Contaminant Level (MCL) in ppm
Category I (includes aldicarb, carbofuran, chlorpyrifos, coumaphos, daminozide, dichlorvos, dimethoate, ethoprop(hos), etofenprox, fenoxycarb, imazalil, methocarb, methyl parathion, mevinphos, paclobutrazol, propoxur, spiromamine, and thiacloprid)	0
Category II	
Abamectin	0.3
Acephate	5
Acetamiprid	5
Acequinocyl	4
Azoxystrobin	40
Bifenazate	5
Bifenthrin	0.5
Boscalid	10
Captan	5
Carbaryl	0.5
Chlorantraniliprole	40
Clofentezine	0.5
Cyfluthrin	1
Cypermethrin	1
Diazinon	0.2
Dimethomorph	20
Etoxazole	1.5
Fenhexamid	10
Fenpyroximate	2
Fonicamid	2
Hexythiazox	2
Fludioxonil	30
Imidacloprid	3
Kresoxim-methyl	1
Malathion	5
Metalaxyl	15
Methomyl	0.1
Myclobutanil	9
Naled	0.5
Oxamyl	0.2
Pentachloronitrobenzene	0.2
Permethrin	20
Phosmet	0.2
Piperonylbutoxide	8
Prallethrin	0.4
Propiconazole	20
Pyrethrins	1
Pyradiben	3
Spinetoram	3
Spinosad	3
Spiromesifen	12
Spirotetramat	13
Tebuconazole	2
Thiamethoxam	4.5
Trifloxystrobin	30

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:4(A)(13), R.S. 3:1483(L) and R.S. 40:604.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 46:359 (March 2020), amended LR 47:480 (April 2021), amended LR 48:1290 (May 2022), amended LR 48:2982 (December 2022).

§531. Consumable Hemp Products Labeling Requirements: Adult-Use Products

A. Any product meeting the definition of an “adult-use consumable hemp product” must bear a label statement to this effect.

B. Products registered prior to the effective date of this rule that do not bear the statement required by Subsection A may be sold until July 1, 2023.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:4(A)(13), R.S. 3:1483 and R.S. 40:604.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 48:2983 (December 2022).

§533. Consumable Hemp Products Labeling Requirements: Serving Sizes and THC Content

A. Labeling must clearly indicate the amount of THC per serving in a product, the serving size, and the number of servings per package.

B. Serving sizes must be delineated by means of one of the following acceptable methods:

1. provision of a measuring device with the packaging;

2. markings on the label or package that indicate the amount of a serving;

3. use of discrete units (e.g., tablets, capsules, gummies, et cetera).

C. Products registered prior to the effective date of this rule that do not meet the requirements of this Section may be sold until July 1, 2023.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:4(A)(13), R.S. 3:1483 and R.S. 40:604.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 48:2983 (December 2022).

§535. Penalties for Violations of Requirements to Register Consumable Hemp Products [Formerly §531]

A. Any person who violates the provisions requiring registration of industrial-hemp-derived cannabidiol products is subject to the penalties provided for by R.S. 3:1484 and other sanctions as provided for by the State Food, Drug, and Cosmetic Law.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:4(A)(13), R.S. 3:1482(J) and R.S. 40:604.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 46:359 (March 2020), amended by the Department of Health, Office of Public Health, LR 47:480 (April 2021), LR 48:1291 (May 2022), LR 48:2983 (December 2022).

§537. Exemptions [Formerly §533]

A. Consumable hemp products that have been produced in accordance with R.S. 40: 1046 or that are Food and Drug Administration (FDA)-approved pharmaceuticals are not subject to the requirements of this regulation.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:4(A)(13), R.S. 3:1482(J) and R.S. 40:604.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, LR 46:359 (March 2020), amended LR 47:480 (April 2021), LR 48:1291 (May 2022), LR 48:2983 (December 2022).

Dr. Courtney N. Phillips
Secretary

2212#046

RULE

Department of Insurance Office of the Commissioner

Regulation 114—Claims Adjuster Pre-Licensing Education Program (LAC 37:XIII.Chapter 165)

In accordance with R.S. 49:950 et seq., the Administrative Procedure Act, and through the authority granted under R.S. 22:1 et seq., and specifically R.S. 22:11, the Department of Insurance has repealed Regulation 114—Claims Adjuster Pre-Licensing Education Program. The Department of Insurance is repealing Regulation 114 in light of Acts 2022, No. 273, §1 of the Regular Session of the Louisiana Legislature that amended and reenacted R.S. 22:821(B)(29), 1551(A) and (B), the heading of Subpart B of Part I of Chapter 5 of Title 22 of the Louisiana Revised Statutes of 1950, R.S. 22:1573(B), 1574(A)(4), 1581(B)(1), 1808.2(C)(6) and (E), and 1808.6(A) and (B) and repealed R.S. 22:513(B)(6), 1545(C), 1546(A)(4), 1571, 1808.2(C)(1) through (5), and 1808.3(A)(4), relative to pre-licensing requirements for insurance producers and bail enforcement agents.

The purpose of Regulation 114 was to provide for the submission of approved pre-licensing education programs to be listed on the web page of the Louisiana Department of Insurance and to establish the requirements and set forth the procedure for pre-licensing programs and providers of programs by the commissioner. This Rule is hereby adopted on the day of promulgation.

Title 37

INSURANCE

Part XIII. Regulations

Chapter 165 Regulation Number 114—Claims Adjuster Pre-Licensing Education Program

§16501. Purpose

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, 22:1668, 22:1678, the Administrative Procedure Act, R.S. 49:950 et seq., and Acts 2022, No. 273, §1.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 46:37 (January 2020), repealed LR 48:2984 (December 2022).

§16503. Applicability and Scope

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, 22:1668, 22:1678, the Administrative Procedure Act, R.S. 49:950 et seq., and Acts 2022, No. 273, §1.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 46:37 (January 2020), repealed LR 48:2984 (December 2022).

§16505. Authority

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, 22:1668, 22:1678, the Administrative Procedure Act, R.S. 49:950 et seq., and Acts 2022, No. 273, §1.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 46:37 (January 2020), repealed LR 48:2984 (December 2022).

§16507. Definitions

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, 22:1668, 22:1678, the Administrative Procedure Act, R.S. 49:950 et seq., and Acts 2022, No. 273, §1.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 46:37 (January 2020), repealed LR 48:2984 (December 2022).

§16509. Claims Adjuster Pre-Licensing Education Program Optional

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, 22:1668, 22:1678, the Administrative Procedure Act, R.S. 49:950 et seq., and Acts 2022, No. 273, §1.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 46:37 (January 2020), repealed LR 48:2984 (December 2022).

§16511. Posting of Information for Claims Adjuster Pre- Licensing Education

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, 22:1668, 22:1678, the Administrative Procedure Act, R.S. 49:950 et seq., and Acts 2022, No. 273, §1.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 46:37 (January 2020), repealed LR 48:2984 (December 2022).

§16513. Program Approval Requirements

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, 22:1668, 22:1678, the Administrative Procedure Act, R.S. 49:950 et seq., and Acts 2022, No. 273, §1.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 46:37 (January 2020), repealed LR 48:2984 (December 2022).

§16515. Program Expiration

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, 22:1668, 22:1678, the Administrative Procedure Act, R.S. 49:950 et seq., and Acts 2022, No. 273, §1.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 46:37 (January 2020), repealed LR 48:2984 (December 2022).

§16517. Provider Approval Requirements

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, 22:1668, 22:1678, the Administrative Procedure Act, R.S. 49:950 et seq., and Acts 2022, No. 273, §1.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 46:37 (January 2020), repealed LR 48:2984 (December 2022).

§16519. Provider Approval Expiration

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, 22:1668, 22:1678, the Administrative Procedure Act, R.S. 49:950 et seq., and Acts 2022, No. 273, §1.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 46:37 (January 2020), repealed LR 48:2984 (December 2022).

§16521. Instructor Qualifications

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, 22:1668, 22:1678, the Administrative Procedure Act, R.S. 49:950 et seq., and Acts 2022, No. 273, §1.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 46:37 (January 2020), repealed LR 48:2984 (December 2022).

§16523. Training Facilities Requirements

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, 22:1668, 22:1678, the Administrative Procedure Act, R.S. 49:950 et seq., and Acts 2022, No. 273, §1.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 46:37 (January 2020), repealed LR 48:2985 (December 2022).

§16525. Program Oversight

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, 22:1668, 22:1678, the Administrative Procedure Act, R.S. 49:950 et seq., and Acts 2022, No. 273, §1.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 46:37 (January 2020), repealed LR 48:2985 (December 2022).

§16527. Program Completion

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, 22:1668, 22:1678, the Administrative Procedure Act, R.S. 49:950 et seq., and Acts 2022, No. 273, §1.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 46:37 (January 2020), repealed LR 48:2985 (December 2022).

§16529. Fees

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, 22:1668, 22:1678, the Administrative Procedure Act, R.S. 49:950 et seq., and Acts 2022, No. 273, §1.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 46:37 (January 2020), repealed LR 48:2985 (December 2022).

§16531. Complaints

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, 22:1668, 22:1678, the Administrative Procedure Act, R.S. 49:950 et seq., and Acts 2022, No. 273, §1.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 46:37 (January 2020), repealed LR 48:2985 (December 2022).

§16533. Violations

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, 22:1668, 22:1678, the Administrative Procedure Act, R.S. 49:950 et seq., and Acts 2022, No. 273, §1.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 46:37 (January 2020), repealed LR 48:2985 (December 2022).

§16535. Effective Date

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, 22:1668, 22:1678, the Administrative Procedure Act, R.S. 49:950 et seq., and Acts 2022, No. 273, §1.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 46:37 (January 2020), repealed LR 48:2985 (December 2022).

§16537. Severability

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, 22:1668, 22:1678, the Administrative Procedure Act, R.S. 49:950 et seq., and Acts 2022, No. 273, §1.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 46:37 (January 2020), repealed LR 48:2985 (December 2022).

James J. Donelon
Commissioner

RULE

**Department of Insurance
Office of the Commissioner**

**Regulation 123—Producer Responsibility
for Bail Bond Collateral
(LAC 37:XIII.Chapter 187)**

The Department of Insurance, pursuant to the authority provided in R.S. 22:1 et seq., and in accordance with the Administrative Procedure Act, R.S. 49:950 et seq., has promulgated Regulation 123—Producer Responsibility for Bail Bond Collateral. Regulation 123 establishes requirements and restrictions imposed upon bail bond producers and sureties who receive collateral in connection with a bail bond transaction. The regulation also sets forth standards for collecting, holding, and returning collateral upon the final termination of liability on the bond. Lastly, Regulation 123 requires that a written collateral agreement accompany all bail bond transactions involving collateral security. This Rule is hereby adopted on the day of promulgation.

Title 37

INSURANCE

Part XIII. Regulations

**Chapter 187. Regulation 123—Producer Responsibility
for Bail Bond Collateral**

§18701. Authority

A. This regulation is promulgated on behalf of the Department of Insurance by the Commissioner of Insurance pursuant to the authority granted under Title 22.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:2, 22:11, 22:1542, 22:1547, 22:1554, 22:1562, and the Administrative Procedure Act, R.S. 49:950, et seq.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 48:2985 (December 2022).

§18703. Purpose

A. The purpose of this regulation is to establish and identify the responsibilities of an insurance producer licensed for the line of bail bonds with respect to collateral accepted and held by the producer pursuant to a written bail bond collateral agreement.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:2, 22:11, 22:1542, 22:1547, 22:1554, 22:1562, and the Administrative Procedure Act, R.S. 49:950, et seq.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 48:2985 (December 2022).

§18705. Scope and Applicability

A. Regulation 123 sets forth requirements related to bail bond collateral agreements and identifies the responsibilities of a bail bond producer with respect to any collateral received as part of a bail bond transaction.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:2, 22:11, 22:1542, 22:1547, 22:1554, 22:1562, and the Administrative Procedure Act, R.S. 49:950, et seq.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 48:2985 (December 2022).

§18707. Severability

A. The provisions of this Subpart are severable. If any provision or item of this Subpart, or application thereof, is held invalid, such invalidity shall not affect other provisions, items, or applications of this Subpart which are to be given effect without the invalid provision, item, or application of the Subpart.

AUTHORITY NOTE: Promulgated in accordance with R.S. R.S. 22:2, 22:11, 22:1542, 22:1547, 22:1554, 22:1562, and the Administrative Procedure Act, R.S. 49:950, et seq.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 48:2986 (December 2022).

§18709. Definitions

A. These terms when used in this Chapter shall have the following meanings.

Bail—the security given by a person to assure a defendant's appearance before the proper criminal court whenever required.

Bail Bond Producer—any person, corporation, or partnership which holds an insurance license and has a contract and an appointment from an insurer licensed and authorized to provide surety in Louisiana.

Bail Bond Transaction—a transaction between a bail bond producer or agency and defendant or person on behalf of defendant to secure collateral, premiums, and fees for securing the release of a defendant and guaranteeing a set sum of money to the court if the defendant fails to appear in criminal court when required. Furthermore, a bail bond transaction includes the solicitation and inducement, preliminary negotiation, and effectuation of a contract of surety insurance and matters related thereto, all in connection with the defendant's release.

Collateral—anything of value, including money, personal property, or real property, which is accepted by a bail bond producer as security against potential losses arising from a contract of surety and is utilized as part of a bail bond transaction.

Commissioner—the Louisiana Commissioner of Insurance.

Fiduciary—a person who holds a thing in trust for another, such as a trustee; a person holding the character of a trustee, or a character analogous to that of a trustee, with respect to the trust and confidence involved in it and the scrupulous good faith and candor which it requires; a person having the duty, created by his undertaking, to act primarily for another's benefit in matters connected with such undertaking.

Forfeiture—the issuance of a judgment of bond forfeiture resulting from a defendant's failure to appear in court when required or to otherwise comply with any court ordered conditions of release as contemplated in the Code of Criminal Procedure.

Insurance Producer—a person required to be licensed under the laws of this state to sell, solicit, or negotiate insurance, and includes all persons or business entities otherwise referred to in Title 22 of the Louisiana Insurance Code as insurance agent or agent, or insurance broker or broker, or insurance solicitor or solicitor, or surplus lines broker.

Surety—an insurer licensed and authorized to provide surety in Louisiana.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:2, 22:11, 22:1542, 22:1547, 22:1554, 22:1562, and the Administrative Procedure Act, R.S. 49:950, et seq.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 48:2986 (December 2022).

§18711. Necessity of a Written Agreement for Collateral

A. All agreements concerning collateral must be in writing.

B. Written collateral agreements shall not contain any provision that is contrary to the requirements of this regulation or to those set forth in any law in Louisiana regarding bail bonds.

C. Written collateral agreements must include the full name of the person pledging the collateral, the full name of the defendant to be released, an accurate and sufficiently detailed description of the collateral, the bond amount, the power of attorney number, and such other information as necessary to specify the bail bond related to the collateral agreement.

D. A copy of the written collateral agreement and a written receipt for the collateral shall be provided to the person offering the collateral at the time of the transaction.

E. Written collateral agreements must also contain assurances that the collateral will not be used by the bail bond producer or surety for personal benefit or gain and that the collateral will be returned in the same condition as pledged.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:2, 22:11, 22:1542, 22:1547, 22:1554, 22:1562, and the Administrative Procedure Act, R.S. 49:950, et seq.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 48:2986 (December 2022).

§18713. Requirements for Collateral

A. A bail bond producer or surety that accepts collateral as security for a bail bond shall comply with all of the following requirements:

1. For a bail bond producer or surety to accept collateral, the person pledging the collateral must have voluntarily pledged it at the time of the bail bond transaction and execution of the written collateral agreement. The intent to pledge collateral to secure the defendant's release must be clearly stated and verified by the signature of the person pledging the collateral.

2. The collateral shall be received and held in the surety's name by the bail bond producer or surety in a fiduciary capacity.

3. The collateral must be reasonable in relation to the face amount of the bond, and the collateral's value must be determined before the collateral agreement is executed.

4. The bail bond producer or surety shall keep and maintain collateral separate and apart from any other funds or assets.

5. It shall be a prohibited act pursuant to R.S. 22:1562 for any bail bond producer or surety to use any collateral for personal benefit or gain, or to fail to return the collateral to the person pledging it in the same condition as received by the bail bond producer or surety.

6. The bail bond producer or surety shall provide the person pledging the collateral a written receipt for the collateral received. The written receipt must include a detailed and specific description of the collateral, the full

name of the person pledging the collateral, the full name of the defendant, the date of the bond, the approximate value of any non-cash collateral, and the specific amount of cash or other collateral.

7. If the parties to the collateral agreement subsequently agree to substitute other things of value as collateral, the substitution must be reflected in a new written collateral agreement, and the bail bond producer or surety must issue a new written receipt to the person pledging the substituted collateral.

8. The bail bond producer or surety shall return the collateral to the person who pledged the collateral not more than 30 days after the bail obligation is discharged in accordance with article 331 of the Code of Criminal Procedure.

B. If a forfeiture of the bail bond occurs, the bail bond producer or surety shall provide the person who pledged the collateral 10 days written notice from the date that a judgment of bond forfeiture is signed of the bail bond producer or surety's intent to take possession of the collateral deposit to satisfy the forfeiture. The notice shall be sent by certified mail, return receipt requested, to the last known address of the person who pledged the collateral. If the collateral received by a bail bond producer is in excess of the bail forfeited, the bail bond producer or surety shall return the excess to the person who pledged the collateral within 30 days from the date a judgment of bond forfeiture is satisfied, less any verifiable and appropriate administrative expenses specifically provided for in Section 18715 below.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:2, 22:11, 22:1542, 22:1547, 22:1554, 22:1562, C.Cr.P. art 311, et seq. and the Administrative Procedure Act, R.S. 49:950, et seq.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 48:2986 (December 2022).

§18715. Deductions from Collateral

A. Only the premium amounts, fees, and expenses authorized pursuant to R.S. 22:1443, or as otherwise permitted in accordance with applicable state law, shall be recoverable by any bail bond producer or surety. No fee or other charge of any nature shall be deducted from the collateral due or charged in association with the storage or keeping of the collateral by the bail bond producer or surety.

B. A documented and itemized list of any such fees or expenses shall be given to the person who pledged the collateral. A copy of such documentation and itemization shall also be available to the Commissioner upon his request.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:2, 22:11, 22:1542, 22:1547, 22:1554, 22:1562, and the Administrative Procedure Act, R.S. 49:950, et seq.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 48:2987 (December 2022).

§18717. Violations

A. Failure to comply with the provisions of this regulation may be determined by the Commissioner to be a violation of R.S. 22:1562, and the violator shall be subject to penalties pursuant to R.S. 22:1554.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:2, 22:11, 22:1542, 22:1547, 22:1554, 22:1562, and the Administrative Procedure Act, R.S. 49:950, et seq.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 48:2987 (December 2022).

§18719. Effective Date

A. This regulation shall become effective upon final publication in the Louisiana Register.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:2, 22:11, 22:1542, 22:1547, 22:1554, 22:1562, and the Administrative Procedure Act, R.S. 49:950, et seq.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 48:2987 (December 2022).

James J. Donelon
Commissioner

2212#027

RULE

Department of Revenue Policy Services Division

Corporation Income Tax (LAC 61:I.1122, 1124, and 1125)

Under the authority of R.S. 47:1511 and 287.86 and in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq., the Department of Revenue, Policy Services Division, has amended LAC 61:I.1122 and to repeal 1124 and 1125.

The primary purpose of the regulation is to implement Act 103 of the 2015 Regular Session of the Louisiana Legislature, which repeals the carryback provisions as it relates to net operating losses for corporations. This Rule is hereby adopted on the day of promulgation.

Title 61

REVENUE AND TAXATION

Part I. Taxes Collected and Administered by the Secretary of the Department of Revenue

Chapter 11. Corporation Income Tax

§1122. Taxes Not Deductible

- A. - B. ...
- C. - D. Repealed.
- E. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:287.83, R.S. 47:1511.

HISTORICAL NOTE: Promulgated by the Department of Revenue and Taxation, Income Tax Section, LR 14:96 (February 1988), repromulgated by the Department of Revenue, Policy Services Division, LR 30:470 (March 2004), amended by the Department of Revenue, Policy Services Division, LR 33:295 (February 2007), amended by the Department of Revenue, Policy Services Division, LR 48:2987 (December 2022).

§1124. Net Operating Loss Deduction

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:287.86, R.S. 47:287.785 and R.S. 47:1511.

HISTORICAL NOTE: Promulgated by the Department of Revenue, Policy Services Division, LR 30:2494 (November 2004), repealed LR 48:2987 (December 2022).

§1125. Application of Net Operating Losses Carryover to Otherwise Closed Years

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:287.86 and 1511.

HISTORICAL NOTE: Promulgated by the Department of Revenue, Policy Services Division, LR 36:2290 (October 2010), repealed LR 48:2988 (December 2022).

Kevin J. Richard, CPA
Secretary

2212#040

RULE

**Department of Revenue
Policy Services Division**

**Donation to Qualified Foster Care Charitable
Organization Credit and Certain Adoptions Deductions
(LAC 61:I.1925, 1927, and 1929)**

Under the authority of R.S. 47:293(9)(a)(xxiii) and (xxiv), 297.20, 297.21, 1511 and 6042 and in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq., the Department of Revenue, Policy Services Division has adopted LAC 61:I.1925 relative to the Donation to Qualifying Foster Care Charitable Organization Income Tax Credit and LAC 61:I.1927 and 1929 relative to the individual income tax deductions for individuals who adopt a child under certain circumstances.

Revised Statute 47:6042 authorizes a nonrefundable tax credit for donations made to Qualifying Foster Care Charitable Organizations that provide services to qualified individuals. In addition, Revised Statutes 47:297.20 and 297.21 authorize an individual income tax deduction of \$5,000 for taxpayers who adopt a youth from foster care, or an infant through private adoption, or an attorney. The primary purpose of this regulation is to implement Act 378 of the 2021 Regular Session of the Louisiana Legislature. This Rule is hereby adopted on the day of promulgation.

Title 61

REVENUE AND TAXATION

**Part I. Taxes Collected and Administered by the
Secretary of Revenue**

**Chapter 19. Miscellaneous Tax Exemptions, Credits
and Deductions**

**§1925. Donations to Qualifying Foster Care Charitable
Organization Credit**

A. General Description.

1. The Donation to Qualified Foster Care Charitable Organization credit provides a nonrefundable income tax credit for donations made on or after January 1, 2022 to the QFCCO. To qualify for the credit, the donation must be used by the QFCCO to provide services to qualified individuals.

2. QFCCOs are certified by the Department to receive contributions eligible for the tax credit. This certification only pertains to the Donation to Qualifying Foster Care Charitable Organization Credit. This program does not apply

to general licensing, operations, or the deductibility of donations to charitable organizations.

3. The credit shall be earned in the year in which the donation was made and shall be equal to the lesser of \$50,000 or the actual amount of donations used by the QFCCO to fund qualified services for qualified individuals.

4. The credit shall be allowed against the income tax for the taxable period in which the credit was earned. If the tax credit allowed pursuant to R.S. 47:6042 exceeds the amount of such taxes due, any unused credit may be carried forward as a credit against subsequent tax liability for a period not to exceed five years.

B. Definitions

Affiliated—any entity possessing either a:

- a. significant common purpose and substantial common membership; or
- b. direct or indirect substantial common direction or control.

Department—the Department of Revenue.

QFCCO—qualifying foster care charitable organization.

Qualified Individual—a child in a foster care placement program established by the Department of Children and Family Services.

Qualified Services—cash assistance, medical care, child care, food, clothing, shelter, job placement, and job-training services or any other assistance reasonably necessary to meet immediate basic needs that are provided to a qualified individual and used in Louisiana.

Qualifying Foster Care Charitable Organization—an organization that meets all of the following criteria:

- a. is exempt from federal income tax pursuant to section 501(c)(3) of the Internal Revenue Code;
- b. provides services to at least 25 qualified individuals each operating year.
- c. spends at least 75 percent of its total budget on providing services to qualified individuals or spends at least 75 percent of its funds budgeted for Louisiana on providing services to qualified individuals and the organization certifies to the department that 100 percent of the donations it receives from Louisiana residents will be spent on providing services to qualified individuals.
- d. is approved by the department after applying as provided in Subsection G of this Section.

Related—the donor's spouse, the children of the donor, the spouses of the donor's children, the donor's brothers or sisters and their spouses, the donor's parents, and the parents of the donor's spouse.

Secretary—secretary of the Department of Revenue, or their designee.

Taxpayer—a person who is required to file a Louisiana income tax return.

C. Qualified Services

1. The qualified service must be provided by the QFCCO directly to the qualified individual. Qualified services include the following:

a. Cash Assistance

i. Cash assistance, including cash in the form of gift cards, must be provided directly for the qualified individual for the purpose of assisting the qualified individual in meeting ongoing basic needs.

ii. Cash payments or scholarships to schools, camps, activities, or team sports do not qualify as cash assistance.

b. Medical Care

i. Medical care must be provided by the QFCCO directly, or indirectly, by providing access to medical care by means of paying for the medical care, providing round trip transportation to the medical care provider, or connecting the qualified individual to the medical care.

ii. Medical care must be provided by medical professionals including, but not limited to, doctors, nurses, physician's assistants, optometrists, ophthalmologists, dentists, chiropractors, phycologist, psychiatrists, and licensed therapists.

c. Child Care

i. Child care means the compensated service that is provided to a child who is unaccompanied by a guardian during a portion of a twenty-four hour period.

ii. Child care must be regular and predictable to be considered a basic need service.

d. Food

i. Food includes food products for home meal preparation as well as the provision of prepared meal(s).

e. Clothing

i. Qualified clothing includes, but is not limited to infant attire, shirts, pants, skirts, school uniforms, socks, undergarments, shoes, footwear, coats, and interview attire.

ii. Clothing does not qualify as a basic need if it consists of a single item of clothing per qualified individual for attendance or participation in an event.

iii. Sports team uniforms do not qualify as clothing.

f. Shelter

i. Shelter is the provision of permanent or temporary housing for a qualified individual.

ii. Shelter includes furnishings of a home, rental or mortgage assistance, payment for home maintenance services or supplies and utility expenses.

g. Job Training

i. Job training must be for a specific job or industry, not simply general education to obtain a GED or prepare for college.

ii. Round trip transportation to the job training is considered a basic need service.

D. Claiming the Tax Credit

1. Taxpayers claiming the Donations to Qualifying Foster Care Organization credit must attach Form R-68009, *Receipt for Donation to Qualifying Foster Care Charitable Organization Credit* to their return. The receipt shall consist of a QFCCO portion and a donor portion and must be issued by the QFCCO to the donor.

2. The credit must be claimed for the taxable year in which the donation was made.

E. Tax Credit Cap

1. For each calendar year, the department shall not approve credits in excess of \$500,000. Taxpayers shall be allowed to claim the credit on a first-come, first serve basis as determined by the received date of the taxpayer's income tax return with all required documents. A taxpayer claiming the donations to qualifying foster care organization credit must attach Form R-68009 to their return and provide any additional information requested by the department. A

shareholder of an S corporation or other pass-through entity must also attach a copy of the Schedule K-1 to substantiate the credit.

2. All returns received on the same business day shall be treated as received at the same time, and if the aggregate amount of requests received on the same business day exceeds the total amount of the available credits:

a. tax credits shall be approved on a pro rata basis; and

b. the excess shall be treated as having been applied for on the first day of the subsequent year.

F. Other Tax Benefits Disallowed

1. A taxpayer shall not receive any other state tax credit, exemption, exclusion, deduction, rebate, or any other state tax benefit for a donation for which the taxpayer has received a tax credit pursuant to R.S. 47:6042.

2. The credit may be used in addition to any federal tax credits earned for the same donation.

G. Application for Certification as a Qualifying Foster Care Charitable Organization.

1. An organization that seeks to become a QFCCO may apply for certification at any time during the year and must submit the following to the Department:

a. Completed Form R-68010, Application for Certification as a Qualifying Foster Care Charitable Organization.

b. A copy of the Internal Revenue Service ruling establishing the organization is exempt from federal income tax pursuant to Section 501(c)(3) of the Internal Revenue Code.

c. A copy of the organization's operating budget for the prior operating year and a schedule detailing the amount of the budget spent on providing qualified services to qualified individuals.

d. A copy of Federal Form 990 and 990-T and all attachments filed by the organization for the last tax year filed.

e. A copy of the financial statements and detailed schedule of expenses for the QFCCO from the prior year.

f. A schedule detailing how the organization calculated the percentage of its budget spent on providing services to qualified individuals.

g. A statement that the organization intends to continue spending at least seventy-five percent of its total budget on providing services to qualified individuals or intends to continue spending at least seventy-five percent of its funds budgeted for Louisiana on providing services to qualified individuals and that one hundred percent of the donations it receives from Louisiana residents will be spent on providing services to qualified individuals.

2. Within two months of receipt of an *Application for Certification as a Qualifying Foster Care Charitable Organization*, the department shall notify the applicant of their status by way of approval notated on the application to the mailing address designated on the application. Certification is valid beginning January 1 of the year that an organization is approved.

3. If the application is denied, the department will inform the applicant of its grounds for denial and allow 15 business days from date on the status letter for the applicant to correct any defects. Ground for denials include, but are not limited to:

- a. failure of the applicant to submit any information required by the application;
- b. failure of the applicant to submit any additional information requested by the Department.

H. QFCCO Reporting

1. A QFCCO must file a report, prepared by an independent certified public accountant not related to a donor or affiliated with the QFCCO, with the department no later than January 31 of each year to the below address:

Louisiana Department of Revenue
P.O. Box 44098
Baton Rouge, LA 70804

2. This annual report shall contain the following information:

- a. a certification that the QFCCO continues to meet the requirements set forth by R.S. 47:6042;
- b. a certification that the QFCCO spent 100 percent of the donations received from Louisiana residents on providing qualified services to qualified individuals;
- c. a listing of all donations made that includes:
 - i. the name, social security number, or Louisiana Revenue Account Number, and federal taxpayer identification numbers of each taxpayer who donated to the QFCCO during the prior calendar year;
 - ii. the amount of each donation received during the prior calendar year;
 - iii. the amount of each donation utilized during the prior calendar year to provide qualified services to qualified individuals and the services provided;
- d. notification to the department of changes that may affect certification eligibility.

I. Forms

a. Form R-68009, Receipt for Donation to Qualifying Foster Care Charitable Organization Credit, shall require information including, but not limited to: the taxpayer's name, mailing address, Louisiana revenue account number or last four digits of the taxpayer's Social Security number, the date the donation was made, the name of the QFCCO and amount of the donation used by the QFCCO to provide services to qualified individuals.

b. Form R-68010, Application for Certification as a Qualifying Foster Care Charitable Organization, shall require information including, but not limited to: the QFCCO's name, address, Louisiana revenue account number (if applicable), federal employer identification number, contact individual's e-mail address and telephone number, and certification that the QFCCO meets certain criteria under R.S. 47:6042(F)(4).

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:1511 and 6042.

HISTORICAL NOTE: Promulgated by the Department of Revenue, Policy Services Division, LR 48:2988 (December 2022).

§1927. Adoption from Foster Care Deduction

A. General

1. Revised Statute 47:297.20 authorizes a deduction equal to \$5,000, per child, from Louisiana tax table income for a resident taxpayer who legally adopts a child from foster care, as defined in Louisiana Children's Code Article 603, or a youth receiving extended foster care services pursuant to the Extended Foster Care Program Act.

B. Definitions

Child—a person under the age of 18 years who has not been judicially emancipated or emancipated by marriage as provided by law as defined in Louisiana Children's Code Article 603 as amended.

Foster Care—placement in a foster family home, a relative's home, a residential child caring facility, or other living arrangement approved and supervised by the state for provision of substitute care for a child in the custody of Department of Children and Family Services as defined in Louisiana Children's Code Article 603 as amended.

Youth—an individual who was adjudicated as a child in need of care, was in foster care in the department's custody on the day before his eighteenth birthday, and is at least 18 years of age but less than 21 years of age as defined by R.S. 46:288.2 as amended.

C. Claiming the Deduction

1. The taxpayer claiming the adoption from foster care deduction must be listed as an adoptive parent on the adoption order or decree. Taxpayers may claim the adoption deduction according to their filing status as follows:

a. If filing Single, Married Filing Separately, Qualifying Widow(er) or Head of Household then only one taxpayer may claim the adoption credit on their return if two taxpayers are listed as the adoptive parent. The deduction may not be divided between the adoptive parents and can only be claimed by the taxpayer that is claiming the child as a dependent on their federal individual income tax return.

b. If filing Married Filing Jointly then the deduction may only be claimed on the return of the individual who is listed as an adoptive parent on the adoption order or decree. The deduction may not be divided between the adoptive parents and can only be claimed by the taxpayer that is claiming the child as a dependent on their federal individual income tax return.

2. The taxpayer claiming the adoption from foster care deduction must attach their deduction eligibility certification letter from the Department of Children and Family Services to the taxpayer's individual income tax return for the taxable year that the adoption is finalized.

D. Limitations

1. The adoption tax deduction shall be in lieu of the dependency deduction authorized in R.S. 47:294.

2. The amount of the deduction authorized by R.S. 47:297.20 shall not exceed the total tax table income of the taxpayer claiming the deduction.

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:293(9)(a)(xxiii), 297.20, and 1511.

HISTORICAL NOTE: Promulgated by the Department of Revenue, Policy Services Division, LR 48:2990 (December 2022).

§1929. Private Adoption of Certain Infants Deduction

A. General.

1. Revised Statute 47:297.21 authorizes a deduction equal to \$5,000, per infant, from tax table income for the resident(s) who legally adopt an infant who is unrelated to the taxpayer(s) and who is less than one year of age through a private agency as defined in Louisiana Children's Code Article 1169(1), or through an attorney. The infant shall be considered less than one year of age for purposes of this

deduction if the infant was less than one year of age at the time of the adoption placement.

a. A taxpayer is considered “unrelated” to the infant if they are not the infant’s parent, stepparent, grandparent, brother, sister, uncle, or aunt, whether of the whole or half blood or by adoption.

B. Claiming the Deduction

1. The taxpayer claiming the private adoption of certain infants’ deduction must be listed as an adoptive parent on the adoption order or decree. Taxpayers may claim the adoption deduction according to their filing status as follows:

a. If filing single, married filing separately, qualifying widow(er), or head of household then only one taxpayer may claim the adoption credit on their return if two taxpayers are listed as the adoptive parent. The deduction may not be divided between the adoptive parents and can only be claimed by the taxpayer that is claiming the child as a dependent on their federal individual income tax return.

b. If filing married filing jointly then the deduction may only be claimed on the return of the individual who is listed as an adoptive parent on the adoption order or decree. The deduction may not be divided between the adoptive parents and can only be claimed by the taxpayer that is claiming the child as a dependent on their federal individual income tax return.

2. The taxpayer claiming the private adoption of certain infants’ deduction must attach the following to the taxpayer’s individual income tax return for the taxable year that the adoption is finalized:

- a. a copy of the adoption order or decree; and
- b. a letter from the attorney who facilitated the adoption or private agency stating when the infant was placed with the adoptive parents.

C. Limitations

1. The adoption tax deduction shall be in lieu of the dependency deduction authorized in R.S. 47:294.

2. The amount of the deduction authorized by R.S. 47:297.20 shall not exceed the total tax table income of the taxpayer claiming the deduction.

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:293(9)(a)(xxiv), 297.21 and 1511.

HISTORICAL NOTE: Promulgated by the Department of Revenue, Policy Services Division, LR 48:2990 (December 2022).

Kevin J. Richard, CPA
Secretary

2212#042

RULE

**Department of Revenue
Policy Services Division**

**Election of Pass-Through Entities
(LAC: 61:I.1001)**

Under the authority of R.S. 47:1511 and 287.732.2 and in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq., the Department of Revenue, Policy Services Division, has amended LAC 61:I.1001.

The primary purpose of the regulation is to implement Act 396 of the 2021 regular session of the Louisiana Legislature as it concerns the repeal of the deduction for federal taxes paid and the amendment of rates for taxpayers making a pass-through entity election pursuant to R.S. 47:287.732.2. This Rule is hereby adopted on the day of promulgation.

Title 61

REVENUE AND TAXATION

**Part I. Taxes Collected and Administered by the
Secretary of the Department of Revenue**

Chapter 10. Income: Pass-Through Entities

§1001. Election of Pass-Through Entities

A. ...

1. For taxable periods beginning on or before December 31, 2021, the income of entities that make the election under R.S. 47:287.732.2 shall be taxed at the following rates:

a. 2 percent upon the first \$25,000 of Louisiana taxable income;

b. 4 percent upon the amount of Louisiana taxable income above \$25,000 but not in excess of \$100,000; and

c. 6 percent upon the amount of Louisiana taxable income above \$100,000.

2. For taxable periods beginning on or after January 1, 2022, the income of entities that make the election under LA R.S. 47:287.732.2 shall be taxed at the following rates:

a. 1.85 percent upon the first \$25,000 of Louisiana taxable income;

b. 3.5 percent upon the amount of Louisiana taxable income above \$25,000 but not in excess of \$100,000; and

c. 4.25 percent upon the amount of Louisiana taxable income above \$100,000.

B. - C.3. ...

a. A *pro forma* Federal Form 1120 completed as if the entity had filed as a C corporation for federal income tax purposes;

C.3.b. - D.3. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 47:287.732.2 and 1511.

HISTORICAL NOTE: Promulgated by the Department of Revenue, Policy Services Division, LR 46:43 (January 2020), amended by the Department of Revenue, Policy Services Division, LR 48:2991 (December 2022).

Kevin J. Richard, CPA
Secretary

2212#041

RULE

**Department of Wildlife and Fisheries
Wildlife and Fisheries Commission**

**Alligator Hide Tag Fee Regulations
(LAC 76:V.701)**

The Wildlife and Fisheries Commission has amended the alligator regulations governing alligator hide tag fees. The action suspends the alligator hide tag fee by \$1, thereby reducing the tag fee from \$4 per tag to \$3 per tag for license year 2023. The purpose of this change is to provide temporary relief to the alligator industry in a time of

suppressed market conditions. This temporary reduction will automatically end December 31, 2023. Further, this Rule removes the requirement for payment of severance taxes and adjusts the following licenses to be consistent with fees established by Act No. 356 of the 2021 Regular Session of the Louisiana Legislature: resident fur buyer's license, nonresident fur buyer's license, resident fur dealer's license, nonresident fur dealer's license, nongame quadruped exhibitor's license, nongame quadruped breeder's license, alligator parts dealer license, and alligator parts retailer license. This Rule is hereby adopted on the day of promulgation.

Title 76

WILDLIFE AND FISHERIES

Part V. Wild Quadrupeds and Wild Birds

Chapter 7. Alligators

§701. Alligator Regulations

A. - A.3.k. ...

1. An alligator hunter or alligator farmer may give alligator parts to anyone for personal use. Any part of an alligator shall have affixed thereto the name, address, date, hide tag number, and the license number of the person donating the alligator part(s). This information shall be legibly written in pen or pencil on any piece of paper or cardboard or any material which is attached to the part(s) or to the container enclosing the part or parts. This information must remain affixed until the part(s) has been stored at the domicile of the possessor. Violation of this Subparagraph is a class two violation as described in R.S. title 56.

m.i. R.S. 56:280, passed in the Regular Session of the 1992 Louisiana Legislature established a state policy which protects white or albino alligators and except under department permit prohibits the taking of white or albino alligators from the wild.

ii. Conditions under which any alligator that is white or albino may be taken from the wild and under official department permit include:

(a). landowners or licensed alligator farmers or ranching operators may capture live and unharmed a white or albino alligator for its own protection. All such instances of possession shall be reported immediately to the department;

(b). any white or albino alligator hatchling produced from wild collected eggs authorized by a department alligator egg collection permit will remain in the possession of such licensed operators. Any white or albino hatchling must be reported immediately upon hatching to the department on a standard activity report form;

(c). any person who intentionally takes from the wild any alligator that is white or albino by hook and line shall immediately report its presence and location to the department. Department personnel of the Coastal and Nongame Resources Division will on a case by case basis determine the disposition of any such white or albino alligator which is unintentionally hooked.

iii. Any white or albino hatchling produced from a licensed breeding pen will remain in the possession of such licensed operators but must be reported immediately upon hatching to the department on a standard activity report.

iv. It shall be a violation if any person intentionally takes from the wild any alligator that is white or albino by any means.

v. Violation of R.S. 56:280 shall subject the violator to a fine of not less than \$10,000 and imprisonment for not less than 6 months or more than 12 months, or both.

n. Alligator meat and parts may be shipped in containers that are sealed and the parts identified to the CITES tag of origin. A fully executed alligator hunter, farmer, or parts dealer alligator parts sale or transaction form and shipping manifest shall meet the U.S. Fish and Wildlife Service parts identification requirements, provided such form(s) is/are prominently attached to the outside of each shipping container. Alligator meat/parts shipped to another state must meet applicable state/federal requirements of the receiving state. Alligator meat/parts exported from the United States must meet the requirements of the U.S. Fish and Wildlife Service as well as those of the receiving country. Alligator skulls being exported shall carry a "tag" containing the CITES tag number and the hunter's name and license number. The skull must also be physically marked with the number of the original CITES tag used for the hide of the individual alligator. Violation of this Subparagraph is a class three violation as described in R.S. title 56.

o. For the purpose of bona fide educational or promotional functions, including but not limited to school activities, civic groups, fairs and festivals within the state of Louisiana, an alligator farmer/rancher or his designee may transport his own live farm alligators or alligator eggs to such function without the need for a special permit from the department while in possession of a valid nongame quadruped breeder's or exhibitor's license or copy thereof. Such farmer/rancher shall not barter, trade, exchange or attempt to barter, trade or exchange live alligator(s) or alligator eggs while transporting to/or attending such function.

4. Licenses, Permits and Fees

a.i. The licenses and fees required for activities authorized by these regulations are as prescribed under provisions of R.S. title 56, or as prescribed in these regulations, and are:

(a). Resident Alligator Hunter's License (including commercial, helper, sport and nuisance classes)—\$25;

(b). Nonresident Alligator Hunter's License (including landowner and sport classes)—\$150;

(c). Resident Fur Buyer's License—\$55 (except for license years 2022 and 2023, in which the fee will be \$40);

(d). Nonresident Fur Buyer's License—\$215 (except for license years 2022 and 2023, in which the fee will be \$157.50);

(e). Resident Fur Dealer's License—\$400 (except for license years 2022 and 2023, in which the fee will be \$275);

(f). Nonresident Fur Dealer's License—\$800 (except for license years 2022 and 2023, in which the fee will be \$550);

(g). Nongame Quadruped Exhibitor's License—\$20 (except for license years 2022 and 2023, in which the fee will be \$15);

(h). Nongame Quadruped Breeder's License—\$50 (except for license years 2022 and 2023, in which the fee will be \$37.50);

(i). Alligator Parts Dealer License—\$105 (except for license years 2022 and 2023, in which the fee will be \$77.50);

(j). Alligator Parts Retailer License—\$10 (except for license years 2022 and 2023, in which the fee will be \$7.50);

(k). Alligator Hide Tag Fee—\$4 for each alligator hide tag, except for license year 2023, in which the fee for each alligator hide tag shall be \$3;

(l). \$4 for each whole alligator leaving the state as alligator shipping label fee;

(m). \$25 for a designated agent collection permit.

A.4.a.ii. - j. ...

k. Every alligator hunter or alligator farmer shipping or transporting his own catch of alligator skins out of state is liable for the alligator hide tag fee, and shall apply for an official out of state shipping tag to be attached to the shipment and shall pay the alligator hide tag fee. Violation of this Subparagraph is a class two violation as described in R.S. title 56.

A.4.l. - 11.b.vi. ...

vii. The alligator hide tag fee shall be collected by the department from the alligator hunter who is shipping his own alligators or raw alligator skins, or who intends to custom tan, or use for taxidermy, the alligators or raw skins.

A.11.b.viii. - d.vii. ...

viii. The alligator shipping label fee or the alligator hide tag fee shall be collected by the department from the alligator farmer who is shipping alligators or raw alligator skins, or who intends to custom tan, or use for taxidermy, the alligators or raw skins.

A.11.e.i. - e.ii.(c). ...

(d). alligator hide tag fees owed by alligator hunter, alligator farmer or fur dealer.

iii. ...

iv. Every fur dealer, alligator farmer or alligator hunter prior to shipping out of state or prior to tanning in state, partial alligator skins (flanks, bellies or chalecos) must provide an official shipping manifest listing a description of the partial alligator skins in the shipment along with the CITES tag number for each partial skin piece, referenced to the original CITES tag number that was placed on the wild alligator or farm raised alligator when harvested. Department personnel will review the manifest for accuracy and determine the number of original CITES tags referenced for the first time in order to assess the alligator hide tag fees owed by the shipper. Shipper will be thus informed by the department within 10 working days of receiving the official shipping manifest.

v. At the time of shipment or prior to tanning, department personnel will inspect alligator skin pieces and replace any broken or reattached tags. Department personnel will issue the appropriate number of yellow shipping tags, one for each shipment. At that time, department personnel will affix a seal or locking device to each container. It shall be a violation of this Subparagraph for any person other than department personnel or federal personnel to reopen any sealed or locked container. In conjunction with the inspection and prior to department issuance of shipping tag(s) and seal(s) or locking device(s), department personnel must collect:

(a). all completed buyer/dealer records for skins in each shipment;

(b). stub portion of yellow shipping tag completely filled-out;

(c). alligator hide tag fees owed by alligator hunter, alligator farmer or fur dealer for partial alligator skin pieces being shipped as referenced in Clause A.11.e.iv.

vi. If any of the above requirements are not satisfied, the shipment will not be authorized. Violation of this Clause is a class three violation as described in R.S. title 56.

f. Fur dealers engaged in the business of buying and selling alligator hides must maintain complete records of alligator hides purchased inside and outside the state as described in R.S. Title 56. Fur dealers in the business of tanning alligator hides must provide a monthly report, on forms provided by or approved by the department, of all alligator hides being held in inventory. Failure to maintain complete records and to pay the required alligator hide tag fees subjects any dealer to the full penalties provided and the immediate revocation of his license by the department. No license shall be issued to a dealer who has not paid the tax and alligator hide tag fees for the preceding year. Violation of this Subparagraph is a class three violation as described in R.S. title 56.

A.11.g. - 18.c. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 56:115 and Title 56 of the Louisiana Revised Statutes, Chapter 1, Part V, Subpart A.

HISTORICAL NOTE: Promulgated by the Department of Wildlife and Fisheries, Wildlife and Fisheries Commission, LR 16:1070 (December 1990), amended LR 17:892 (September 1991), LR 19:215 (February 1993), LR 20:321 (March 1994), LR 26:1492 (July 2000), LR 28:1996 (September 2002), LR 30:2338 (October 2004), LR 30:2878 (December 2004), LR 31:2267 (September 2005), LR 33:677 (April 2007), LR 35:690 (April 2009), LR 37:2421 (August 2011), LR 39:2291 (August 2013), LR 42:909 (June 2016), LR 43:90 (January 2017), LR46:50 (January 2020), LR46:1398 (October 2020), LR 48:508 (March 2022), LR 48:2992 (December 2022).

Jack Montoucet
Secretary

2212#020

RULE

Department of Wildlife and Fisheries Wildlife and Fisheries Commission

Harvest Regulations—Billfishes (LAC 76:VII.355)

The Wildlife and Fisheries Commission has amended a Rule (LAC 76:VII.355) by modifying the recreational size and possession limits for swordfish, adding roundscale spearfish within billfish harvest regulations, and adding the definition of a Cleithrum to Caudal Keel (CK) measurement. Modifications are a result of adjustments to federal regulations for swordfish and roundscale spearfish. Modifications are being made to maintain continuity of harvest regulations for swordfish and roundscale spearfish in state and federal waters. The authority for amendment of this

Rule is included in the Administrative Procedure Act, R.S. 49:961 et seq., and through the authority granted in R.S. 56:6(25)(a), R.S. 56:326.1, and R.S. 56:326.3 to the Wildlife and Fisheries Commission. This Rule is hereby adopted on the day of promulgation.

Title 76

WILDLIFE AND FISHERIES

Part VII. Fish and Other Aquatic Life

Chapter 3. Saltwater Sport and Commercial Fishery

§355. Harvest Regulations—Billfishes

A. The Wildlife and Fisheries Commission does hereby adopt the following rules and regulations regarding the harvest of billfishes including marlins, roundscale spearfish, sailfish and swordfish within and without Louisiana’s territorial waters. For purposes of this Section, the following words and phrases have the meaning ascribed to them in this subsection, unless the context clearly shows a different meaning.

Cleithrum to Caudal Keel (CK)—measurement along the curved body contour used if the head is removed/not naturally attached from the point on the cleithrum that provides the shortest possible measurement along the body contour to the anterior portion of the caudal keel. The cleithrum is the semicircular bony structure at the posterior edge of the gill opening.

Lower Jaw Fork Length (LJFL)—straight-line length from the tip of the lower jaw to the fork of the tail.

Trip—a fishing trip, regardless of the number of days duration, that begins with departure from a dock, berth, beach, seawall or ramp and that terminates with return to a dock, berth, beach, seawall or ramp.

B. Minimum Size Limits—no person shall possess any fish smaller than the minimum size limit.

Species	Minimum Size Limit
1. Blue Marlin	99 inches Lower Jaw Fork Length (LJFL)
2. White Marlin	66 inches Lower Jaw Fork Length (LJFL)
3. Roundscale Spearfish	66 inches Lower Jaw Fork Length (LJFL)
4. Sailfish	63 inches Lower Jaw Fork Length (LJFL)
5. Swordfish	47 inches Lower Jaw Fork Length (LJFL) or 25 inches Cleithrum to Caudal Keel (CK).

C. Recreational Creel Limit. Recreational fishing vessels shall not possess more than one swordfish per person with a maximum of four swordfish per vessel per trip, whichever is less. Charter vessels may not possess more than one swordfish per paying passenger with a maximum of up to six per vessel per trip, whichever is less. Headboat vessels may not possess more than one swordfish per paying passenger with a maximum of up to fifteen per vessel per trip, whichever is less. Swordfish taken under a recreational bag limit shall not be sold, purchased, exchanged, bartered, or attempted to be sold, purchased, exchanged, or bartered.

D. - J. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 56:6(25)(a), R.S. 56:326.1, and R.S. 56:326.3.

HISTORICAL NOTE: Promulgated by the Department of Wildlife and Fisheries, Wildlife and Fisheries Commission, LR 25:542 (March 1999), amended LR 26:1676 (August 2000), LR 27:2266 (December 2001), LR 48:2994 (December 2022).

Joe McPherson
Chair

2212#009

RULE

**Department of Wildlife and Fisheries
Wildlife and Fisheries Commission**

**Sharks and Sawfishes—Harvest Regulations
(LAC 76:VII.357)**

The Wildlife and Fisheries Commission has amended a Rule (LAC 76:VII.357) by modifying the closed season for the recreational and commercial harvest of sharks. Currently, the recreational and commercial harvest of all sharks is prohibited from April 1 through June 30 of each year and this Rule modifies that prohibition by removing the closed season from Rule. This change is being made to allow more opportunity for both recreational and commercial fishers to harvest those sharks whose populations are healthy and abundant during that time of year. The authority for amendment of this Rule is included in the Administrative Procedure Act, R.S. 49:961 et seq., and through the authority granted in R.S. 56:6(34) to the Wildlife and Fisheries Commission. This Rule is hereby adopted on the day of promulgation.

Title 76

WILDLIFE AND FISHERIES

Part VII. Fish and Other Aquatic Life

Chapter 3. Saltwater Sport and Commercial Fishery

§357. Sharks and Sawfishes—Harvest Regulations

A. - L. ...

M. Seasonal Closures

1. The secretary of the Department of Wildlife and Fisheries is hereby authorized to close any recreational or commercial fishery for sharks, within and without Louisiana’s territorial waters, when the secretary is notified by the National Marine Fisheries Service that the seasonal quota for that species group and fishery has been met. The closure order shall close the fishery until the date projected for the reopening of that fishery in the adjacent federal waters. The secretary is also hereby authorized to modify any such closure order to maintain consistency with reopening dates in the adjacent federal waters, should the federal closure dates be modified.

N. - O. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 56:6(10), R.S. 56:326(E)(2), R.S. 56:326.1, R.S. 56:326.3, R.S. 56:320.2(C), and R.S. 325.2(A).

HISTORICAL NOTE: Promulgated by the Department of Wildlife and Fisheries, Wildlife and Fisheries Commission, LR

25:543 (March 1999), amended LR 27:2267 (December 2001), LR 30:1507 (July 2004), LR 35:705 (April 2009), LR 39:1062 (April 2013), LR 43:1188 (June 2017), LR 46:50 (January 2020), and LR 48:2994 (December 2022).

Jack Montoucet
Secretary

2212#012

RULE

**Workforce Commission
Office of Unemployment Insurance Administration**

**Background Check for Access to Federal Tax Information
(LAC 40:IV.379)**

Pursuant to the authority granted by R.S. 15:587.5, 23:1657.1, and in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq., the Workforce Commission has amended LAC 40:IV.379(C)(2). The purpose of the amendment of this Rule is to allow the frequency of conducting criminal history records checks for access to federal tax information to be dependent upon the requirements in Internal Revenue Service’s Pub. 1075. This Rule is hereby adopted on the day of promulgation.

Title 40

LABOR AND EMPLOYMENT

Part IV. Employment Security

Subpart 1. Board of Review

Chapter 3. Employment Security Law

§379. Criminal History Background Check for Access to Federal Tax Information

A. - B.1.c. ...

C. General Provisions for Criminal History Background Checks

1. ...

2. Criminal history background checks will be completed at the frequency required by the Internal Revenue Service’s Pub. 1075.

C.3. - F. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 15:587.5 and R.S. 23:1657.1.

HISTORICAL NOTE: Promulgated by the Workforce Commission, Office of Unemployment Insurance Administration, LR 44:2026 (November 2018), amended LR 48:2995 (December 2022).

Ava Cates
Secretary

2212#016

RULE

**Workforce Commission
Office of Workers' Compensation Administration**

**Hearing Rules—Required Form to Track
Written Reasons for Contempt
(LAC 40:I.5537)**

The Workforce Commission has amended certain portions of the Louisiana Administrative Code, Title 40, Labor and Employment, Part I, Workers’ Compensation Administration, Subpart 3, Hearing Rules, Chapter 55, Subchapter F, regarding power and authority. The purpose of this amendment is to promulgate a required form to track written reasons for contempt. This Rule is promulgated by the authority delegated to the deputy assistant secretary by R.S. 36:304(B) and vested in the assistant secretary of the Office of Workers’ Compensation found in R.S. 23:1291 and R.S. 23:1310.7. This Rule is hereby adopted on the day of promulgation.

Title 40

LABOR AND EMPLOYMENT

Part I. Workers' Compensation Administration

Subpart 3. Hearing Rules

Chapter 55. General Provisions

Subchapter F. Power and Authority

§5537. Procedure

A. ...

B. Form for Judges to Report Contempt Findings

WORKERS' COMPENSATION CONTEMPT FINDINGS FORM	
Note: Form due to Assistant Secretary within 30 days of ruling per La. R.S. 23:1310.7	
SECTION I: DOCKET CASE INFORMATION (print please)	
1. Plaintiff Party Name	1a. Attorney (if any)
2. Defendant Party Name	2a. Attorney (if any)
3. Judge's Name	4. Date of Event/Hearing
5. District #	6. City
SECTION II: FACTS	
1. Name of Party in Contempt	
2. Parties to the claim and their relationship (ex: John Brown, claimant) :	
3. Code of Civil Procedure Violation (check all that apply):	
<input type="checkbox"/> Article 222- Direct Contempt # of violations _____ Total amount of civil fines assessed \$ _____ Summarize actions used to discourage behavior: _____ _____ _____	
<input type="checkbox"/> Article 224- Constructive Contempt # of violations _____ Total amount of civil fines assessed \$ _____ Summarize actions used to discourage behavior: _____ _____ _____	
4. Attach written reasons issued with ruling	
Signature of Judge _____	Date _____
Signature of Chief Judge _____	Date _____
Signature of Assistant Secretary _____	Date _____

AUTHORITY NOTE: Promulgated in accordance with R.S. 23:1310.1.

HISTORICAL NOTE: Promulgated by the Department of Labor, Office of Workers' Compensation Administration, LR 25:266 (February 1999), amended LR 25:1861 (October 1999), LR 33:653 (April 2007), amended, LR 48:2995 (December 2022).

Ava Cates
Secretary

2212#026

Notices of Intent

NOTICE OF INTENT

Department of Agriculture and Forestry Board of Veterinary Medicine

Preceptor Program (LAC 46:LXXXV.Chapters 3-15)

In accordance with the Administrative Procedure Act, R.S. 49:950 et seq., the Board (“Board”) of Veterinary Medicine has amended LAC 46:LXXXV. Chapters 3-15, regarding the licensure of veterinarians in the state of Louisiana. Chapter 11 of the rules is being repealed as the preceptor program is being discontinued as a requirement for DVM licensure. The rationale behind the repeal and discontinuance of the preceptorship program is multi-faceted. Most schools of veterinary medicine require in their curriculum participation by students in externships, which provide most of the basic training offered by preceptorship. Further post-preceptorship surveys have cast doubt on the efficacy of the preceptorship program in familiarizing the candidate with the business demands and interactions with clients that served as the primary basis for implementing the preceptorship requirement. The board has found this requirement for out of state licensees where virtually no other state has a similar program to be increasingly unnecessary and problematic in granting Louisiana licenses to out of state applicants irrespective of the skills and prior clinic/business experience. The Rule would remove barriers to license mobility at a time many areas of the state are underserved with veterinary care and would align our state with most other states’ requirements for licensure. Sections 307, 700, 702, 714 are amended to reflect the removal of the preceptorship requirement for DVM licensure. This Rule is hereby adopted on the date of promulgation.

Title 46

PROFESSIONAL AND OCCUPATIONAL STANDARDS

Part LXXXV. Veterinarians

Chapter 3. Licensure Procedures

§307. Expedited License/Military Qualifications

- A. ...
- B. Repealed.
- C. - E. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Veterinary Medicine, LR 8:66 (February 1982), amended by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 23:965 (August 1997), LR 40:308 (February 2014), LR 49:

Chapter 7. Veterinary Practice

§700. Definitions

* * *

Preceptees—Repealed.

* * *

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 19:1328 (October 1993), amended LR 20:666 (June 1994), LR 20:1381 (December 1994), LR 24:940 and 941 (May 1998), LR 24:1932 (October 1998), LR 24:2257 (December 1998), LR 27:51 (January 2001), LR 27:543 (April 2001), LR 31:3162 (December 2005), LR 33:2424 (November 2007), LR 35:244 (February 2009), LR 40:308 (February 2014), LR 49:

§702. Direct Supervision

- A. - A.3. ...
- B. - B.2. Repealed.
- C. - D.2.f. ...

E. *Unlicensed veterinarians*, as defined in §700, shall not practice veterinary medicine until such time as they are licensed by the state of Louisiana. An unlicensed veterinarian may only function as a veterinary assistant under direct supervision.

- F. - F.4. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 16:225 (March 1990), amended LR 19:1329 (October 1993), LR 24:940 (May 1998), LR 40:309 (February 2014), LR 49:

§714. Student/Shelters and Faculty Veterinarian

- A. - E. ...

F. A student extern who is working during a school vacation for a licensed veterinarian shall be under continuous, visual, and on-site supervision of a veterinarian licensed by the board. The supervising veterinarian shall be ultimately responsible and held accountable by the board for the duties, actions, or work performed by such person; however, at no time shall the student's role extend beyond observing the supervising veterinarian in a support capacity during assessment, diagnosis, treatment, and surgery. The student extern shall not perform supervision of any nature, as defined in §700 and §702, of the tasks or procedures performed by other personnel of the facility at issue.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 29:1479 (August 2003), amended LR 34:1029 (June 2008), amended LR 49:

Chapter 11. Preceptor Program

§1101. Purpose

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 16:232 (March 1990), repealed LR 49:

§1103. Definitions

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 16:232 (March 1990), amended LR 19:208 (February 1993), LR 23:968 (August 1997), LR 24:1293 (July 1998), LR 27:543 (April 2001), LR

28:1208 (June 2002), LR 38:357 (February 2012), LR 40:309 (February 2014), repealed LR 49:

§1105. Applicants

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 16:232 (March 1990), amended LR 23:1686 (December 1997), LR 24:942 (May 1998), LR 27:543 (April 2001), LR 37:1571 (June 2011), LR 38:357 (February 2012), repealed LR 49:

§1107. Preceptorship Committee

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 16:233 (March 1990), repealed LR 49:

§1109. Preceptor's Responsibilities

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 16:233 (March 1990), amended LR 27:543 (April 2001), repealed LR 49:

§1111. Preceptee's Responsibilities

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 16:233 (March 1990), amended LR 27:544 (April 2001), repealed LR 49:

§1113. Practice Assessment Forms and Job Description Forms

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 16:233 (March 1990), amended LR 27:544 (April 2001), repealed LR 49:

§1115. Preceptorship Practice Requirements

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 16:233 (March 1990), amended LR 27:544 (April 2001), LR 28:1208 (June 2002), repealed LR 49:

§1117. Financial Arrangements and Agreements

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 16:234 (March 1990), amended LR 27:544 (April 2001), repealed LR 49:

§1119. Preceptorship Attendance Log

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 16:234 (March 1990), amended LR 23:968 (August 1997), LR 27:544 (April 2001), repealed LR 49:

§1121. Evaluations

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 16:234 (March 1990), amended LR 23:968 (August 1997), LR 27:544 (April 2001), repealed LR 49:

§1123. Effective Date

Repealed

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1518.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Veterinary Medicine, LR 16:234 (March 1990), amended LR 27:545 (April 2001), repealed LR 49:

Family Impact Statement

The proposed Rule should not have any known or foreseeable impact on family formation, stability, and autonomy. In particular, the proposed Rule has no known or foreseeable impact on:

1. the stability of the family;
2. the authority and rights of persons regarding the education and supervision of their children;
3. the functioning of the family;
4. family earnings and family budget;
5. the behavior and personal responsibility of children;
6. the ability of the family or a local government to perform the function as contained in the proposed Rule.

Poverty Impact Statement

The proposed Rule should not have any known or foreseeable impact on any child, individual or family as defined by R.S. 49:973(B). In particular, there should be no known or foreseeable effect on:

1. the effect on household income, assets, and financial security;
2. the effect on early childhood development and preschool through postsecondary education development;
3. the effect on employment and workforce development;
4. the effect on taxes and tax credits;
5. the effect on child and dependent care, housing, health care, nutrition, transportation, and utilities assistance.

Small Business Analysis

The proposed Rule should have no adverse impact on small businesses as defined in the Regulatory Flexibility Act.

Provider Impact Statement

The proposed Rule should not have any known or foreseeable impact on providers as defined by HCR 170 of the 2014 Regular Legislative Session. In particular, there should be no known or foreseeable effect on:

1. the effect on the staffing level requirements or qualifications required to provide the same level of service;
2. the total direct and indirect effect on the cost to the providers to provide the same level of service; or
3. the overall effect on the ability of the provider to provide the same level of service.

Public Comments

Interested parties may submit written comments to the Louisiana Board of Veterinary Medicine, Attention: Jared B. Granier, Executive Director, via U.S Mail at 5825 Florida Blvd, Baton Rouge, LA 70806 or via e-mail attachment to director@lsbvm.org or via hand delivery. Comments will be accepted until 3 p.m. on Monday, January 9, 2023. All written comments must be dated and include the first and last name, email address, mailing address, phone number,

and the original signature of the person submitting the comments.

Public Hearing

Interested parties may submit a written request to conduct a public hearing to the Louisiana Board of Veterinary Medicine, Attention: Jared B. Granier, Executive Director, via U.S Mail at 5825 Florida Blvd, Baton Rouge, LA 70806 or via e-mail attachment to director@lsbvm.org or via hand delivery; however, such request must be received by no later than 3 p.m. on Monday, January 9, 2023. If the criteria set forth in R.S. 49:953(A)(2)(a) are satisfied, a public hearing will be conducted at 1 p.m. on Wednesday, January 24, 2023 at 5825 Florida Blvd, Baton Rouge, LA 70806. To confirm whether or not a public hearing will be held, interested parties must visit www.lsbvm.org/rulemaking-projects on or after January 9, 2023. If a public hearing is to be held, all interested parties are invited to attend and present data, views, comments, or arguments, orally or in writing. In the event of a hearing, parking is available to the public in front of the Department of Agriculture and Forestry Building at 5825 Florida Blvd, Baton Rouge, LA 70806.

Jared B. Granier
Executive Director

**FISCAL AND ECONOMIC IMPACT STATEMENT
FOR ADMINISTRATIVE RULES
RULE TITLE: Preceptor Program**

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

There will be no costs or savings to state or local governmental units, except for those associated with publishing the proposed rule amendment (estimated at \$750 in FY 2023). This proposed rule amendment would remove barriers to entry at a time many areas of the state are underserved with veterinary care and would align Louisiana’s with most other states’ requirements for licensure. All current licensees and potential applicants for licensure will be informed of this proposed rule amendment via the Board of Veterinary Medicine’s regular newsletter, website, and by email which results in minimal costs to the board.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

The Board of Veterinary Medicine (Board) anticipates a greater number of applications for the Doctor of Veterinary Medicine (DVM) licensure due to the removal of the preceptorship application requirement. As such, the proposed rule amendment is anticipated to increase revenues generated from fees for applications for DVM licensure as follows: FY2022 – \$5,500 (an increase of 10 applicants x \$550 fees); FY2023 – \$8,250 (an increase of 15 applicants x \$550 fees); and FY2024 – \$11,000 (an increase of 20 applicants x \$550 fees).

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

The proposed rule amendment removes the preceptorship requirement for out-of-state licensees where virtually no other state has a similar program, thus benefiting applicants for DVM licensure by having a more streamlined, less restrictive application process and a positive effect on the timeframe for DVM license issuance.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

The number of licensed DVMs is anticipated to increase as a result of the proposed rule amendment. In the long term, this proposed rule amendment should increase overall competition for employment. However, at this time many areas of the state are currently underserved with veterinary care and a larger number of licensed DVMs are needed in the state to fill these employment opportunities.

Alfred G. Stevens, DVM
Board President
2212#034

Alan M. Boxberger
Interim Legislative Fiscal Office
Legislative Fiscal Office

NOTICE OF INTENT

**Department of Economic Development
Office of the Secretary**

**Small Business Innovation Retention Fund Program
(LAC 13:I.Chapter 49)**

Under the authority of R.S. 51:2401 and R.S. 36:104, and in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq., the Department of Economic Development hereby give notice of their intent to adopt rules for the Small Business Innovation Retention Fund Program.

Title 13

ECONOMIC DEVELOPMENT

Part I. Financial Incentive Programs

Chapter 49. Small Business Innovation Retention Fund Program

§4901. Purpose

A. The purpose of this Chapter is to implement the Small Business Innovation Retention Fund Program as established by R.S. 51:2401.

B. This Chapter shall be administered to achieve the following purposes:

1. to support and retain Louisiana jobs in STEM and other high-tech industries; and

2. to retain Louisiana small innovative businesses by providing financial assistance to certain businesses that have received certain Small Business Innovation Research (SBIR) or Small Business Technology Transfer (STTR) grant funds.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:104 and 51:2401

HISTORICAL NOTE: Promulgated by the Department of Economic Development, Office of the Secretary, LR 49:

§4903. Definitions

A. Terms not otherwise defined in this Chapter shall have the same meaning given to them in R.S. 51:2401, unless the context clearly requires otherwise.

B. In this Chapter, the following terms shall have the meanings provided herein, unless the context clearly indicates otherwise.

Applicant—a person requesting a grant award from LED under this program.

Department—Louisiana Department of Economic Development.

Federal Notice of Award—a document issued by a federal agency evidencing approval of an SBIR or STTR

application, including but not limited to amount of funding awarded, agreement number and topic number.

LED—Louisiana Department of Economic Development.

LED Grant Letter—a letter issued by LED to a person for a particular calendar year, setting forth the amount, terms and conditions of the grant.

Louisiana Small Business—a for profit, Louisiana domiciled business with fewer than 500 employees.

Person—any natural person or legal entity including an individual, corporation, partnership, or limited liability company.

Retention Fund—Small Business Innovation Retention Fund.

Secretary—Secretary of the Louisiana Department of Economic Development.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:104 and 51:2401

HISTORICAL NOTE: Promulgated by the Department of Economic Development, Office of the Secretary, LR 49:

§4905. General Principles

A. The following general principles will direct the administration of the program.

1. Awards are not be considered as an entitlement for companies, and the secretary has the final authority to determine whether or not each particular applicant is eligible and meets the criteria of the award, and in all such circumstances, the exercise of that discretion shall be deemed to be a final determination of the applicant's award status.

2. Applications shall be accepted on a year round basis, subject to availability of funding in any given year, or as otherwise determined by LED.

3. Applicants may apply for more than one program administered by LED, provided that:

a. separate applications are submitted per program; and

b. program applicants do not receive a double benefit on the same state funding. Program applicants may therefore also apply for the Research and Development Program for any separate and distinguishable funding.

B. Program Issuance Cap. LED may issue no more than \$1,000,000 per fiscal year from the Retention Fund as follows:

1. up to \$500,000 shall be allocated for Phase I SBIR or STTR federal grant recipients;

2. up to \$500,000 shall be allocated for Phase II SBIR or STTR federal recipients.

C. Applicant Issuance Cap

1. Each selected applicant shall receive an amount equal to 25 percent of the Phase I SBIR or STTR federal grant the applicant has received, not to exceed \$50,000 per applicant;

2. Each selected applicant shall receive an amount equal to 20 percent of the Phase II SBIR or STTR federal grant the applicant has received, not to exceed \$100,000 per applicant.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:104 and 51:2401

HISTORICAL NOTE: Promulgated by the Department of Economic Development, Office of the Secretary, LR 49:

§4907. Eligibility

A. Eligible applicants for the benefits of this program shall be Louisiana small businesses that receive a federal notice of award on or after June 15, 2022.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:104 and 51:2401

HISTORICAL NOTE: Promulgated by the Department of Economic Development, Office of the Secretary, LR 49:

§4909. Application Procedure

A. LED will provide a standard application form which applicants will be required to use to apply for assistance under this program. The application form will contain, but not be limited to, the following:

1. business name;
2. contact person and their title;
3. business physical address;
4. business phone number and email address;
5. brief description of the nature of the business;
6. number of employees;
7. Secretary of State registration;
8. information evidencing SBIR or STTR award, including name of issuing federal agency;
9. any additional information requested by LED.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:104 and 51:2401

HISTORICAL NOTE: Promulgated by the Department of Economic Development, Office of the Secretary, LR 49:

§4911. Selection Criteria

A. LED will consider various factors when determining which applications will be funded. Among the factors which may be taken into consideration are the following:

1. disbursing of funding statewide;
2. availability of funding; and
3. best interests of the state.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:104 and 51:2401

HISTORICAL NOTE: Promulgated by the Department of Economic Development, Office of the Secretary, LR 49:

§4913. LED Action—Grant Approval or Denial Provisions

A. In the event LED determines that an applicant is eligible, funding is available and a grant would be appropriate, a grant letter will be issued, specifying the amount, the terms and conditions of the grant.

B. Grant funds will be disbursed to the approved applicants as follows.

1. Phase I SBIR or STTR applicants shall receive 25 percent of the federal grant received, not to exceed \$50,000 per applicant;

2. Phase II SBIR or STTR applicants shall receive 20 percent of the federal grant received, not to exceed \$100,000 per applicant;

3. Each grant awarded shall be divided into two equal amounts and disbursed over a period of two consecutive years as follows:

a. year 1 funding may be awarded based upon the amount stated in the federal notice of award;

b. year 2 funding shall be awarded contingent upon the actual federal grant funding received, as supported by reporting documentation of recipient and any other compliance information requested by LED. In the event of

any deviation from the anticipated total federal grant funding, LED reserves the right to increase or decrease the year 2 award to ensure compliance with the maximum award provisions.

C. In the event LED determines that an applicant is not selected for an award, a Denial Letter will be issued by the secretary, specifying the basis for denial.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:104 and 51:2401

HISTORICAL NOTE: Promulgated by the Department of Economic Development, Office of the Secretary, LR 49:

Family Impact Statement

The proposed Rule changes have no impact on family formation, stability or autonomy, as described in R.S. 49:972.

Poverty Statement

The proposed Rule is not anticipated to have an impact on poverty as described in R.S. 49:973.

Provider Impact Statement

The proposed Rule is not anticipated to have an impact on providers of services as described in HCR 170 of the 2014 Regular Legislative Session.

Small Business Analysis

The proposed Rule is not anticipated to have an adverse impact on small businesses as defined in the Regulatory Flexibility Act. The agency, consistent with health, safety, environmental and economic factors has considered and, where possible, utilized regulatory methods in drafting the proposed Rule to accomplish the objectives of applicable statutes while minimizing any anticipated adverse impact on small businesses.

Public Comments

Interested persons should submit written comments on the proposed Rules to Stephanie Le Grange through the close of business on Tuesday, January 24, 2023 at Department of Economic Development, 617 North Third Street, 11th Floor, Baton Rouge, LA 70802 or via email to Stephanie.LeGrange@la.gov.

Public Hearing

A meeting for the purpose of receiving the presentation of oral comments will be held at 11 a.m. on Wednesday, January 25, 2023 in the Griffon Conference Room at the LaSalle Building, 617 North Third Street, Baton Rouge, LA 70802.

Brenda Guess
Assistant Secretary

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES

RULE TITLE: Small Business Innovation Retention Fund Program

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

The proposed rule establishes program guidelines for the Small Business Innovation Retention (SBIR) Program authorized by Act 476 of the 2022 Regular Session.

The Department of Economic Development (LED) expects to receive up to \$105,000 per year to administer the program. These funds should be sufficient to administer the program as outlined in law/proposed rules.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

The program is expected to have a negligible impact on future revenue collections at both the state and local levels.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

The program will directly benefit Louisiana businesses that are recipients of federal SBIR or Small Business Technology Transfer (STTR) grants who receive awards from the Louisiana Small Business Innovation Retention Fund Program, by providing them with additional grant funding from the State. These businesses will be subject to additional application and compliance requirements, but these requirements should not be significant and should be outweighed by the benefits received.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

Program award recipients may enjoy competitive benefits over any competitors who do not receive awards, due to having additional funding. Employment may increase negligibly, if award recipients hire additional personnel due to receiving award funding.

Anne G. Villa
Undersecretary
2212#043

Alan M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

NOTICE OF INTENT

Department of Economic Development Office of Business Development

Louisiana Competes Regional Economic Development
Program (Louisiana Competes Program)
(LAC 19:III.Chapter 25)

The Department of Economic Development, Office of Business Development, as authorized by and pursuant to the provisions of the Administrative Procedure Act, R.S. 49:950 et seq., R.S. 36:104, 36:108 and 39:1481 et seq., hereby give notice of their intent to adopt rules for the Louisiana Competes Regional Economic Development Program, abbreviated and to be known as the "Louisiana Competes Program".

Title 19

ECONOMIC DEVELOPMENT

Part III. Financial Assistance Programs

Chapter 25. Louisiana Competes Regional Economic Development Program (Louisiana Competes Program)

§2501. Preamble and Purpose

A. The legislature recognizes the strong competition among states to attract new business and industry and to grow existing business and industry.

B. It is further recognized that different regions have different characteristics and attributes which are advantageous to specific sectors of the economy.

C. The legislature believes that local citizens working through regional economic development organizations ("REDO's") are uniquely positioned to support the state's overall economic development efforts by identifying and directing how certain resources are best utilized to take advantage of a region's distinctive economic potential.

D. The purpose of this program is therefore for the Department of Economic Development, (“LED”) to provide grants to REDO’s to provide locally developed and tailored services directly relating to attracting new business and industry and growing existing business and industry.

AUTHORITY NOTE: Promulgated in accordance with R.S. 39:1481 et seq.

HISTORICAL NOTE: Promulgated by the Department of Economic Development, Office of Business Development, LR 49:

§2503. Definitions

Cooperative Endeavor Agreement—that agreement between a regional economic development organization and LED, through which the parties set forth the amount of the grant, the terms, conditions and compliance requirements. Abbreviated as CEA.

Grant—an award from the Louisiana Competes Economic Development Program to a regional economic development organization.

LED—the Louisiana Department of Economic Development.

Louisiana Competes Program—this program, the Louisiana Competes Regional Economic Development Program.

Other Property—property that is not publicly owned, to the extent allowable under Article VII, Section 14 of the Louisiana Constitution or other applicable state law, as approved by LED.

Public Site—a site which a public entity owns.

Qualified Expenditure—in accordance with R.S. 39:1484, #2107 of these program rules, and as confirmed and approved by LED.

Regional Economic Development Organization—any of the following eight organizations: the Baton Rouge Area Chamber; the Central Louisiana Economic Development Alliance; Greater New Orleans, Inc.; the Northeast Louisiana Economic Alliance; the North Louisiana Economic Partnership; One Acadiana; the South Central Planning and Development Commission; the Southwest Louisiana Economic Development Alliance, or any of their successors. Abbreviated and also known as “REDO”,

Secretary—the Secretary of the Department of Economic Development

Site—immovable property, with or without improvements thereon, located in the state.

AUTHORITY NOTE: Promulgated in accordance with R.S. 39:1481 et seq.

HISTORICAL NOTE: Promulgated by the Department of Economic Development, Office of Business Development, LR 49:

§2505. Award Process

A. The secretary shall promulgate administrative rules for the program, in accordance with the Administrative Procedure Act and in consultation with the 8 enumerated REDO’s and the Louisiana Chamber of Commerce Foundation.

B. Within 30 calendar days after adoption of program rules, the REDO’s and the state, through LED, shall enter into an initial cooperative endeavor agreement (“CEA”), which will specify the objectives and intent of the REDO’s, the amount of the award, the terms and conditions of the award and the compliance requirements to be confirmed by LED. REDO obligations shall be limited under the CEA to the following:

1. identifying high-priority sites for the purpose of attracting economic development projects;

2. developing high-priority sites for the purpose of attracting economic development projects;

3. developing and subsequently providing an annual report of all activities related to the objectives of the CEA undertaken in any previous year;

4. maintaining records and an accurate accounting of all expenditures;

5. adhering to state and federal non-discrimination laws;

6. adhering to the provisions of R.S. 39:1602.1;

7. applying a 10 percent local match:

a. a REDO shall not expend any grant funds without simultaneously applying local matching funds equaling 10 percent of the cost being paid.

b. local matching funds cannot come from the LED provided regional awards and matching grant program tier I funds;

c. funds originating from any lawful source other than the state shall constitute local matching funds.

C. The initial CEA with each REDO shall have a term of two years, which shall automatically renew for successive one-year periods until such times as all initial funds provided for in the CEA have been expended, as verified and confirmed in writing by LED.

D. Funds may be disbursed by LED to REDO’s after execution of a CEA on a cost reimbursement basis, or may be direct vendor pay by LED on behalf of REDO, after submission of all required compliance documentation to LED.

E. Each REDO shall receive a grant in the amount of up to one-eighth of the funds appropriated:

1. An initial grant in the amount of up to \$1million shall be allocated to each REDO, in accordance with a total program allocation of \$8 million incorporated in Act 170 of the 2022 Regular Session of the Louisiana Legislature;

2. Thereafter, each REDO shall receive a subsequent grant in the amount of up to one-eighth of any annual funds specifically appropriated to LED for the Louisiana Competes Program.

AUTHORITY NOTE: Promulgated in accordance with R.S. 39:1481 et seq.

HISTORICAL NOTE: Promulgated by the Department of Economic Development, Office of Business Development 49:

§2507. Qualified Expenditures

A. REDO’s shall only use grant funds to pay for qualified expenditures related to the furtherance of economic development within the region it represents.

B. Qualified expenditures are limited to site development costs for publicly owned property or other property to the extent allowable under Article VII, Section 14 of the Constitution of Louisiana and other applicable state law, as approved in writing by LED.

1. Grant awards for development of other property, in proportion to awards for development of publicly owned property, may be limited by the secretary if determined to be in the best interests of the state.

C. Eligible site development costs may include but not be limited to the following:

1. studies;

2. surveys;

Public Hearing

A meeting for the purpose of receiving the presentation of oral comments will be held at 10 a.m. on Wednesday, January 25, 2023 in the Griffon Conference Room at the LaSalle Building, 617 North 3rd Street, Baton Rouge, LA 70802.

Anne G. Villa
Undersecretary

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES RULE TITLE: Louisiana Competes Regional Economic Development Program (Louisiana Competes Program)

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

The proposed rule establishes program guidelines for the Louisiana Competes Program authorized by Act 556 of the 2022 Regular Session.

The Department of Economic Development (LED) anticipates no impact on implementation costs or savings as a result of the proposed rules. Minimal LED resources should be required to administer the program as it only involves working with eight external entities. Existing LED staff and resources should be sufficient to administer the program. Regional economic development organizations (REDOs) will administer the program at the local level. Some administrative resources will be required, though expected to be nominal. In order to receive grant funding for qualified expenditures, a local match of 10% must be obtained.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

State and local governments should experience future revenue increases, to the extent the program is successful regarding economic development efforts. The program and grant funding for site development projects may also result in increased economic activity related to providing those site development services. Any increased economic activity should result in increased state and local revenue collections, to varying degrees of impact.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

REDOs will have related administrative costs while benefiting from the ability to provide additional services. Small businesses, particularly those involved with providing site development services, may benefit from increased demand for site development services.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

Grant awards and resulting activity, particularly related to providing site development services, may result in marginal employment increases in related industries. Attracting additional economic development project wins will impact competition and employment, to the extent the program is responsible.

Anne G. Villa
Undersecretary
2212#044

Alan M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

3. development of plans and specifications;
4. real estate services and transactions, such as option agreements, rights of first refusal and infrastructure improvements may be considered qualified expenditures if they further attributes of the site as a developable property and adequate supporting documentation is submitted to LED. LED will evaluate submissions on a case by case basis, but would consider the following to be examples of improvements:

- a. the construction of water, sewer or rail lines, roads or the development of rights of way.
- b. the removal of an existing structure;
5. due diligence;
6. remediation;
7. wetland delineation;
8. professional services for architectural, engineering, legal, construction, and financial services related to site development.

D. Ineligible site development costs may include but not be limited to the following:

1. salaries, wages or benefits;
2. travel expenses incurred by REDO officers, employees or contractors;
3. alcohol;
4. land, building, offices, equipment, or vehicles used primarily for the administrative operations of the REDO.

AUTHORITY NOTE: Promulgated in accordance with. R.S. 39:1481 et seq.

HISTORICAL NOTE: Promulgated by the Department of Economic Development, Office of Business Development, LR 49:

Family Impact Statement

The proposed Rule is not anticipated to have an impact on family formation, stability, and autonomy as described in R.S. 49:972.

Poverty Statement

The proposed Rule is not anticipated to have an impact on poverty as described in R.S. 49:973.

Provider Impact Statement

The proposed Rule is not anticipated to have an impact on providers of services as described in HCR 170 of the 2014 Regular Legislative Session.

Small Business Analysis

The purpose of this program is to provide additional state funding to regional economic development organizations throughout the state who are charged with retaining and growing business and industry of both and small scale businesses. Participation in the program by REDO's may cause a direct economic impact on small businesses, however, the benefit from additional funding received, at a nominal cost of some additional planning and paperwork associated with the compliance and reporting requirements should provide a positive impact to any small businesses.

Public Comments

Interested persons should submit written comments on the proposed Rules to Michael Tepper through the close of business on Tuesday, January 24, 2023 at Department of Economic Development, 617 North 3rd Street, 11th Floor, Baton Rouge, LA 70802 or via email to Michael.Tepper@la.gov.

NOTICE OF INTENT

Board of Elementary and Secondary Education

Innovative Assessment Program
 (LAC 28:XI.301, 307, 601, 709, 3901, 3903,
 4001, 5107, 5701, 6401, 6403, and 6405)

Editor’s Note: This proposed Rule is being reprinted to correct typographical errors upon submission. The original Notice of Intent may be viewed in the October 20, 2022 edition of the *Louisiana Register* on pages 2648-2653.

In accordance with the provisions of R.S. 17:6(A)(10) and the Administrative Procedure Act (APA), R.S. 49:953(B)(1) et seq., the Board of Elementary and Secondary Education proposes to amend LAC 28:XI.301, 307, 601, 709, 3901, 3903, and 4001 in *Bulletin 111—The Louisiana School, District, and State Accountability System* and LAC 28:XI.5107, 5701, 6401, 6403, and 6405 in *Bulletin 118—Statewide Assessment Standards and Practices*. The proposed revisions update policy related to the Innovative Assessment Program, which provides an alternative approach to measuring how well students know and understand the Louisiana English Language Arts content standards. Revisions also add the new English Language Proficiency Test (ELPT) Connect, an alternate assessment created for English learners with significant cognitive disabilities.

**Title 28
 EDUCATION**

Part XI. Accountability/Testing

Subpart 1. Bulletin 111—The Louisiana School, District and State Accountability System

Chapter 3. School Performance Score Component

**§301. School Performance Score Goal
 [Formerly LAC 28:LXXXIII.301]**

A. - C.1. ...

2. Beginning in 2017-2018 (2018 SPS), the school performance score for K-8 schools will include an assessment index, progress index, and dropout/credit accumulation index. The interests and opportunities indicator will be included in school performance scores no later than 2019-2020 school year (2020 SPS).

K-8 School Performance Score Indices and Weights			
Index	Grades	Beginning in 2017-18	No Later than 2019-20
3-8 and high school LEAP 2025, Innovative Assessment, LEAP Connect, and ELPT [‡] and ELPT Connect*	Grades K-7	75 percent	70 percent

*Beginning in 2023-2024

3. Beginning in the 2017-2018 school year (2018 SPS), the school performance score for schools with a grade 12 will include five indicators as outlined in the table below. The interests and opportunities indicator will be included in school performance scores no later than 2019-2020 school year (2020 SPS).

High School Performance Score Indices and Weights			
Index	Grades	Beginning in 2017-2018	No Later than 2019-2020
High school LEAP 2025, LEAP Connect, and ELPT [‡] and ELPT Connect*	Grades 9-12	12.5 percent	12.5 percent

*Beginning in 2023-2024

** When calculating a school’s ACT index score, students participating in the LEAP Connect assessment shall not be included in the denominator of such calculation unless the students take the ACT.

4. - 6. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:6 and 17:10.1.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 29:2737 (December 2003), amended LR 31:1512 (July 2005), LR 32:1017 (June 2006), LR 32:2034, 2035 (November 2006), LR 33:424 (March 2007), LR 33:2349 (November 2007), LR 33:2593 (December 2007), LR 34:430 (March 2008), LR 35:639 (April 2009), LR 36:1987 (September 2010), LR 38:3105 (December 2012), LR 39:305 (February 2013), LR 39:1421 (June 2013), LR 39:2441 (September 2013), LR 40:1313 (July 2014), LR 40:2507 (December 2014), LR 41:1481 (August 2015), LR 41:2578 (December 2015), LR 42:2171, 2172 (December 2016), LR 44:447 (March 2018), LR 45:1449 (October 2019), LR 46:1372 (October 2020), LR 47:444 (April 2021), LR 49:

§307. Innovative Assessment Program

A. Beginning in the 2019-2020 school year, the LDE began piloting a new Innovative Assessment Program.

B. For the 2021-2022 school year only, the ELA assessment index for operational participants will be calculated using either the most recent pre-pilot assessment index for ELA or the current year pilot assessment index, whichever yields the higher school performance score, will be used as the ELA component of the overall assessment index.

1. This policy shall not impact a school or system’s progression in intervention status for purposes of federal accountability. Intervention status will be determined by using the current year’s IAP results.

C. Beginning in 2022-2023, a student’s end of year Innovative Assessment Program achievement level and scale score shall be used in the calculation of accountability. If a student does not participate in all administrations of the Innovative Assessment Program and does not receive an end of year achievement level and scale score, they shall be required to take the traditional LEAP 2025 assessment in ELA.

D. The LDE will annually update BESE on the status of the assessment pilot transition beginning December 2019.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:6 and 17:10.1.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 45:1450 (October 2019), LR 49:

Chapter 6. Inclusion in Accountability

**§601. State Assessments and Accountability
 [Formerly §515]**

A. - B.3. ...

C. All students who are English learners shall take the Louisiana English language proficiency test (ELPT) assessment or the English language proficiency test Connect (ELPT Connect) annually, as well as the appropriate state assessment for their enrolled grade.

D. ...

E. English learners who have not been enrolled in a school in the United States for one full school year shall participate in all required academic assessments and the ELPT or ELPT Connect (for qualifying students).

E.1. - G. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:10.1.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 29:2741 (December 2003), amended LR 31:2422 (October 2005), LR 32:1022 (June 2006), LR 33:253 (February 2007), LR 36:1990 (September 2010), LR 37:2119 (July 2011), LR 38:1212 (May 2012), LR 38:3107 (December 2012), 39:2443 (September 2013), LR 40:2507 (December 2014), LR 44:452 (March 2018), LR 47:446 (April 2021), LR 49:

Chapter 7. Graduation Cohort, Index, and Rate
[Formerly Chapter 6]

§709. Calculating a Strength of Diploma Index
[Formerly §613]

A. Beginning in 2017-2018 (2016-2017 cohort), points shall be assigned for each member of a cohort according to the following table.

Student Results	Points
High School Diploma plus Associate's Degree	160
High School Diploma plus: (a). AP score of 3 or higher; IB score of 4 or higher; or CLEP score of 50 or higher OR (b). Advanced statewide Jump Start credential *Students achieving both (a) and (b) will generate 160 points.	150
High School Diploma plus: (a). At least one passing course grade for TOPS core curriculum credit of the following type: AP**; college credit; dual enrollment; or IB** OR (b). Basic statewide Jump Start credential *Students achieving both (a) and (b) will generate 115 points. **Students must take the AP/IB exam and pass the course to earn 110 points	110
High School Diploma (includes Career Diploma student with a regional Jump Start credential)	100
HiSET plus Jump Start credential	40
HiSET	25
Non-graduate without HiSET	0

B. - D. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:6 and 17:10.1.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 32:1025 (June 2006), amended LR 33:2031 (October 2007), LR 33:2594 (December 2007), LR 35:1472 (August 2009), LR 36:1769 (August 2010), repromulgated LR 36:1994 (September 2010), LR 36:2243 (October 2010), LR 37:3201 (November 2011), LR 38:1391 (June

2012), LR 38:3109 (December 2012), LR 39:306 (February 2013), LR 39:2444 (September 2013), LR 40:1317 (July 2014), LR 41:615 (April 2015), LR 42:1017 (July 2016), LR 42:2172 (December 2016), LR 44:455 (March 2018), LR 44:1998 (November 2018), LR 47:448 (April 2021), LR 49:

Chapter 39. Inclusion of Students with Disabilities
§3901. Assessment of Students with Disabilities
[Formerly LAC 28:LXXXIII.3901]

A. All students, including those with disabilities, shall participate in Louisiana's testing program. The scores of all students who are eligible to take the 3-8 or high school LEAP 2025, ACT, LEAP Connect, or Louisiana English language proficiency test (ELPT and ELPT Connect) shall be included in the calculation of the SPS. Students with disabilities shall take the assessments with accommodations, if required by their individualized education program (IEP).

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:10.1.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 29:2754 (December 2003), amended LR 31:2763 (November 2005), LR 36:1994 (September 2010), LR 38:3115 (December 2012), LR 40:2508 (December 2014), LR 44:460 (March 2018), LR 47:449 (April 2021), LR 49:

§3903. LEAP Alternate Assessment Participation
Criteria [Formerly LAC 28:LXXXIII.3903]

A. Students with disabilities participating in the LEAP and ELPT alternate assessments LEAP Alternate Assessment, LEAP Connect, must meet specific participation criteria as stated in LAC 28:LV.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:10.1.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 29:2754 (December 2003), amended LR 31:2763 (November 2005), LR 40:2508 (December 2014), LR 44:460 (March 2018), LR 47:449 (April 2021), LR 49:

Chapter 40. Definitions Related to English Proficiency
§4001. Proficient in English
[Formerly LAC 28:LXXXIII.4001]

A. - C. ...
 D. Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:6 and 17:10.1.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 30:767 (April 2004), amended LR 33:254 (February 2007), LR 34:2552 (December 2008), LR 36:2243 (October 2010), LR 38:3115 (December 2012), LR 44:460 (March 2018), LR 46:15 (January 2020), LR 49:

Subpart 3. Bulletin 118—Statewide Assessment
Standards and Practices

Chapter 51. General Provisions
§5107. Assessment Programs
[Formerly LAC 28:CXI.107]

A. - B.2. ...

C. Innovative Assessments. The Innovative assessment program allows for unit-based measures of performance that indicate how well students in participating school systems and grade levels have mastered the English language arts state content standards.

D. LEAP Connect. The LEAP Connect is an alternate assessment, designed for students with significant disabilities, which evaluates each eligible special education student's knowledge and skills in targeted areas.

E. English Language Proficiency Test (ELPT). The ELPT is an assessment program designed to measure proficiency in reading, writing, speaking, and listening of English learners.

F. English Language Proficiency Test Connect (ELPT-Connect). The ELPT Connect is an alternate English proficiency test, designed for English learners with significant disabilities.

G. National Assessment of Educational Progress (NAEP). Also known as the nation's report card, NAEP is administered nationally to a random stratified sample population of students to gather data about subject-matter achievement, instructional experiences, and school environment.

H. Field Tests. Representative student populations from school districts throughout Louisiana are chosen to field test new items to be used in future statewide assessments. The items are tested, scored, ranked statistically, and identified as effective or ineffective.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:24.4.

HISTORICAL NOTE: Promulgated by the Department of Education, Board of Elementary and Secondary Education, LR 31:1526 (July 2005), amended LR 32:233 (February 2006), LR 33:255 (February 2007), LR 36:477 (March 2010), LR 40:2509 (December 2014), LR 44:462 (March 2018), LR 47:566 (May 2021), LR 49:

Chapter 57. Assessment Program Overview

§5701. Overview of Assessment Programs in Louisiana [Formerly LAC 28:CXI.701]

A. Norm-Referenced and Criterion-Referenced Testing Programs Since 1986

Name of Assessment Program	Assessment Population	Administered
Academic Skills Assessment (ASA) and ASA LAA 2 form	Students pursuing a State-Approved Skills Certificate (SASC) or GED	spring 2012 (one administration only, spring 2012)

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:24.4.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 31:1534 (July 2005), amended LR 32:235 (February 2006), LR 34:66 (January 2008), LR 34:1352 (July 2008), LR 35:218 (February 2009), LR 36:967 (May 2010), LR 37:858 (March 2011), LR 38:34 (January 2012), LR 39:74 (January 2013), LR 39:1019 (April 2013), LR 40:1319 (July 2014), LR 40:2512 (December 2014), LR 44:465 (March 2018), LR 44:2127 (December 2018), LR 46:15 (January 2020), LR 47:566 (May 2021), repromulgated LR 47:721 (June 2021), amended LR 49:38 (January 2022), LR 49:

Chapter 64. Innovative Assessments

Subchapter A. General Provisions

§6401. Introduction

A. The Innovative Assessment is a criterion-referenced testing program that is directly aligned with the state content standards for English Language Arts. The assessment is closely aligned to the LEAP 2025 English language arts assessments and measures how well students have mastered the state content standards using unit-based assessments. Test results are reported in terms of achievement levels and scale scores.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:24.4.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 49:

Subchapter B. Achievement Levels and Performance Standards

§6403. Achievement Levels

A. The Louisiana achievement levels are:

1. advanced;
2. mastery;
3. basic;
4. approaching basic; and
5. unsatisfactory.

B. Achievement Level Definitions. The definitions of the Louisiana achievement levels are consistent with the definitions of basic, proficient, and advanced in English language arts for NAEP.

1. *Advanced (Proficient)*—students performing at this level have exceeded college and career readiness expectations and are well prepared for the next level of studies in this content area.

2. *Mastery (Proficient)*—students performing at this level have met college and career readiness expectations and are prepared for the next level of studies in this content area.

3. *Basic*—students performing at this level have nearly met college and career readiness expectations and may need additional support to be fully prepared for the next level of studies in this content area.

4. *Approaching Basic*—students performing at this level have partially met college and career readiness expectations and will need much support to be prepared for the next level of studies in this content area.

Name of Assessment Program	Assessment Population	Administered
Kindergarten Screening		

Norm-Referenced Tests (NRTs)		

Criterion-Referenced Tests (CRTs)		

LEAP 2025	Civics	fall 2023-
Innovative Assessment	ELA grade 7	fall 2021-
Innovative Assessment	ELA grades 6, 7, 8	fall 2022-
Integrated NRT/CRT		

Special Population Assessments		

Louisiana Alternate Assessment-B (LAA-B) ["out-of-level" test]	Students with Individualized Education Programs (IEPs) who met eligibility criteria in grades 3-11.	spring 1999–spring 2003 (no longer administered)
English Language Proficiency Test (ELPT)	English Learners in grades K-12	spring 2018-
English Language Proficiency Test Connect (ELPT Connect)	English learners in grades K-12 who meet criteria for participation in alternate assessment	spring 2023-
English Language Development Assessment (ELDA)	Limited English Proficient (LEP) students in grades K-12	spring 2005-2017

5. *Unsatisfactory*—students performing at this level have not yet met the college and career readiness expectations and will need extensive support to be prepared for the next level of studies in this content area.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:24.4.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 49:

§6405. Performance Standards

A. Performance standards for Innovative assessment English language arts assessments are finalized in scale score form. The scale scores range between 650 and 850.

1. English Language Arts

English Language Arts						
Achievement Level	Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Grade 8
Advanced	810-850	790-850	799-850	790-850	785-850	794-850
Mastery	750-809	750-789	750-798	750-789	750-784	750-793
Basic	725-749					
Approaching Basic	700-724					
Unsatisfactory	650-699					

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:24.4.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 49:

Family Impact Statement

In accordance with section 953 and 974 of title 49 of the Louisiana Revised Statutes, there is hereby submitted a Family Impact Statement on rules proposed for adoption, repeal, or amendment. All Family Impact Statements will be kept on file in the state board office which has adopted, amended, or repealed rules in accordance with the applicable provisions of the law relating to public records.

1. Will the proposed Rule affect the stability of the family? No.
2. Will the proposed Rule affect the authority and rights of parents regarding the education and supervision of their children? No.
3. Will the proposed Rule affect the functioning of the family? No.
4. Will the proposed Rule affect family earnings and family budget? No.
5. Will the proposed Rule affect the behavior and personal responsibility of children? No.
6. Is the family or a local government able to perform the function as contained in the proposed Rule? Yes.

Poverty Impact Statement

In accordance with section 973 of title 49 of the Louisiana Revised Statutes, there is hereby submitted a Poverty Impact Statement on rules proposed for adoption, amendment, or repeal. All Poverty Impact Statements will be in writing and kept on file in the state agency which has adopted, amended, or repealed rules in accordance with the applicable provisions of the law relating to public records. For the purposes of this section, the word “poverty” means living at or below 100 percent of the federal poverty line.

1. Will the proposed Rule affect the household income, assets, and financial authority? No.

2. Will the proposed Rule affect early childhood development and preschool through postsecondary education development? No.

3. Will the proposed Rule affect employment and workforce development? No.

4. Will the proposed Rule affect taxes and tax credits? No.

5. Will the proposed Rule affect child and dependent care, housing, health care, nutrition, transportation, and utilities assistance? No.

Small Business Analysis

The impact of the proposed Rule on small businesses as defined in R.S. 49:965.6, the Regulatory Flexibility Act, has been considered. It is estimated that the proposed action is not expected to have a significant adverse impact on small businesses. The agency, consistent with health, safety, environmental, and economic welfare factors has considered and, where possible, utilized regulatory methods in the drafting of the proposed Rule that will accomplish the objectives of applicable statutes while minimizing the adverse impact of the proposed Rule on small businesses.

Provider Impact Statement

The proposed Rule should not have any known or foreseeable impact on providers as defined by HCR 170 of the 2014 Regular Legislative Session. In particular, there should be no known or foreseeable effect on:

1. the staffing level requirements or qualifications required to provide the same level of service;
2. the cost to the providers to provide the same level of service; or
3. the ability of the provider to provide the same level of service.

Public Comments

Interested persons may submit written comments via the U.S. Mail until noon, November 9, 2022, to Shan N. Davis, Executive Director, Board of Elementary and Secondary Education, Box 94064, Capitol Station, Baton Rouge, LA 70804-9064. Written comments may also be hand delivered to Shan Davis, Executive Director, Board of Elementary and Secondary Education, Suite 5-190, 1201 North Third Street, Baton Rouge, LA 70802 and must be date stamped by the BESE office on the date received. Public comments must be dated and include the original signature of the person submitting the comments.

Shan N. Davis
Executive Director

**FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES
RULE TITLE: Innovative Assessment Program**

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

There will be increased costs to the Department of Education (LDE) to implement the Innovative Assessment Program (IAP) for grades 6-8. While the cost of implementing the IAP for these grade levels is indeterminable, the total cost of implementing the IAP for grades 3-8 is expected to be \$4.4 M in FY23. Costs in subsequent years are indeterminable.

The proposed revisions implement the IAP for grades 6-8. The IAP provides an alternative approach to measuring how

well students know and understand the Louisiana English Language Arts content standards. The IAP has been piloted since the 2018-19 school year and was developed through the use of philanthropic funding. In June 2021, the Board of Elementary and Secondary Education (BESE) approved a contract for \$2.7 M with NWEA to expand IAP content to grades 3-5. In October, the LDE will present to BESE an amendment to this contract which increases the scope of services, including content development for the grades 6-8 assessments. Under the amended contract, the total payment in FY 23 will be \$4.4 M.

The original contract for grades 3-5 is funded through the federal Competitive Grant for State Assessments. The LDE reports it will supplement the amended contract with Elementary and Secondary School Emergency Relief (ESSER) and Individuals with Disabilities Act (IDEA) funding. Funding sources beyond FY 23 are indeterminable, and may include SGF or 8(g) program funding.

The revisions also implement the new English Language Proficiency Test (ELPT) Connect, an alternate assessment created for English learners with significant cognitive disabilities. The cost of developing the new English Language Proficiency Test (ELPT) Connect assessment is included within the LDE's English Language Proficiency Assessment for the 21st Century (ELPA21) membership. The total cost of membership in the ELPA21 assessment system is approximately \$1.4 M per year and includes all of the English Learner Assessments used by the state. Title I Part B funds are used to pay for this membership.

There may also be increased workload to local school districts to implement the new assessments; however, any associated costs are indeterminable.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

The proposed revisions will not have an effect on revenue collections of state or local governmental units.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

The proposed revisions will not result in costs and/or benefits to directly affected persons, small businesses, or nongovernmental groups.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

The proposed revisions will not have an effect on competition and employment.

Beth Scioneaux
Deputy Superintendent
2212#023

Alan M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

NOTICE OF INTENT

Office of the Governor

Board of Certified Public Accountants of Louisiana

Certified Public Accountants

(LAC 46:XIX.101, 319, 501, 703, 705, 903, 1105, 1107, 1301, 1501, 1700, 1703, 1707, 1901, 1909 and 2301)

Notice is hereby given that in accordance with the Administrative Procedure Act, R.S. 49:950 et seq., and pursuant to the authority vested in the Board of Certified Public Accountants of Louisiana (Board) by the Louisiana Accountancy Act, R.S. 37:71 et seq., the board intends to amend its rules in order to: add a definition for "signature"

to electronic and digital signatures (§101); remove an outdated newspaper advertisement requirement for a lost certificate (§319B.1); eliminate specific names of regional accreditation bodies to accommodate name changes and flexibility to approve new entities that may be relevant in the future (§501); update educational requirements by allowing nine hours of accounting course electives to be less restrictive and replacing the "commercial law" requirement with "business law" to better capture the focus of the new CPA Exam (§503.A.), align the educational requirements with changes to the 2024 CPA Exam (§503.A.1); allow nine (up from six) semester hours of internship/independent study to be applied to the education requirements (§503A.1.k.3); remove "correspondence" courses since they can be done "online" and include "college" for clarification (§503.D); remove the term "testing window," which is no longer applicable (§505F.1.b.i-ii.); eliminate specific names of foreign credentialing service providers as names change and/or new service providers are created (§703.C); clarify that original or certified documents are only required for CPA Exam applications (§705); broaden the scope of complexity and diversity experience for applicants in academia by including course development and more subject areas [§903A.2.a.i.(a)]; provide for on-line applications and remove time limits on application submissions (§1105A.1); include the responsibility to notify the board of a change in email address (§1107.A); allow for continuing professional education (CPE) reciprocity for Louisiana CPAs licensed in multiple states, as is done by 36 other states (§1301.B); eliminate an outdated CPE reporting cycle (§1301E.2); update the CPE compliance period and remove outdated information (§1301F.1.-2); include responsibility of CPA firms to notify the board of changes to the number or locations of offices, partners, members, a point of contact change or action against a firm permit in another state (§1501C.2); clarify the term "Professional Services" by providing examples (§1700.B); remove unnecessary language and instead refer to compliance with current standards listed in .1703A. (§1703.C); replace "CPA" with "licensee" to clearly differentiate an actively licensed CPA and inactive or retired CPA (§1707A.1); edit the wording of "affiliated entities" to better clarify the purpose and intent (§1707A.2); clarify that the designations "CPA-Inactive" and/or "CPA-Retired" cannot be used in connection with performing or offering to perform professional accounting services to the public (§1707B.2.b); clarify that a CPA firm name is not misleading if it includes the name of a former partner, member or shareholder (§1707C.3.b); clarify responsibility of any individual holding a Louisiana certificate and/or who practices in Louisiana via substantial equivalency to cooperate with a board investigation (§1707.F); require certificate holders and applicants to notify the board within 30 days of action against their license or firm permit by another state (§1707.G); relocate the last sentence from §1901.A to §1901.C; include for ease of investigative administration the presence of publically available information suggestive of a possible violation of the Act and/or board rules (§1901.C); and remove "within 30 days" to provide more flexibility in decisions (§1909V.). The proposed amendments also add new Chapter 23 and Section

2301, respecting declaratory orders and rulings for compliance with R.S. 49:962 §2301. The proposed changes are set forth below.

**Title 46
PROFESSIONAL AND OCCUPATIONAL
STANDARDS**

Part XIX. Certified Public Accountants

Chapter 1. General Provisions

§101. Definition of Terms Used in the Rules

A. ...

* * *

Signature—a mark or sign made by an individual on an instrument or document to signify knowledge, approval, acceptance, or obligation. Acceptable forms of signature include written (or wet), electronic (E-signature), and digital signatures.

B. - C. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:71 et seq.

HISTORICAL NOTE: Adopted by the Department of Commerce, Board of Certified Public Accountants, January 1974, promulgated LR 6:1 (January 1980), amended LR 11:757 (August 1985), amended by the Department of Economic Development, Board of Certified Public Accountants, LR 23:1112 (September 1997), LR 26:1966 (September 2000), amended by the Office of the Governor, Board of Certified Public Accountants, LR 49:

Chapter 3. Operating Procedures

§319. Assessment of Application, Annual and Other

Fees

A. - B. ...

1. In the event of a certificate which has been lost, the request for replacement must be accompanied by a sworn statement that the certificate is lost.

B.2. - C. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:71 et seq.

HISTORICAL NOTE: Adopted by the Department of Commerce, Board of Certified Public Accountants, January 1974, promulgated LR 6:8 (January 1980), amended LR 9:209 (April 1983), LR 11:758 (August 1985), LR 13:13 (January 1987), LR 15:619 (August 1989), amended by the Department of Economic Development, Board of Certified Public Accountants, LR 17:1070 (November 1991), LR 23:1124 (September 1997), LR 26:1968 (September 2000), amended by the Office of the Governor, Board of Certified Public Accountants, LR 28:1013 (May 2002), LR 31:1330 (June 2005), LR 43:1899 (October 2017), LR 49:

Chapter 5. Qualifications; Education and Examination

§501. Definition

Accredited University or College—a university or college accredited by any one of the six regional accreditation associations and any other accrediting organization recognized by the board.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:71 et seq.

HISTORICAL NOTE: Promulgated by the Department of Economic Development, Board of Certified Public Accountants, LR 23:1119 (September 1997), amended LR 26:1969 (September 2000), Office of the Governor, Board of Certified Public Accountants, LR 43:1900 (October 2017), LR 49:

§503. Educational Requirements

A. ...

	Undergraduate Semester Hours	Graduate Semester Hours
Accounting Courses		
* * *		
Accounting Electives: above the basic and beyond the elementary level	9	9
* * *		
	Undergraduate Semester Hours	Graduate Semester Hours
Business Courses (other than Accounting Courses)	24	24
Including at least 3 semester hours in Business Law		
* * *		

1. The board will accept for business course credit semester hours earned in courses offered through the institution's College of Business and reported on official transcripts in the following areas:

- a. business commercial law;
- b. - d. ...
- e. business communications including technical writing;
- f. - g. ...
- h. information technology systems;
- i.
- j. data analytics (college of business or any other college);
- k. other business-related content areas included in the Uniform CPA Examination Blueprints or as may be approved by the board.

1.l. - 2. ...

3. Up to nine semester hours for internship and independent study may be applied to the education requirement. However, of the nine hours, a maximum of three semester hours may apply to the accounting courses, three semester hours toward the required business courses, and three semester hours toward the general education requirement.

A.4. - C. ...

D. With respect to courses required for the degree, other than those specified by §503.A, the board does recognize credit received for courses granted on the basis of advanced placement examinations (such as CLEP, ACT or similar examinations). Except for online courses at an accredited university or college approved by the board, the accounting and business course credits specifically listed in §503.A shall have been awarded pursuant to satisfactory completion of a course requiring personal attendance at classes in such course.

E. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:71 et seq.

HISTORICAL NOTE: Adopted by the Department of Commerce, Board of Certified Public Accountants, January 1974, promulgated LR 6:6 (January 1980), amended LR 11:757 (August

1985), LR 13:13 (January 1987), amended by the Department of Economic Development, Board of Certified Public Accountants, LR 15:616 (August 1989), LR 17:1072 (November 1991), LR 23:1120 (September 1997), LR 26:1969 (September 2000), amended by the Office of the Governor, Board of Certified Public Accountants, LR 43:1900 (October 2017), LR 49:

§505. Examination

A. - F.1.a. ...

b.i. - ii. Repealed.

b. In the event all test sections of the examination are not passed within a given rolling qualifying period, credit for any test section(s) passed outside that qualifying period will expire and that test section(s) must be retaken.

F.2. - H. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:71 et seq.

HISTORICAL NOTE: Adopted by the Department of Commerce, Board of Certified Public Accountants, January 1974, promulgated LR 6:6 (January 1980), amended LR 9:208 (April 1983), LR 12:88 (February 1986), amended by the Department of Economic Development, Board of Certified Public Accountants, LR 17:1068 (November 1991), LR 23:1119 (September 1997), LR 26:1970 (September 2000), amended by the Office of the Governor, Board of Certified Public Accountants, LR 29:1475 (August 2003), LR 32:2248 (December 2006), LR 43:1901 (October 2017), LR 46:338 (March 2020), LR 49:

Chapter 7. Qualifications; Application for CPA Examination

§703. Examination Application

A. - B. ...

C. Candidates or applicants who have completed educational requirements at institutions outside the U.S. must have their credentials evaluated by a board recognized evaluation service provider.

D. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:71 et seq.

HISTORICAL NOTE: Adopted by the Department of Commerce, Board of Certified Public Accountants, January 1974, promulgated and amended LR 6:8 (January 1980), amended by the Department of Economic Development, Board of Certified Public Accountants, LR 23:1122 (September 1997), LR 26:1971 (September 2000), amended by the Office of the Governor, Board of Certified Public Accountants, LR 29:1478 (August 2003), LR 43:1902 (October 2017), LR 49:

§705. Originals or Certified Copies Required

A. As it applies to this Chapter, all documents required to be submitted must be the original or certified copies thereof. For good cause shown, the board may waive or modify this requirement.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:71 et seq.

HISTORICAL NOTE: Adopted by the Department of Commerce, Board of Certified Public Accountants, January 1974, promulgated LR 6:8 (January 1980), amended by the Department of Economic Development, Board of Certified Public Accountants, LR 26:1971 (September 2000), amended by the Office of the Governor, Board of Certified Public Accountants, LR 49:

Chapter 9. Qualifications for Initial Certificate

§903. Qualifying Experience

A. - A.2.a.i. ...

(a) the applicant shall have developed and or taught more than one academic course required to sit for the CPA exam;

A.2.a.i.(b). - C.2. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:71 et seq.

HISTORICAL NOTE: Adopted by the Department of Commerce, Board of Certified Public Accountants, January 1974, promulgated LR 4:223 (June 1978), amended LR 6:7 (January 1980), LR 9:208 (April 1983), amended by the Department of Economic Development, Board of Certified Public Accountants, LR 15:617 (August 1989), LR 23:1122 (September 1997), LR 26:1972 (September 2000), amended by the Office of the Governor, Board of Certified Public Accountants, LR 43:1903 (October 2017), LR 49:

Chapter 11. Issuance and Renewal of Certificate; Reinstatement

§1105. Certificate Application, Annual Renewals, Inactive or Retired Registration, Reinstatement, Practice Privileges under Substantial Equivalency

A. Applications

1. Applications for initial or reciprocal certificates pursuant to R.S. 37:76.F shall be made online via the Internet or on forms that may be furnished by the board, and shall be accompanied by application fees fixed by the board pursuant to §319. The forms shall contain all of the items and information requested in the appropriate space in order to be acceptable.

A.2. - E.4.b.ii. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:71 et seq.

HISTORICAL NOTE: Adopted by the Department of Commerce, Board of Certified Public Accountants, January 1974, promulgated LR 6:9 (January 1980), amended LR 9:208 (April 1983), LR 11:758 (August 1985), amended by the Department of Economic Development, Board of Certified Public Accountants, LR 17:1070 (November 1991), LR 23:1124 (September 1997), LR 26:1974 (September 2000), amended by the Office of the Governor, Board of Certified Public Accountants, LR 32:2249 (December 2006), LR 33:2634 (December 2007), LR 34:2398 (November 2008), LR 43:1904 (October 2017), LR 49:

§1107. Change in Address or Practice Status

A. All certified public accountants, individuals registered in inactive or retired status, and individuals who have the privilege to practice under substantial equivalency shall be responsible for keeping the board informed of their current mailing address, email address, and practice status, and shall notify the board in writing of any changes within 30 days.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:71 et seq.

HISTORICAL NOTE: Adopted by the Department of Commerce, Board of Certified Public Accountants, January 1974, promulgated LR 6:8 (January 1980), amended by the Department of Economic Development, Board of Certified Public Accountants, LR 23:1125 (September 1997), LR 26:1976 (September 2000), amended by the Office of the Governor, Board of Certified Public Accountants, LR 43:1905 (October 2017), LR 49:

Chapter 13. Maintenance of Competency; Continuing Professional Education (CPE)

§1301. Basic Requirements

A. - A.5. ...

B. Exemption

1. The board may grant an exemption from CPE in accordance with R.S. 37:76(D)(2). In order to be granted an exemption, the certificate holder must register in inactive or retired status and follow the provisions of §1707.B.

2. CPE Reciprocity. A non-resident licensee seeking renewal of a certificate in this state shall be determined to have met the CPE requirement of this rule by meeting the CPE requirements for renewal of a certificate in the state in which the licensee's principal place of business is located.

a. Non-resident applicants for renewal shall demonstrate compliance with the CPE renewal requirements of the state in which the licensee's principal place of business is located by signing a statement to that effect on the renewal application of this state.

b. If a non-resident licensee's principal place of business state has no CPE requirements for renewal of a certificate, the non-resident licensee must comply with all CPE requirements for renewal of a certificate in this state.

c. However, in the years that this board has a professional ethics requirement, if the non-resident licensee's principal place of business state did not have a professional ethics requirement, they shall be required to complete the professional ethics requirements for Louisiana.

C. - E.1. ...

2. - 2.c. Repealed.

F. Compliance Period

1. The compliance period for continuing professional education is defined as a rolling two-year period ending on December 31 of each year (i.e. two-year period ending on December 31, 2018 including years 2017 and 2018, then two-year period ending on December 31, 2019 including years 2018 and 2019, and so forth.)

2. Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:71 et seq.

HISTORICAL NOTE: Promulgated by the Department of Commerce, Board of Certified Public Accountants, LR 6:4 (January 1980), amended LR 9:208 (April 1983), amended by the Department of Economic Development, Board of Certified Public Accountants, LR 15:614 (August 1989), LR 23:1116 (September 1997), LR 26:1976 (September 2000), amended by the Office of the Governor, Board of Certified Public Accountants, LR 32:2249 (December 2006), LR 41:1664 (September 2015), LR 43:1905 (October 2017), LR 49:

Chapter 15. Firm Permits to Practice; Attest Experience; Peer Review

§1501. CPA Firm Permits; Attest Experience; Application, Renewal, Reinstatement; Internet Practice

A. - C.1. ...

2. A firm registered pursuant to R.S. 37:77 shall file with the board a written notification of any of the following events concerning the practice of public accountancy within this state within 30 days after its occurrence:

a. - b. ...

c. addition of a new or change in the identities of the firm's partners, officers, members, managers or shareholders, whose principal place of business is in this state;

d. - e. ...

f. any change in the number or location of offices within the state;

g. any change in the identity of those persons in charge of any offices within the state e.g., the designated point of contact for the office, manager of the office, etc.;

h. any denial, revocation, or suspension of a permit by any other state;

i. the occurrence of any event or events which would cause such firm not to be in conformity with the provisions of the Act or any rules or regulations adopted by the board.

C.3. - F. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:71 et seq.

HISTORICAL NOTE: Adopted by the Department of Commerce, Board of Certified Public Accountants, January 1974, promulgated LR 3:308 (July 1997), amended LR 6:9 (January 1980), amended LR 9:209 (April 1983), amended by the Department of Economic Development, Board of Certified Public Accountants, LR 17:1070 (November 1991), LR 23:1124 (September 1997), LR 26:1980 (September 2000), amended by the Office of the Governor, Board of Certified Public Accountants, LR 32:2249 (December 2006), LR 33:2634 (December 2007), LR 34:2399 (November 2008), LR 43:1905 (October 2017), LR 49:

Chapter 17. Rules of Professional Conduct

§1700. General

A. - A.5. ...

B. Definition. The following term has meaning which is specific to §1700-1707.

Professional Services—services arising out of or related to the specialized knowledge or skills associated with certified public accountants e.g. matters of accounting and financial reporting, tax, finance, investment advice or financial planning, management, or consultation.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:71 et seq.

HISTORICAL NOTE: Promulgated by the Department of Commerce, Board of Certified Public Accountants, LR 6:2 (January 1980), amended by the Department of Economic Development, Board of Certified Public Accountants, LR 23:1113 (September 1997), LR 26:1982 (September 2000), amended by the Office of the Governor, Board of Certified Public Accountants, LR 32:2249 (December 2006), LR 43:1907 (October 2017), LR 49:

§1703. Competence and Professional Standards

A. ...

* * *

B. ...

C. Professional Standards. Licensees shall comply with all applicable professional standards, including but not limited to those listed in §1703A.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:71 et seq.

HISTORICAL NOTE: Promulgated by the Department of Commerce, Board of Certified Public Accountants, LR 6:2 (January 1980), amended by the Department of Economic Development, Board of Certified Public Accountants, LR 23:1115 (September 1997), LR 26:1984 (September 2000), amended by the Office of the Governor, Board of Certified Public Accountants, LR 32:2251 (December 2006), LR 49:

§1707. Other Responsibilities and Practices

A. Acting through Others

1. A CPA licensee or CPA firm shall not permit others to carry out on his behalf or on the firm's behalf, either with or without compensation, acts which, if carried out by the licensee or CPA firm, would place him or the CPA firm in violation of the rules of professional conduct, professional standards, or any provisions of the Act.

2. Acting through an affiliated entity.

a. Definition

i. Affiliated Entity. Affiliated entities for purpose of this rule refers to entities which share elements of ownership structure with a CPA firm and which offer to

clients, or the public, professional services or products related to the skills associated with CPAs. Conversely, entities that offer services or products that do not relate to matters of accounting and financial reporting, tax, finance, investment advice or financial planning, management, or consultation are excluded.

ii. Similar Name. A similar name is one that contains one or more names, or initials of the names, or reference to that/those names that are included in a CPA firm applying for or currently holding a firm permit.

b. On and after January 1, 2008, a CPA firm shall not affiliate with an entity that has a similar name unless:

i. the affiliated entity is owned in accordance with §1707.A.2.d.i; or

ii. has been issued a firm permit by the board pursuant to §1707.A.2.d.ii; or

iii. the CPA firm has entered into a written agreement with the board pursuant to §1707.A.2.d.ii.

c. ...

d. Repealed.

e. depending on the ownership structure, an affiliated entity may be required to obtain a firm permit in order to use a similar name which indicates that the CPA or CPA firm is providing services through the affiliated entity.

i. - iii. ...

f. under R.S. 37:77(C), a majority of the ownership of a CPA firm (in terms of financial interests and voting rights of all partners, officers, shareholder, members, or managers) must belong to holders of valid licenses. Thus an unlicensed "holding company" cannot own a majority or 100 percent of a CPA firm. Therefore, such a "holding company" would have to apply for a CPA firm permit and qualify as such. The holding company and the CPA firm must both be registered as firms with the board even though the holding company will not directly offer services to clients. If the holding company does not otherwise meet the requirements to be licensed (e.g., the requirements that a majority ownership interest is held by licensees; the owners must be active in the firm or affiliates; and, the name must not be misleading) then such a firm structure would not be permissible.

B. Use of the "CPA Inactive" or "CPA Retired" Designation

1. Certificate only holders under prior law.

a. Prior to applying for and obtaining a certificate under R.S. 37:75.I, individuals who annually register in inactive status may use the "CPA inactive" designation in connection with an employment position held in industry, government or academia, or in personal correspondence.

b. Any such individual who offers to perform or performs, for the public, professional services of any type involving the use of accounting, management advisory, financial advisory, tax, or consulting skills shall not use the designation CPA or "CPA inactive" in connection therewith or in any other manner or in connection with any employment.

2. Certificate Holders Subject to CPE Exemption

a. ...

b. Any individual referenced in R.S. 37:76(D)(2) who after being granted an exemption under that Section offers to perform or performs for the public professional services of any type involving the use of accounting, management advisory, financial advisory, tax, or consulting skills shall no longer qualify for the use of the designation and shall immediately cease all uses of the designation "CPA inactive" or "CPA-retired" in connection therewith or in any other manner or in connection with any employment or on any letterhead, business card, email signature, etc.

c. ...

C. Firm Name

1. - 2. ...

3. A CPA firm name is misleading within the meaning of R.S. 37:83(G) if, among other things:

a. ...

b. the CPA firm name includes the name of a person who is not a CPA and is not a past partner, shareholder, or member of the firm.

C.4. - E. ...

F. Cooperation with Board Inquiry or Investigation. A certificate holder, or CPA licensed in another state who has provided professional services to Louisiana clients, or CPA licensed in another state who may be granted rights under the substantial equivalency provisions of R.S. 37:94, shall fully cooperate with the board in connection with any inquiry or investigation made by the board. Full cooperation includes, but is not limited to, fully responding in a timely manner to all inquiries of the board or representatives of the board and claiming board correspondence from the U.S. Postal Service and from other delivery services used by the board.

G. Denial, Suspension, or Revocation by another state. Pursuant to R.S. 37:76 (F), each holder of or applicant for a certificate shall notify the board in writing within 30 days after the occurrence of any denial, revocation, or suspension of a certificate, license or permit by another state.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:71 et seq.

HISTORICAL NOTE: Promulgated by the Department of Commerce, Board of Certified Public Accountants, LR 3:308 (July 1977), amended 4:358 (October 1978), LR 6:3 (January 1980), LR 9:207 (April 1983), amended by the Department of Economic Development, Board of Certified Public Accountants, LR 17:1068 (November 1991), LR 23:1115 (September 1997), LR 26:1985 (September 2000), amended by the Office of the Governor, Board of Certified Public Accountants, LR 32:2252 (December 2006), LR 43:1908 (October 2017), LR 49:

Chapter 19. Investigations; Hearings; Suspension, Revocations or Restrictions; Reinstatements

§1901. Charges in Writing; Investigative Files

A. Charges against holders of CPA certificates, practice privileges, and/or firm permits shall be made in writing, signed by the persons preferring the charges and addressed or delivered to the board. The board's investigative staff may establish or open an investigative file upon receipt of such charges.

B. ...

C. The board's staff may establish or open an investigative file:

1. upon receipt of written charges as described in §1901.A; or

2. at the written direction of any member of the board or other person who has been designated as investigating officer in accordance with §1903; or

3. upon receipt of other publicly available information which is suggestive of any potential violations of the rules, regulations, or statutes which the board is authorized to enforce. The source of such other information must be identified in the file.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:71 et seq.

HISTORICAL NOTE: Adopted by the Department of Commerce, Board of Certified Public Accountants, January 1974, promulgated LR 6:9 (January 1980), amended by the Department of Economic Development, Board of Certified Public Accountants, LR 23:1126 (September 1997), LR 26:1987 (September 2000), amended by the Office of the Governor, Board of Certified Public Accountants, LR 33:2636 (December 2007), LR 49:

§1909. Hearing

A. - U. ...

V. Any licensee whose certificate, practice privilege, or firm permit issued by the board is subsequently suspended or revoked may be required to return such certificate, registration or firm permit.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:71 et seq.

HISTORICAL NOTE: Adopted by the Department of Commerce, Board of Certified Public Accountants, January 1974, promulgated LR 6:9 (January 1980), amended by the Department of Economic Development, Board of Certified Public Accountants, LR 23:1126 (September 1997), LR 26:1988 (September 2000), amended by the Office of the Governor, Board of Certified Public Accountants, LR 33:2636 (December 2007), LR 43:1909 (October 2017), LR 49:

Chapter 23. Declaratory Orders and Rulings

§2301. Petitions; Orders and Rulings

A. As authorized by R.S. §49:977.4, the board may hear and decide petitions for declaratory orders and rulings as to the applicability of any statutory authority or of any rule or order of the board. The petition shall contain sufficient information to enable the board to act thereupon, and the board may request additional information and facts. The board shall issue its order or ruling as expeditiously as possible after deliberate consideration of the issues involved and the interests affected. Such orders and rulings shall have the same status as board decisions or orders in adjudicated cases.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:71 et seq. and 49:977.4.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Board of Certified Public Accountants, LR 49:

Family Impact Statement

In compliance with Act 1183 of the 1999 Regular Session of the Louisiana Legislature, the impact of the proposed amendments on the family has been considered. It is not anticipated that the proposed amendments will have an adverse impact on family, formation, stability or autonomy, as described in R.S. 49:972.

Poverty Statement

In compliance with Act 854 of the 2012 Regular Session of the Louisiana Legislature, the impact of the proposed amendments on those that may be living at or below one

hundred percent of the federal poverty line has been considered. It is not anticipated that the proposed amendments will have any impact on child, individual or family poverty in relation to individual or community asset development, as described in R.S. 49:973.

Small Business Analysis

In compliance with the Small Business Protection Act, the economic impact of the proposed amendments has been considered. It is not anticipated that the proposed amendments will have any adverse impact on small businesses, as defined in R.S. 49:978.1 et seq.

Provider Statement

In compliance with HCR 170 of the 2014 Regular Session of the Louisiana Legislature, the impact of the proposed amendments on organizations that provide services for individuals with developmental disabilities has been considered. It is not anticipated that the proposed amendments will have any impact on the staffing, costs or overall ability of such organizations to provide the same level of services, as described in HCR 170.

Public Comments

Interested persons may submit written data, views, arguments, information or comments on the proposed amendments to Lisa A. Benefield, Executive Director, Board of Certified Public Accountants of Louisiana, 601 Poydras Street, Suite 1770, New Orleans, Louisiana, 70130. She is responsible for responding to inquiries. Written comments will be accepted until 4 p.m., January 20, 2023.

Public Hearing

A request pursuant to R.S. 49:953(A)(2) for a public hearing must be made in writing and received by the Board within 20 days of the date of this notice. If a public hearing is requested to provide data, views, arguments, information or comments in accordance with the requirements of R.S. 49:953A.(2)(a) of the Louisiana Administrative Procedure Act, the hearing will be held on January 26, 2023, at 9 a.m. at the office of the State Board of Certified Public Accountants of Louisiana, 601 Poydras Street, Suite 1770, New Orleans, Louisiana 70130. Any interested person wishing to attend should call 504-566-1244, in advance to confirm that a hearing is being held.

Lisa A. Benefield
Executive Director

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES

RULE TITLE: Certified Public Accountants

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

The State Board of Certified Public Accountants of Louisiana (Board) does not anticipate incurring any expenses due to the proposed rule amendments, other than one-time costs for notice and rule publication estimated at \$2,982 in FY 2023.

The proposed changes to the Board's rules, LAC 46:XIX: (i) provide for electronic and digital signatures, processing lost certificates, flexibility respecting approved credentialing services and on-line applications, (101, 319B.1., 703C., 1105A.1); (ii) update definitions and provide greater flexibility to individuals fulfilling education requirements and continuing professional education (501, 503A., 903A.2.a.i.(a)., 1301B.); (iii) remove outdated requirements that are no longer applicable or have been replaced (505F.1.b.i-ii., 1301.E.2., 1301F.1.-2.);

(iv) update and clarify a number of existing rules to promote compliance (503D., 705, 1700B., 1703C., 1707A.1.-A.2., 1707B.2.b., 1707C.3.b., 1707F.); (v) address the need to update contact and other information (1107A., 1501C.2., 1707G.); (vi) facilitate investigation of publically available information suggestive of a possible violation of the Act or rules (1901A., 1901.C.); remove “within thirty days” to provide the Board more flexibility in decisions (1909V.); and (vii) provide for declaratory orders (2301).

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

There is no anticipated effect on the revenue collections for the Board or any other state or local governmental unit resulting from implementation of the proposed rule amendments.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

The proposed rule amendments include a number of changes, clarifications, deletions and additions, some of which could provide an indeterminable benefit or cost-savings to licensees and applicants. Among other items: providing for digital and electronic signatures may result in cost savings for the Board and CPAs respecting the execution and transmittal of various documents; the changes to the educational requirements may better prepare applicants for the new CPA Exam starting in 2024; allowing non-resident Louisiana licensed CPAs to meet this state’s continuing professional renewal requirement by satisfying those of the state in which the licensee primarily practices, may avoid the need to expend the time or cost to obtain additional CPE; and allowing on-line applications and removing the time limits on application submissions for initial and reciprocal applications could increase efficiency and result in a savings of time and cost.

The Board is not in a position to estimate the extent or amount of any such benefit or cost savings to directly affected persons, small businesses or non-governmental groups.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

The proposed rule amendments will have no impact on competition or employment in either the public or private sector.

Lisa A. Benefield
Executive Director
2212#039

Alan M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

NOTICE OF INTENT

**Office of the Governor
Commission on Law Enforcement and
Administration of Criminal Justice**

Peace Officer Training (LAC 22:III.4761)

In accordance with the provision of R.S. 40:2401, et seq., the Peace Officer Standards and Training Act, and R.S. 40:905 et seq., which is the Administrative Procedure Act, the Peace Officer Standards and Training Council hereby gives notice of its intent to promulgate rules and regulations relative to certification requirements for human trafficking training.

**Title 22
CORRECTIONS, CRIMINAL JUSTICE AND LAW
ENFORCEMENT**

**Part III. Commission on Law Enforcement and
Administration of Criminal Justice
Subpart 4. Peace Officers**

Chapter 47. Standards and Training

§4761. Advanced Training

A. - E.2.c.iv. ...

F. Human Trafficking Training

1. Within one year of employment, all Level 1 and Level 2 peace officers, as defined in R.S. 40:2402, shall complete seven hours of training on human trafficking from the POST learning management system (LMS) pursuant to R.S. 40:2405.7(D) and (E).

AUTHORITY NOTE: Promulgated in accordance with R.S. 15:1204 and R.S. 15:1207.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Commission on Law Enforcement and Administration of Criminal Justice, LR 42:274 (February 2016), amended by the Office of the Governor, Commission on Law Enforcement, LR43:316 (February 2017), LR 44:1009 (June 2018), LR 48:298 (February 2022), LR 48:1276, (May 2022), LR 49:

Family Impact Statement

In compliance with Act 1183 of the 1999 Regular Session of the Louisiana Legislature, the impact of this proposed rule has been considered. This proposed Rule will have no impact on family functioning, stability, or autonomy as described in R.S. 49:972 since it outlines the training requirements for all Level 1 and Level 2 peace officers on human trafficking.

Poverty Impact Statement

The proposed Rule should not have any known or foreseeable impact on any child, individual or family as defined by R.S. 49:973.B. In particular, there should be no known or foreseeable effect on:

1. on household income, assets, and financial security;
2. on early childhood development and preschool through postsecondary education development,
3. on employment and workforce development;
4. on taxes and tax credits;
5. on child and dependent care, housing, health care, nutrition, transportation, and utilities assistance.

Small Business Analysis

In compliance with Act 820 of the 2008 Regular Session of the Louisiana Legislature, the economic impact of this proposed Rule on small businesses has been considered. It is anticipated that this proposed Rule will have no impact on small businesses, as described in R.S. 49:978.1 et seq.

Provider Impact Statement

The proposed Rule should not have any known or foreseeable impact on providers as defined by HCR 170 of 2014 Regular Legislative Session. In particular, there should be no known or foreseeable effect on:

1. the staffing level requirements or qualifications required to provide the same level of service;
2. the cost to the providers to provide the same level of service; or

3. the ability of the provider to the same level of service.

Public Comments

Interested persons may submit written comments on this proposed Rule no later than December 6, 2022 at 5 p.m. to Bob Wertz, Peace Officer Standards and Training Council, Louisiana Commission on Law Enforcement, Box 3133 Baton Rouge, LA 70821. An analysis of the proposed Rule shows that it will have no impact on the family as described in R.S. 49.972, nor any impact on small business as defined by Act 820 of 2008.

Mr. Jim Craft
Executive Director

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES RULE TITLE: Peace Officer Training

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

The proposed rule changes may result in expenditure increases for certain local governmental units for requiring each full-time peace officer to complete seven training modules on human trafficking (Title 22, Part III. Subpart 4. §4761.AdvancedTraining).

The proposed rule for human trafficking training is not anticipated to have any additional fiscal impact. Approximately 23,000 full-time certified peace officers would be affected by the mandatory training. Currently, the training modules are available on the POST online training system (at no cost); therefore, there is no other anticipated fiscal impact to complete the training except for the additional modules.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

The proposed rule will not increase revenue collections of state or local governmental units.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

There are no estimated costs and/or economic benefits to directly attended persons or non-governmental groups.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

There is no effect on competition or employment in the public or private sector as a result of this proposed amendment.

Mr. Jim Craft
Executive Director
2212#024

Alan M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

NOTICE OF INTENT

Office of the Governor Division of Administration Racing Commission

Associations' Duties and Obligations
(LAC 35:III.Chapter 57)

In accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq., and through the authority granted in R.S. 4:148, notice is hereby given that the Racing Commission proposes to amend and adopt the Sections listed below under LAC 35:III.Chapter 57. This action has been deemed necessary by the Racing Commission to

prevent imminent peril to the public health, safety, and welfare by establishing the administrative rules for minimum standards of facilities and infrastructure investments for racetracks in fulfillment of the Legislature's mandate to the Racing Commission "to encourage forceful and honest statewide control of horse racing for the public health, safety, and welfare by safeguarding the people of this state against corrupt, incompetent, dishonest and unprincipled horse racing practices" and "[t]o institute and maintain a program to encourage and permit development of the business of horse racing with pari-mutual wagering thereon on a higher plane." R.S. 4:141(A) and (A)(1).

All in fulfillment of the Legislature's mandate for the Racing Commission to "institute and maintain a regulatory program for the business of racing horses, which program assures the protection of public health, safety and welfare, vesting with the commission forceful statewide control of horse racing with full powers to prescribe rules and regulations and conditions under which all horse racing is conducted with wagering upon the result thereof with the state." R.S. 4:141(A)(3).

The proposed amendments establish the initial administrative Rule for minimum standards of facilities and infrastructure investments for racetracks in accordance with the provisions established in Act 530 of the 2022 Regular Session of the Louisiana Legislature.

Title 35

HORSE RACING

Part III. Personnel, Registration and Licensing Chapter 57. Associations' Duties and Obligations

§5705. Security of Racetrack Premises

A. The stable area of the premises of every association shall be enclosed with a fence, the type and construction of the fence to be subject to the approval of the commission. The association shall maintain a 24-hour guard at any opening of the fence during the horse race meeting.

B. An association must maintain adequate staffing of security officers on backside to:

1. patrol the backside;
2. check every vehicle coming into the backside for commission-granted licenses; and
3. check every horse trailer for the names of horses entering and exiting the backside.

C. An association must provide security guards to be present in the jockeys' room during live racing.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:148 and R.S. 4:164.

HISTORICAL NOTE: Adopted by the Racing Commission in 1971, promulgated by the Department of Commerce, Racing Commission, LR 2:434 (December 1976), amended LR 3:30 (January 1977), LR 4:277 (August 1978), amended by the Office of the Governor, Division of Administration, Racing Commission LR 49:

§5706. Barns on Backside of Racetrack

A. An association shall ensure that all barns are kept in good repair and are kept clean by the licensed occupants.

1. Barn buildings, fences, bathrooms, and outdoor and indoor lighting shall be kept in good working order.

2. Each barn, including the receiving barn, must have a hot and cold water supply available and have ventilation proper for the housing of horses.

B. Any new barns, additions, or expansions built by a licensed association after the amendment of this Rule shall

ensure that the individual box stall shall have a minimum dimensions of 12 feet by 12 feet and if constructed of concrete walls, they must be woodlined on the interior up a minimum of 4 feet from the ground or otherwise be insulated for the protection of the stabled horse.

C. An association shall provide an adequate area for the placement of manure removed from the stalls. All manure storage and removal shall be conducted in compliance with the rules and regulations set forth by the Department of Environmental Quality. Nothing in the Rule is to supersede any requirements set forth by the Department of Environmental Quality.

D. An association must provide the minimum number of total stalls, as specified by the commission by majority vote, on its backside in good, working condition to house horses for their assigned racing dates.

E. The commission shall send a representative to each racetrack annually to assure that upkeep of all barns, both exterior and interior, is maintained. This shall include, but not be limited to, upkeep of:

1. stalls;
2. restroom facilities;
3. tack rooms;
4. feed rooms;
5. living quarters;
6. horse paths;
7. walking wheels; and
8. exterior barn paint.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:148 and R.S. 4:164.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 44:913 (May 2018), amended LR 49:

§5740. Backside Internet Access

A. An association shall provide access to wireless internet on the backside free of charge to the horsemen and commission staff.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:148 and R.S. 4:164.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

§5742. Grandstand, Clubhouse, and Apron Areas

A. An association shall ensure that the grandstand is kept clean, in good repair, and properly ventilated for use by the public.

B. An association shall grant access for the general public to the grandstand and apron areas of its racetrack on live race days, with all doors and gates unlocked, no later than one hour before post time of the first race of the day.

C. An association shall provide live pari-mutuel tellers at its racetrack betting windows and an open concession stand that sells programs and forms no later than one hour before post time of the first race of the day.

1. All pari-mutuel wagering areas must have tellers, seating, and tables in an air-conditioned environment for guests to handicap and place wagers on the races.

D. An association shall provide security personnel who are visible to the public no later than one hour before post time of the first race of the day.

E. An association shall ensure that all elevators and escalators are kept clean and in good working condition during any hours of operation.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:148 and R.S. 4:164.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

§5745. Providing Concession and Restaurant Services

A. The operation shall be conducted so that all persons who patronize the respective tracks shall be satisfactorily served. Food, beverages (both alcoholic and nonalcoholic), tobacco and other generally related items may be available for sale to the patrons of the various tracks on each day that racing is conducted under the license, permit or privilege granted by the commission. Concessionaires vending any liquid refreshments shall not permit the surrender of glass containers to customers except in appropriate areas as designated by the association.

B. An association shall ensure that food and beverages are always available to guests at the racetrack during open hours of operation.

C. An association shall make a sit down dining experience available on weekend live race days and during stakes races.

D. An association shall provide tables and seats for guests to sit at and eat outside along the apron of the racetrack.

E. An association shall ensure that the racetrack kitchen and all cooking equipment are kept clean, in good repair, and fully operational during its race meets.

F. An association shall provide at least one quick service snack bar and a full service bar to be open during each live race day at least one hour before the first race and at least one hour after the last race.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:147 and R.S. 4:148.

HISTORICAL NOTE: Adopted by the Racing Commission LR 2:92 (March 1976), amended by the Department of Commerce, Racing Commission, LR 2:435 (December 1976), amended LR 3:31 (January 1977), LR 4:278 (August 1978), LR 11:6 (January 1985), amended by the Office of the Governor, Division of Administration, Racing Commission LR 49:

§5756. Minimum Employment Requirements

A. An association shall maintain employees as follows:

1. Within 30 days after receiving the association's annual plan of operation per LAC 35:VII.5777, the commission shall determine in writing how many full-time and seasonal positions that the association will need to employ to operate the following during race meets:

- a. food service;
- b. marketing;
- c. pari-mutuel windows;
- d. kiosk repairs;
- e. racing officials; and
- f. racetrack maintenance.

2. Pari-mutuel tellers must be available at the ratio of 1 teller to every 50 guests on track with a minimum of 3 tellers in each betting area on the first floor and a minimum of 1 teller in each betting area on the clubhouse floors and private areas.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:141, R.S. 4:142, R.S. 4:147, and R.S. 4:148.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

§5758. Animals and Livestock

A. Trainers must have all animals and livestock, other than equines, approved by the racing secretary before being allowed on the backside, and the association must report those animals and livestock to the commission and require paperwork for all service animals before allowing them access to the backside.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:141, R.S. 4:142, R.S. 4:148, and R.S. 4:164.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

§5760. Paddock

A. An association shall ensure that the paddock, paddock stalls, and parade ring are kept clean, in good repair, and free of dangerous surfaces on which horses and people can walk.

B. An association must provide an employee to remove horse manure from the paddock area during live racing in a timely manner.

C. All paddock stalls must have a working fan.

D. An association shall maintain healthy, well-groomed landscaping in the paddock area throughout live race meets.

E. An association shall ensure that trash cans are available in the paddock area and that trash cans are emptied and all litter on paddock area grounds is removed daily when horses are stalled on the backside.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:141, R.S. 4:142, R.S. 4:148, and R.S. 4:164.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

§5762. Grass and Drainage Maintenance

A. An association shall keep all grass areas maintained with adequate grass cutting and weed eating.

B. An association shall maintain all drainage throughout the backside.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:141, R.S. 4:142, R.S. 4:148, and R.S. 4:164.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

§5764. Surface of Race Course

A. The surface of a racetrack, including the cushion, subsurface and base, must be designed, constructed, and maintained to provide for the safety of the jockeys and horses.

B. An association shall provide an adequate drainage system for the racetrack and turf course.

C. An association shall maintain the track surface in a safe training and racing condition.

D. An association that conducts races on a turf track shall provide a system capable of adequately watering the entire turf course evenly.

E. An association must get a soil sample tested for its dirt course twice a year.

1. The test must be conducted by a certified expert.

2. Each association must send a copy of the expert report to the commission in a timely manner to make any necessary adjustments.

F. An association must get its turf course inspected and evaluated twice a year.

1. The inspection and evaluation must be conducted by a certified expert.

2. Each association must send a copy of the expert report to the commission in a timely manner to make any necessary adjustments.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:148.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 44:915 (May 2018), amended LR 49:

§5771. Minimum Infrastructure Investment Requirements

A. An association shall deposit 10 percent of its gross profits into a fund for infrastructure maintenance and improvements per R.S. 4:164.

1. These deposits shall occur at the same time as when the association's state taxes are paid each month.

2. The association shall continue depositing 10 percent of its gross profits until such time when the commission determines that the association has complied with all infrastructure maintenance and improvements as required by the commission in this Chapter.

a. When the commission, by majority vote, determines full compliance with its required infrastructure maintenance and improvements by the association, the association shall maintain a minimum fund balance of \$3,000,000.

b. When the commission determines full compliance with its required infrastructure maintenance and improvements by the association, the commission can authorize any of the following by two-thirds vote:

i. exemption from maintaining fund balance;

ii. exemption from making deposits; or

iii. allow fund balance to be withdrawn.

c. The commission, by majority vote, may reconsider prior determination of compliance and revoke any exemption or allowance granted to an association per this Subsection at any time.

d. There shall be an ongoing review, at least annually, by the commission to determine any additional required facility maintenance and improvements needed and to be required by the commission after obtaining input from associations and stakeholders.

3. The funds specified in this Subsection are subject to audit at any time by the commission and the legislative auditor.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:141, R.S. 4:142, R.S. 4:148, and R.S. 4:164.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

§5772. Minimum Marketing Investment Requirements

A. An association shall specify the total amount of funds that it will use for marketing and promotions for horse racing with its submitted annual plan of operation report per LAC 35:VII.5773.

1. The Commission shall make a determination, by majority vote, whether the amount of funds specified by the association for marketing and promotions is acceptable or if the association must submit a new marketing plan with appropriate funding to comply with the commission's determination of compliance per LAC 35:VII.5771.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:141, R.S. 4:142, R.S. 4:148, and R.S. 4:164.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

§5773. Association Annual Plan of Operation Report

A. An association shall provide an annual report to the commission, due by January 30 after each fiscal year ends starting with fiscal year 2022 due on January 30, 2023, regarding the association's plan of operation for the upcoming fiscal year to include details about:

1. customer service;
2. full-time and seasonal employment;
3. marketing and promotions for horse racing;
4. capital improvements;
5. facility maintenance;
6. facility improvements; and
7. a summary of the prior fiscal year's plan of operation implementation and status.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:141, R.S. 4:142, R.S. 4:148, and R.S. 4:164.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

§5775. Association Quarterly Reports

A. The quarterly reports required each year under this Section shall be due within 20 days of the end of each quarter as follows:

1. Reports from January to March are due no later than April 20.
2. Reports from April to June are due no later than July 20.
3. Reports from July to September are due no later than October 20.
4. Reports from October to December are due no later than January 20.

B. Each association shall provide quarterly reports to the commission of the names and addresses of each individual, corporation, firm, partnership, association, or other legal entity that furnishes professional services, as defined in R.S. 4:158.2, to the association.

1. The reports must also specify whether or not the listed entities are any of the following:

- a. a registered Louisiana business;
- b. a female-owned business; and
- c. a minority-owned business.

C. Each association shall provide quarterly reports to the commission of the demographic information of its workforce, to include:

1. race;
2. gender; and
3. Louisiana residency.

D. Each association shall provide quarterly reports to the commission on its marketing plan, which shall include, but not be limited to, dollars spent on promotions, marketing and advertising broken down by racetrack and casino spending on the following:

1. television advertisements;
2. radio advertisements;
3. magazine advertisements;
4. billboard advertisements;
5. giveaways;
6. rewards; and
7. any other dollars spent on promotions, marketing; and advertising.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:141, R.S. 4:142, R.S. 4:148, and R.S. 4:158.2.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

§5777. Broadcasting Live Races

A. An association shall ensure that televisions are broadcasting live races from its racetrack and are all in working operation adequately throughout the following areas operated by the association:

1. casino;
2. bars;
3. restaurants;
4. off-track betting areas;
5. track betting and viewing areas; and
6. in the backside track kitchen during live racing.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:148 and R.S. 4:164.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

§5779. Association Website Requirements

A. An association shall stream its live racing in real time with capabilities of replays for races in its current meet on its website and/or application for a smart television or provide a link on its website that allows viewing of live races and replays at no charge from a third-party provider.

B. An association shall provide technology that allows reservations to be made by guests and horsemen or shall provide on its website a phone number that will be answered by a live person to allow reservations to be requested and confirmed for guests and horsemen as follows:

1. from 8 a.m. to 6 p.m. on non-race days; and
2. from 8 a.m. through the last race being made official on race days.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:148 and R.S. 4:164.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

§5781. Tote Boards

A. All associations must have a tote board in the infield and a tote board above the stalls in the paddock providing current odds and results during live racing.

1. All new tote boards installed after adoption of this Rule must have digital video capabilities.

2. All tote boards located in the infield must have landscaping approved by the commission at the same time as the Association's race meet applications for licenses, dates, and wagering are considered for approval.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:148 and R.S. 4:164.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

§5783. Winner's Circle

A. An association shall ensure that the winner's circle is kept clean, maintained, and upgraded as needed for safety and appearance.

B. An association must provide an employee to remove horse manure from the winner's circle in a timely manner during live racing.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:148 and R.S. 4:164.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

§5785. Parking Areas

A. All parking areas on association property, regardless of their location, must have drainage that removes all puddles caused by rain.

B. An association shall maintain healthy landscaping for every day of the year at all entry roads and parking areas.

C. On a regular basis, security personnel shall check all handicap parking spaces on association property for any cars parked without displayed handicap eligibility and shall ensure that no vehicles are blocking wheelchair access to handicap vehicles.

D. All parking must be appropriately and visibly marked for parking spaces.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:148 and R.S. 4:164.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

§5787. Maintenance Equipment

A. Each racetrack shall have a functioning rock picker attachment for tractors for removal of rocks and stones on racing surfaces.

B. Each racetrack that has at least one escalator on its premises shall have a functioning duplex escalator cleaning machine or similar equipment specifically made to clean escalators.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:148 and R.S. 4:164.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

§5789. Off-Track Wagering Facilities

A. An association shall ensure that food and beverages are always available to guests at its off-track wagering facilities during open hours of operation.

B. All pari-mutuel wagering areas must have tellers or self-betting terminals to place bets, seating, and tables in an air-conditioned environment for guests to handicap and place wagers on the races.

1. There must be a teller in close proximity that can cash tickets and take bets.

C. All off-track wagering facilities must be open and taking wagers during the hours that any racetrack in the United States is conducting live racing, except by agreement with the commission or its designee.

D. This Section lists the minimum requirements for off-track wagering facilities, and an association reserves the right to exceed these minimum requirements as allowable under the laws of the state of Louisiana.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:148 and R.S. 4:164.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

§5791. Horse Move In and Move Out

A. An association shall be prepared and allow horses to move in to allotted stalls and train on its racetrack grounds no later than 30 days prior to the start of a race meet, unless ordered by the commission to be a longer period.

B. An association shall allow horses to stay housed in the allotted stalls and train on the racetrack grounds for at

least 15 days after the end of a race meet, unless otherwise negotiated and in agreement with the Louisiana Horsemen's Benevolent and Protective Association.

C. The commission may grant an exception to the arrival and departure dates set in this Section due to force majeure or other prohibitive circumstances on a case-by-case basis as requested by an association.

D. The Louisiana Horsemen's Benevolent and Protective Association may request an earlier arrival date or later departure date for horses with allotted stalls at a specified racetrack in writing to the association and the commission for consideration.

1. If the Louisiana Horsemen's Benevolent and Protective Association and the association reach an agreement on earlier arrival or later departure dates for horses, the association may charge a stall rate of \$8 per stall per day for the agreed-upon additional days, subject to annual review by the commission.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:148 and R.S. 4:164.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

§5793. Reporting Altercations

A. An association shall provide a written report of any physical altercation of which it has been made aware that occurs on its grounds to the commission within five days of incident.

1. The individuals involved in the reported physical altercation may be subject to immediate suspension by the commission.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:148 and R.S. 4:164.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

Family Impact Statement

This proposed Rule has no known impact on family formation, stability, and/or autonomy as described in R.S. 49:972.

Poverty Impact Statement

This proposed Rule has no known impact on poverty as described in R.S. 49:973.

Small Business Analysis

This proposed Rule has no known measurable impact on small businesses as described in R.S. 49:965.6.

Provider Impact Statement

This proposed Rule has no known impact on providers of services for individuals with developmental disabilities.

Public Comments

The domicile office of the Louisiana State Racing Commission is open from 8 a.m. to 4:30 p.m. Monday - Friday, and interested parties may submit oral or written comments, data, views, or arguments relative to this proposed rule for a period up to 20 days (exclusive of weekends and state holidays) from the date of this publication to Brett Bonin, Assistant Attorney General, 320 North Carrollton Avenue, Suite 2-B, New Orleans, Louisiana 70119-5100.

Charles A. Gardiner III
Executive Director

**FISCAL AND ECONOMIC IMPACT STATEMENT
FOR ADMINISTRATIVE RULES**

RULE TITLE: Associations' Duties and Obligations

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

The proposed rule change will not result in any costs or savings to state or local governmental units. The proposed adoptions and amendments provide for minimum standards of facilities and infrastructure investments for racetracks in Louisiana pursuant to Act 530 of the 2022 Regular Session of the Legislature (RSL).

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

The proposed rule change will not affect revenue collections for state or local governmental units.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

The proposed administrative rules may result in an indeterminable economic cost to licensed racetracks in Louisiana by requiring them to improve and maintain various parts of their infrastructure in accordance with the standards established and required by the Louisiana State Racing Commission (LSRC). Act 530 of the 2022 RSL requires racing associations to deposit 10% of their gross profits, defined in Act 530 as "taxable net slot machine proceeds less the amount of state taxes paid", into a fund for use by the associations to at least partially fund the LSRC's required facility maintenance and improvements. The 10% of gross profits is estimated to be \$10,909,667.25 for Delta Downs, \$5,009,653.25 for Evangeline Downs, \$2,697,335.50 for Fair Grounds, and \$2,833,625.75 for Louisiana Downs based on average amounts for the last four fiscal years.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

The effect on competition and employment as a result of the proposed rule changes is indeterminable.

Charles A. Gardiner, III
Executive Director
2212#028

Alan M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

NOTICE OF INTENT

**Office of the Governor
Division of Administration
Racing Commission**

**Off-Track Wagering General Rules
(LAC 35:XV.Chapter 123)**

In accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq., and through the authority granted in R.S. 4:148, notice is hereby given that the Racing Commission proposes to amend and adopt the Sections listed below under LAC 35:III.Chapter 123. This action has been deemed necessary by the Racing Commission to prevent imminent peril to the public health, safety, and welfare by establishing the administrative rules for minimum standards of facilities and infrastructure investments for racetracks in fulfillment of the Legislature's mandate to the

Racing Commission "to encourage forceful and honest statewide control of horse racing for the public health, safety, and welfare by safeguarding the people of this state against corrupt, incompetent, dishonest and unprincipled horse racing practices" and "[t]o institute and maintain a program to encourage and permit development of the business of horse racing with pari-mutual wagering thereon on a higher plane." R.S. 4:141(A) and (A)(1).

All in fulfillment of the Legislature's mandate for the Racing Commission to "institute and maintain a regulatory program for the business of racing horses, which program assures the protection of public health, safety and welfare, vesting with the commission forceful statewide control of horse racing with full powers to prescribe rules and regulations and conditions under which all horse racing is conducted with wagering upon the result thereof with the state." R.S. 4:141(A)(3).

The proposed amendments establish the initial administrative Rule for minimum standards of facilities and infrastructure investments for racetracks in accordance with the provisions established in Act 530 of the 2022 Regular Session of the Louisiana Legislature.

**Title 35
HORSE RACING**

Part XV. Off-Track Wagering

Chapter 123. General Rules

§12342. Amenities for Guests

A. All off-track wagering facilities must follow the requirements set forth in LAC 35:III.5789.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:148 and R.S. 4:164.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Division of Administration, Racing Commission, LR 49:

§12345. Concession Services

A. The concession and catering operations shall be conducted so that all persons attending off-track wagering facilities shall be satisfactorily served. Food, beverages (both alcoholic and nonalcoholic), tobacco and other generally related items may be available for sale to the patrons of the various facilities during open hours of operation. Concessionaires serving liquid refreshments shall not permit the surrender of glass containers to patrons except in designated areas.

AUTHORITY NOTE: Promulgated in accordance with R.S. 4:141 and R.S. 4:211-227.

HISTORICAL NOTE: Promulgated by the Department of Commerce, Racing Commission, LR 14:290 (May 1988), amended by the Office of the Governor, Division of Administration, Racing Commission LR 49:

Family Impact Statement

This proposed Rule has no known impact on family formation, stability, and/or autonomy as described in R.S. 49:972.

Poverty Impact Statement

This proposed Rule has no known impact on poverty as described in R.S. 49:973.

Small Business Analysis

This proposed Rule has no known measurable impact on small businesses as described in R.S. 49:965.6.

Provider Impact Statement

This proposed Rule has no known impact on providers of services for individuals with developmental disabilities.

Public Comments

The domicile office of the Louisiana State Racing Commission is open from 8 a.m. to 4:30 p.m. Monday - Friday, and interested parties may submit oral or written comments, data, views, or arguments relative to this proposed Rule for a period up to 20 days (exclusive of weekends and state holidays) from the date of this publication to Brett Bonin, Assistant Attorney General, 320 North Carrollton Avenue, Suite 2-B, New Orleans, Louisiana 70119-5100.

Charles A. Gardiner III
Executive Director

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES

RULE TITLE: Off-Track Wagering General Rules

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

The proposed rule change will not result in any costs or savings to state or local governmental units. The proposed adoptions and amendments provide for minimum standards of facilities and infrastructure investments for off-track wagering facilities in Louisiana pursuant to Act 530 of the 2022 Regular Session of the Legislature (RSL).

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

The proposed rule change will not affect revenue collections for state or local governmental units.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

The proposed administrative rules may result in an indeterminable economic cost to licensed racetracks in Louisiana by requiring them to improve and maintain various parts of their infrastructure in accordance with the standards established and required by the Louisiana State Racing Commission (LSRC). Act 530 of the 2022 RSL requires racing associations to deposit 10% of their gross profits, defined in Act 530 as “taxable net slot machine proceeds less the amount of state taxes paid”, into a fund for use by the associations to at least partially fund the LSRC’s required facility maintenance and improvements. The 10% of gross profits is estimated to be \$10,909,667.25 for Delta Downs, \$5,009,653.25 for Evangeline Downs, \$2,697,335.50 for Fair Grounds, and \$2,833,625.75 for Louisiana Downs based on average amounts for the last four fiscal years.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

The effect on competition and employment as a result of the proposed rule changes is indeterminable.

Charles A. Gardiner, III
Executive Director
2212#029

Alan M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

NOTICE OF INTENT

Office of the Governor Division of Administration Tax Commission

Ad Valorem Taxation
(LAC 61:V.103, 203, 211, 213, 303, 304, 307, 703,
705, 901, 903, 905, 907, 1001, 1003, 1005, 1007,
1103, 1307, 1503, 2501, 2503, 3101, 3103, and 3507)

In accordance with provisions of the Administrative Procedure Act (R.S. 49:950 et seq.), and in compliance with statutory law administered by this agency as set forth in R.S. 47:1837, notice is hereby given that the Tax Commission intends to adopt, amend and/or repeal sections of the Tax Commission real/personal property rules and regulations for use in the 2023 (2024 Orleans Parish) tax year.

The full text of this proposed Rule may be viewed in the Emergency Rule section of this issue of the *Louisiana Register*.

Family Impact Statement

As required by Act 1183 of the 1999 Regular Session of the Louisiana Legislature, the Louisiana Tax Commission hereby submits the following Family Impact Statement.

1. The Effect on the Stability of the Family. Implementation of these proposed rules will have no effect on the stability of the family.

2. The Effect on the Authority and Rights of Parent Regarding the Education and Supervision of Their Children. Implementation of these proposed rules will have no effect on the authority and rights of parents regarding the education and supervision of their children.

3. The Effect on the Functioning of the Family. Implementation of these proposed rules will have no effect on the functioning of the family.

4. The Effect on Family Earnings and Family Budget. Implementation of these proposed rules will have no effect on family earnings and family budget.

5. The Effect on the Behavior and Personal Responsibility of Children. Implementation of these proposed rules will have no effect on the behavior and responsibility of children.

6. The Ability of the Family or a Local Government to Perform the Function as Contained in these Proposed Rules. Implementation of these proposed rules will have no effect on the ability of the family or local government to perform this function.

Poverty Impact Statement

The proposed Rule will have no impact on poverty as described in R.S. 49:973.

Small Business Analysis

The proposed Rule will have no adverse impact on small businesses as defined in the Regulatory Flexibility Act.

Small Business Statement

The proposed Rule will have no adverse impact on small businesses as described in R.S. 49:965.2 et seq.

Provider Impact Statement

The proposed Rule will have no adverse impact on providers of services for individuals with developmental disabilities as described in HCR 170 of 2014.

Public Comments

Interested persons may submit written comments, data, opinions and arguments regarding the proposed Rules. Written submission must be directed to Michael Matherne, Tax Commission Administrator, LA Tax Commission, 1051 North 3rd St, Room 224, Baton Rouge, LA 70802 or P. O. Box 66788, Baton Rouge, LA 70896 and must be received no later than 4 p.m., Friday, January 6, 2023.

Public Hearing

A public hearing, on this proposed Rule, will be held on Wednesday, January 25, 2023, at 10 a.m., at the Louisiana State Capitol, 900 North Third St., Baton Rouge, LA 70802. Interested persons are invited to attend and submit oral comments, by the deadline mentioned above, on the proposed amendments. Should individuals with a disability need an accommodation in order to participate, please contact 225-219-0339.

Lawrence E. Chehardy
Chairman

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES RULE TITLE: Ad Valorem Taxation

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

The proposed rules reflect annual changes in valuation procedures for taxation purposes based on the most recent available data. There are no estimated costs or savings associated with the proposed rules for state governmental units. An impact to local governmental workload resulting in additional administrative costs will occur, but is expected to be minimal.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

The proposed rule changes will result in an increase of approximately \$155,550,000 in revenue collections for local governments based upon revisions to valuation tables increasing certain 2023 real and personal property assessments by approximately +15% in total. However, these revisions will not necessarily affect revenue collections of local government units as any net increase or decrease in assessed valuations are authorized to be offset pursuant to millage adjustment provisions of Article VII, Section 23 of the state Constitution.

On average, these revisions will generally increase certain 2023 real and personal property assessments for property of similar age and condition in comparison with the latest available equivalent assessments. However, the assessments of certain property types will increase compared to prior year. Composite multiplier tables for assessment of most personal property will increase by an estimated +15%. Specific valuation tables for assessment of pipelines will increase by an estimated +15% (Onshore to increase by an estimated +14% and Offshore to increase by an estimated +16%). Drilling rigs will increase by an estimated +15% (Land rigs to increase by an estimated +14.5%, Jack-Ups to increase by an estimated +15.5% and Semisubmersible rigs to increase by an estimated +15.5%). The net effect determined by averaging these

revisions is estimated to increase assessments by +15% and estimated local tax collections by \$155,550,000 in FY 23/24 on the basis of the existing statewide average millage. However, these revisions will not necessarily affect revenue collections of local government units as any net increase or decrease in assessed valuations are authorized to be offset by millage adjustment provisions of Article VII, Section 23 of the state Constitution.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

The effects of these new rules on assessments of individual items of equivalent real and personal property will generally be higher in the aggregate in 2023 compared to the last year of actual data. Specific assessments of real and personal property will depend on the age and condition of the property subject to assessment. Taxpayers will be impacted based on the changes to the valuation guidelines for assessments as listed in Section II. The magnitude will depend on the taxable property for which they are liable. Regardless of the guidelines adopted by the Tax Commission, all taxpayers continue to have the right to appeal their assessments. Additionally, Small Businesses' real and personal property is assessed in the same manner as for all other property owners.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

The impact on competition and employment cannot be quantified. In as much as the proposed changes in assessments are relatively small and there will no longer be any charges for the updates, any aggregate impact on competition and employment statewide will likely be minimal.

Lawrence E. Chehardy
Chairman
2212#019

Alan M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

NOTICE OF INTENT

Department of Health Board of Nursing

BSN Facility Exceptions (LAC 46:XLVII.3515)

Notice is hereby given in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq., and through the authority granted in R.S. 37:918, that the Louisiana State Board of Nursing (LSBN) is proposing rule changes to Chapter 35, Section 3515, Subsection B, Subparagraph 9 under Title 46, Professional and Occupational Standards, Part XLVII. The proposed change will omit the percentage of Baccalaureate of Science in Nursing (BSN) prepared nurses with at least 2 years of clinical nursing experience allowed to work as faculty exceptions in approved Louisiana schools of nursing.

Title 46

PROFESSIONAL AND OCCUPATIONAL STANDARDS

Part XLVII. Nurses: Practical Nurses and Registered Nurses

Subpart 2. Registered Nurses

Chapter 35. Undergraduate and Graduate Nursing Education Degree Programs

§3515. Faculty and Faculty Organization of Undergraduate and Graduate Nursing Education Degree Programs

A. - B.8. ...

9. Exceptions to the academic qualifications for undergraduate nurse faculty shall be justified and approved under board established guidelines. Exceptions, if granted by the board shall be:

a. baccalaureate in nursing-prepared individuals who are not enrolled in a graduate program in nursing are limited to a maximum two calendar years after which they must be enrolled in a graduate nursing program; and

b. baccalaureate in nursing-prepared individuals who are enrolled in a graduate program in nursing at the master's and/or doctoral level shall be initially approved for two years in accordance with current board guidelines. Exceptions may be granted to each individual for a maximum of four years.

C. - J. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:918.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Nursing, LR 3:186 (April 1977), amended LR 10:1025 (December 1984), LR 12:678 (October 1986), amended by the Department of Health and Hospitals, Board of Nursing, LR 19:1147 (September 1993), repromulgated LR 24:1293 (July 1998), amended LR 26:2789 (December 2000), repromulgated LR 27:851 (June 2001), amended LR 33:1123 (June 2007), LR 36:1245 (June 2010), LR 42:880 (June 2016), amended LR:49:

Family Impact Statement

The proposed additions and/or changes to the rules of the board, Louisiana State Board of Nursing should not have any known or foreseeable impact on any family as defined by R.S. 49:972(D) or on family formation, stability and autonomy. Specifically, there should be no known or foreseeable effect on:

1. the stability of the family;
2. the authority and rights of parents regarding the education and supervision of their children;
3. the functioning of the family;
4. a family's earnings and budget;
5. the behavior and personal responsibility of the children; or
6. the family's ability or that of the local government to perform the function as contained in the proposed Rule.

Poverty Impact Statement

In compliance with Act 854 of the 2012 Regular Session of the Louisiana Legislature, the poverty impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will not have an impact on child, individual, or family poverty in relation to individual or community asset development as described on R.S. 49:973.

Provider Impact Statement

In compliance with House Concurrent Resolution (HCR) 170 of the 2014 Regular Session of the Louisiana Legislature, the provider impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will not have an impact on the staffing level requirements or qualifications required to provide the same level of service, no direct or indirect cost to the provider to provide the same level of service, and will have no impact on the provider's ability to provide the same level of service as described in HCR 170.

Public Comments

Interested persons may submit written comments on the proposed Rule to Dr. Karen C. Lyon, 17373 Perkins Road,

Baton Rouge, LA 70810, or by facsimile to (225) 755-7585. All comments must be submitted by 5 p.m. on or before January 10, 2023.

Karen C. Lyon, PhD, MBA, APRN-CNS, NEA
Executive Director

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES RULE TITLE: BSN Facility Exceptions

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

The proposed rule revision will result in a one-time expenditure of \$250 in FY 23 for the Louisiana State Board of Nursing (LSBN) to publish the notice of intent and proposed rule revision in the Louisiana Register. The proposed rule revision will not affect the expenditures of other state or local governmental units.

Current regulations require that exceptions to the academic qualifications for undergraduate nurse faculty must be justified and approved under board-established guidelines. The standard requirement for academic qualifications is a master's degree in nursing. Current established guidelines for faculty exceptions limit the number of exceptions to 20% of the number of full-time faculty members in a college/university's nursing education degree program at any given time. The proposed revision removes the 20% cap on the use of baccalaureate-prepared nursing faculty for allow schools of nursing to increase their use of these prospective nurses to supervise clinical experiences of students and increase enrollment.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

To the extent that the proposed revision to § 3515.B.9 increases the number of student applications for admission to clinical nursing courses and requisite documents to those applications including criminal background checks (CBCs) and fingerprinting, the LSBN and the Louisiana State Police (LSP) may collect increased revenue from application fees and background check fees. The magnitude of such increases is indeterminable, but the LSBN estimates that there may be an increase of up to 10 nursing students per faculty member for each baccalaureate-prepared nurse adjunct faculty member approved as a result of the removal of the 20% cap on faculty qualification exceptions.

The LSBN receives a \$100 application fee per applicant, while the LSP receives \$28 per background check (\$26 per state background check and \$2 of the \$13.25 federal background check fee). In addition, the LSP receives \$10 if fingerprints are taken by the agency. If a local law enforcement agency processes the background check, it may charge a processing fee of no more than \$5 and must remit a technology fee of \$5 to the Louisiana Sheriffs' Association.

To the extent that the proposed revision increases enrollment in pre-licensure Registered Nurse (RN) programs at public universities, those universities may receive additional tuition and fee revenue; however, the extent of any such increase is indeterminable.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

The proposed rule change to § 3515.B.9 aligns with LSBN's and the Louisiana Legislature's desire to admit more students to the 30 pre-licensure RN programs in the state. Increased admissions will contribute to addressing the RN shortage in the state, the most current estimates of which demonstrate over 4,000 vacancies in hospitals (based upon data from 2018). Additionally, those increased admissions will

increase revenues from tuition and fees for colleges and universities with pre-licensure RN ed number of baccalaureate nurses employed by Louisiana schools of nursing.

The LSBN estimates that baccalaureate-prepared versus masters-prepared nursing faculty in adjunct roles could save schools of nursing as much as \$20/hour/adjunct faculty member.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

The proposed change to § 3515.B.9 will remove the 20% cap on the use of baccalaureate-prepared nurses in adjunct faculty positions. It is anticipated that there will be no effect on competition as all schools of nursing will benefit from the ability to increase their use of baccalaureate-prepared nursing faculty as adjunct clinical faculty, thus allowing for increased student enrollment in nursing programs. Employment of baccalaureate-prepared RNs will increase as they are hired for adjunct faculty positions. Employment of RNs will also increase to the extent that the e available number of RNs through increased enrollment in nursing programs; however, the extent of any such increase is indeterminable.

Dr. Karen C. Lyon
Executive Director
2212#017

Allen M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

NOTICE OF INTENT

Department of Health
Bureau of Health Services Financing

Free-Standing Birth Centers—Licensing Standards
(LAC 48:I.Chapter 67)

The Department of Health, Bureau of Health Services Financing proposes to amend LAC 48:I.Chapter 67 as authorized by R.S. 36:254. This proposed Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq.

The Department of Health proposes to amend the provisions governing the licensing of free-standing birth centers (FSBCs) in order to: 1) add and update definitions; 2) clarify licensing requirements and responsibilities of the governing board; 3) modify education and training requirements of personnel; and, 4) update FSBC service delivery requirements.

Title 48
PUBLIC HEALTH-GENERAL
Part I. General Administration
Subpart 3. Licensing and Certification
Chapter 67. Free-Standing Birth Centers
Subchapter A. General Provisions
§6703. Definitions

Certified Nurse Midwife (CNM)—an advanced practice registered nurse as defined by R.S. 37:913, or current law.

Emergent—a medical condition that, if not stabilized, could reasonably be expected to result in the loss of the person's life, serious permanent disfigurement, or loss or impairment of the function of a bodily member or organ.

Line of Credit—a credit arrangement with a federally insured, licensed lending institution which is established to assure that the provider has available funds as needed to

continue the operations of the agency and the provision of services to clients. The line of credit shall be issued to the licensed entity and shall be specific to the geographic location shown on the license. For purposes of FSBC licensure, the line of credit shall not be a loan, credit card or a bank balance.

Transfer Agreement—a written agreement made with at least one receiving hospital in the community for the timely transport of emergency clients to a licensed hospital that will provide obstetric/newborn acute care should an emergency arise which would necessitate hospital care and services.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254, R.S. 40:2180.21-2180.28, R.S. 37:1270 and R.S. 37:3241-3259.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 48:2107 (August 2022), amended LR 49:

§6705. General Requirements

A. - J. ...

K. Each FSBC shall have requirements and protocols for assessing, transferring, and transporting clients to a licensed hospital, and arrangements with a local ambulance service for the transport of emergency clients to a licensed hospital. Arrangements may include an annual, written notification to a local ambulance company advising of the FSBC's operational status. The written notification shall, at a minimum, include the FSBC's name, address, and telephone number.

L. - N. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.21-2180.28.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 48:2108 (August 2022), amended LR 49:

§6709. Initial Licensure Application Process

A. ...

B. The initial licensing application packet shall include:

1. - 4. ...

5. proof of each insurance coverage as follows:

a. - b. ...

c. professional liability insurance of at least \$100,000 per occurrence/\$300,000 per annual aggregate, or proof of self-insurance of at least \$100,000, along with proof of enrollment as a qualified healthcare provider with the Louisiana Patient's Compensation Fund (PCF). If the FSBC is not enrolled in the PCF, professional liability limits shall be \$1,000,000 per occurrence/\$3,000,000 per annual aggregate; and

i. Repealed.

d. ...

6. proof of financial viability which entails:

a. a line of credit issued from a federally insured, licensed lending institution in the amount of at least \$25,000; or

b. verification of sufficient assets equal to \$25,000 or the cost of three months of operation, whichever is less;

B.7. - H. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.21-2180.28.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 48:2109 (August 2022), amended LR 49:

§6715. Changes in Licensee Information or Personnel

A. - H. ...

1. An on-site physical environment survey by the HSS, and an on-site inspection by the OPH and the OSFM shall be required prior to the issuance of the new license.

2. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.21-2180.28.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 48:2111 (August 2022), amended LR 49:

§6717. Renewal of License

A. The FSBC shall submit a completed license renewal application packet to the department at least 30 days prior to the expiration of the current license. The license renewal application packet shall include the:

1. ...

2. non-refundable license renewal/delinquent fee;

3. - 5. ...

6. proof of each insurance coverage as follows:

a. - b. ...

c. professional liability insurance of at least \$100,000 per occurrence/\$300,000 per annual aggregate, or proof of self-insurance of at least \$100,000, along with proof of enrollment as a qualified healthcare provider with the PCF. If the FSBC is not enrolled in the PCF, professional liability limits shall be \$1,000,000 per occurrence/\$3,000,000 per annual aggregate; and

i. Repealed.

d. ...

7. proof of financial viability that entails:

a. a line of credit issued from a federally insured, licensed lending institution in the amount of at least \$25,000; or

b. verification of sufficient assets equal to \$25,000 or the cost of three months of operation, whichever is less; and

A.8. - E. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.21-2180.28.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 48:2111 (August 2022), amended LR 49:

Subchapter B. Administration and Organization

§6735. Governing Body

A. - C. ...

D. The governing body of an FSBC shall:

1. ...

2. review and approve the FSBC’s annual budget;

a. - b. Repealed.

3. designate a person to act as the administrator and delegate enough authority to this person to manage the day-to-day operations of the FSBC;

4. annually evaluate the administrator’s performance;

5. have the authority to dismiss the administrator;

6. formulate and annually review, in consultation with the administrator, written policies and procedures concerning the FSBC’s philosophy, goals, current services, personnel practices, job descriptions, fiscal management, and contracts:

a. the FSBC’s written policies and procedures shall be maintained within the FSBC and made available to all staff during hours of operation;

7. determine, in accordance with state law, which licensed healthcare practitioners are eligible candidates for appointment to the FSBC staff;

a. Repealed.

8. ensure and maintain quality of care, inclusive of a quality assurance/performance improvement process that measures client, process, and structural (e.g. system) outcome indicators to enhance client care;

9. ensure that birthing procedures shall not be performed in areas other than the birthing rooms;

10. ensure that birthing procedures are initiated in accordance with acceptable standards of practice;

11. meet with designated representatives of the department whenever required to do so;

12. inform the department, or its designee, prior to initiating any substantial changes in the services provided by the FSBC; and

13. ensure that pursuant to R.S. 40:1191.2, prior to the final disposition of a miscarried child, but not more than 24 hours after a miscarriage occurs in an FSBC, the FSBC shall notify the client, or if the client is incapacitated, the spouse of the client, both orally and in writing, of both of the following:

a. the parent's right to arrange for the final disposition of the miscarried child using the notice of parental rights form as provided for in R.S. 40:1191.3; and

b. the availability of a chaplain or other counseling services concerning the death of the miscarried child, if such services are provided by the FSBC.

14. - 14.b. Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.21-2180.28.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 48:2116 (August 2022), amended LR 49:

Subchapter C. Admissions, Transfers and Discharges

§6743. Prohibitions to Admission or Continued Care in an FSBC

A. The FSBC shall not knowingly accept or thereafter maintain responsibility for the prenatal or intrapartum care of a woman who:

1. - 16. ...

17. has a parity greater than five, with poor obstetrical history;

A.18. - B. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.21-2180.28.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 48:2117 (August 2022), amended LR 49:

§6745. Admissions and Assessments

A. ...

B. An FSBC shall ensure that each client has the appropriate pre-natal and postpartum assessments completed, inclusive of the FSBC’s ability to provide services needed in the postpartum period in accordance with the prescribed plan of care, and discharge plans to home or another licensed facility setting. The FSBC shall ensure that any length of client care does not exceed 23 hours post-delivery.

C. - F. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.21-2180.28.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 48:2117 (August 2022), amended LR 49:

§6747. Required Newborn Care

A. Each delivery shall be attended by two qualified personnel currently trained in:

1. the use of emergency equipment;
2. adult cardiopulmonary resuscitation equivalent to American Heart Association Class C Basic Life Support; and
3. Neonatal Resuscitation Program endorsed by the American Academy of Pediatrics/American Heart Association.

B. - G. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.21-2180.28.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 48:2118 (August 2022), amended LR 49:

§6751. Required Physician Consultation, Postpartum Period

A. The licensed healthcare practitioner shall obtain medical consultation or refer for emergent medical care any woman who, during the postpartum period:

1. - 7. ...

B. The licensed healthcare practitioner shall obtain medical consultation or refer for emergent medical care any infant who:

B.1. - C. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.21-2180.28.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 48:2118 (August 2022), amended LR 49:

Subchapter D. Service Delivery

§6757. Perinatal Services

A. - C. ...

D. Except for the requirements of §6747.A. specific to deliveries, at least one licensed healthcare practitioner shall be immediately available in the FSBC until all clients are assessed as stable, and shall have been trained in:

1. ...

2. adult cardiopulmonary resuscitation equivalent to American Heart Association Class C Basic Life Support; and

3. Neonatal Resuscitation Program endorsed by American Academy of Pediatrics/American Heart Association.

4. Repealed.

E. - G.5. ...

H. There shall be enough staff assigned to the postpartum care area to meet the needs of the clients.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.21-2180.28.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 48:2119 (August 2022), amended LR 49:

§6759. Transfer Agreements and Client Transfers

A. ...

B. If the FSBC is not able to secure a written transfer agreement, the licensed healthcare practitioner shall be responsible for the safe and immediate transfer of the patients from the FSBC to a hospital when a higher level of care is indicated. Transportation to a local hospital shall be mediated by ambulance when emergency consultation is needed.

C. - C.3. ...

D. The FSBC shall be located within 20 minutes' transport time to a general acute care hospital providing obstetric services 24 hours per day and seven days a week, with which the FSBC has a written transfer agreement. The FSBC shall maintain a contractual relationship with the general acute care hospital, including a written transfer agreement, which allows for an emergency cesarean delivery to begin within 30 minutes of the decision made by a licensed obstetrician at the receiving hospital that a cesarean delivery is necessary.

E. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.21-2180.28.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 48:2119 (August 2022), amended LR 49:

Subchapter E. Facility Responsibilities

§6767. General Provisions

A. - A.5. ...

B. An FSBC shall have qualified staff sufficient in number to meet the needs of clients and to ensure provision of services.

C. The FSBC shall develop and maintain documentation of an orientation program for all employees, either contract or staff that is sufficient in scope and duration to inform the individual about his/her responsibilities, how to fulfill them, review of policies and procedures, job descriptions, competency evaluations, and performance expectations. An orientation program and documented competency evaluation and/or job expectations of assigned or reassigned duties shall be conducted prior to any assignments or reassignments.

D. Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.21-2180.28.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 48:2120 (August 2022), amended LR 49:

§6769. Staffing Requirements

A. Administrative Staff. The following administrative staff is required for all FSBCs:

1. a qualified administrator at each licensed geographic location who shall meet the qualifications as established in these provisions; and

2. other administrative staff as necessary to operate the FSBC and to properly safeguard the health, safety, and welfare of the clients receiving services.

3. Repealed.

B. - B.2. ...

3. The administrator shall meet the following qualifications:

a. possess a college degree from an accredited university; or

b. have three years of relevant work experience involving administrative duties in a healthcare facility.

B.4. - D.9. ...

E. Licensed Healthcare Practitioner Staff

1. The FSBC shall have an organized licensed healthcare practitioner staff, inclusive of one or more of the following, who shall attend each woman in labor from the time of admission through birth, and the immediate postpartum period:

E.1.a. - F.1. ...

2. The FSBC shall ensure that the delivery services are directed under the leadership of licensed healthcare practitioner(s) sufficient in number, to plan, assign, supervise, and evaluate delivery services, as well as to give clients the high-quality care that requires the judgment and specialized skills of licensed healthcare practitioners.

2.a. - 3. ...

4. A formalized program on in-service training shall be developed and implemented for all categories of the FSBC. Training shall be required on a quarterly basis related to required job skills.

a. Documentation of such in-service training shall be maintained on-site in the FSBC's files. Documentation shall include the:

- i. training content;
- ii. date and time of the training;
- iii. names and signatures of personnel in attendance; and
- iv. name of the presenter(s).

5. General staffing provisions for the delivery rooms shall be the following:

a. each delivery procedure shall be performed by a licensed healthcare practitioner; and

i. - iv. Repealed.

b. appropriately trained qualified personnel may perform assistive functions during each delivery procedure.

6. - 6.b. Repealed.

G. - G.4.g. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.21-2180.28.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 48:2120 (August 2022), amended LR 49:

§6773. Clinical Records

A. - F. ...

G. The following data shall be documented and included as part of each client's basic clinical record:

1. - 16.d. ...

17. name(s) of the treating licensed healthcare practitioner(s);

G.18. - K.2. ...

L. All pertinent observations, treatments, and medications given to a client shall be entered in the staff notes as part of the clinical record. All other notes relative to specific instructions from the licensed healthcare practitioner shall be recorded.

M. - P. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.21-2180.28.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 48:2122 (August 2022), amended LR 49:

Subchapter F. Safety, Sanitization and Emergency Preparedness

§6781. Infection Control

A. - G. ...

1. Employees with symptoms of illness that have the potential of being potentially contagious or infectious (i.e. diarrhea, skin lesions, respiratory symptoms, infections, etc.) shall be either evaluated by a physician or another qualified licensed healthcare practitioner and/or restricted from working with clients during the infectious stage.

H. - L. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.21-2180.28.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 48:2124 (August 2022), amended LR 49:

Subchapter G. Physical Environment

§6793. General Requirements

A. - E. ...

F. Waivers

1. The secretary of the department or their designee may, within their sole discretion, grant waivers to building and construction guidelines. The facility shall submit a waiver request in writing to the HSS. The facility shall demonstrate how patient safety and the quality of care offered is not compromised by the waiver. The facility shall demonstrate their ability to completely fulfill all other requirements of the service. The department will make a written determination of the request. Waivers are not transferable in an ownership change, and are subject to review or revocation upon any change in circumstances related to the waiver. The facility does not have the right to an administrative appeal in regards to the denial or revocation of any waiver.

2. - 3. Repealed.

G. Facility within a Facility

1. If more than one healthcare provider occupies the same building, premises, or physical location, all treatment facilities and administrative offices for each healthcare facility shall be clearly separated from the other by a clearly defined and recognizable boundary.

2. There shall be clearly identifiable and distinguishable signs posted inside the building as well as signs posted on the outside of the building for public identification of the FSBC. Compliance with the provisions of R.S. 40:2007 shall be required.

3. An FSBC that is located within a building that is also occupied by one or more other businesses and/or other healthcare facilities shall have all licensed spaces and rooms of the FSBC contiguous to each other and defined by cognizable boundaries.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.21-2180.28.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 48:2127 (August 2022), amended LR 49:

§6795. General Appearance and Space Requirements

A. - F. ...

G. The FSBC shall meet the following requirements including, but not limited to:

1. - 5. ...

6. each FSBC shall provide for a well-marked, illuminated entrance for drop off and/or pick up of clients before and after delivery services are complete.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.21-2180.28.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 48:2128 (August 2022), amended LR 49:

Family Impact Statement

In compliance with Act 1183 of the 1999 Regular Session of the Louisiana Legislature, the impact of this proposed Rule on the family has been considered. It is anticipated that this proposed Rule will have no impact on family

functioning, stability and autonomy as described in R.S. 49:972.

Poverty Impact Statement

In compliance with Act 854 of the 2012 Regular Session of the Louisiana Legislature, the poverty impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will have no impact on child, individual, or family poverty in relation to individual or community asset development as described in R.S. 49:973.

Small Business Analysis

In compliance with the Small Business Protection Act, the economic impact of this proposed Rule on small businesses has been considered. It is anticipated that this proposed Rule may have a positive impact on small businesses by ensuring that the administrative Rule governing free-standing birth centers aligns with current requirements for licensure.

Provider Impact Statement

In compliance with House Concurrent Resolution (HCR) 170 of the 2014 Regular Session of the Louisiana Legislature, the provider impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will have no impact on the staffing level requirements or qualifications required to provide the same level of service, and will have no impact on the provider's ability to provide the same level of service as described in HCR 170.

Public Comments

Interested persons may submit written comments to Tasheka Dukes, RN, Health Standards Section, P.O. Box 3767, Baton Rouge, LA 70821. Ms. Dukes is responsible for responding to inquiries regarding this proposed Rule. The deadline for submitting written comments is at 4:30 p.m. on January 30, 2023.

Public Hearing

Interested persons may submit a written request to conduct a public hearing by U.S. mail to the Office of the Secretary ATTN: LDH Rulemaking Coordinator, Post Office Box 629, Baton Rouge, LA 70821-0629; however, such request must be received no later than 4:30 p.m. on January 9, 2023. If the criteria set forth in R.S. 49:953(A)(2)(a) are satisfied, LDH will conduct a public hearing at 9:30 a.m. on January 26, 2023 in Room 118 of the Bienville Building, which is located at 628 North Fourth Street, Baton Rouge, LA. To confirm whether or not a public hearing will be held, interested persons should first call Allen Enger at (225) 342-1342 after January 9, 2023. If a public hearing is to be held, all interested persons are invited to attend and present data, views, comments, or arguments, orally or in writing. In the event of a hearing, parking is available to the public in the Galvez Parking Garage, which is located between North Sixth and North Fifth/North and Main Streets (cater-corner from the Bienville Building). Validated parking for the Galvez Garage may be available to public hearing attendees when the parking ticket is presented to LDH staff at the hearing.

Dr. Courtney N. Phillips
Secretary

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES

RULE TITLE: Free-Standing Birth Centers Licensing Standards

- I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)
It is anticipated that implementation of this proposed rule will have no programmatic fiscal impact to the state other than the cost of promulgation for FY 22-23. It is anticipated that \$2,376 will be expended in FY 22-23 for the state's administrative expense for promulgation of this proposed rule and the final rule.
- II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)
It is anticipated that the implementation of this proposed rule will have no effect on revenue collections since the fees from currently licensed providers will continue to be collected in the same amounts.
- III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)
This proposed rule amends the provisions governing the licensing of free-standing birth centers (FSBCs) in order to: 1) add and update definitions; 2) clarify licensing requirements and responsibilities of the governing board; 3) modify education and training requirements of personnel; and, 4) update FSBC service delivery requirements. Implementation of this proposed rule is not anticipated to result in costs to FSBCs for FY 22-23, FY 23-24, and FY 24-25, but will be beneficial for these providers by ensuring that the provisions in the Louisiana Administrative Code align with current requirements for licensure.
- IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)
This rule has no known effect on competition and employment.

Tasheka Dukes, RN
Deputy Assistant Secretary
2212#047

Alan M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

NOTICE OF INTENT

Department of Health Bureau of Health Services Financing and Office of Aging and Adult Services

Home and Community-Based Services Waivers
Adult Day Health Care Waiver
Assistive Technology Services
(LAC 50:XXI.2301)

The Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services propose to amend LAC 50:XXI.2301 in the Medical Assistance Program as authorized by R.S. 36:254 and pursuant to Title XIX of the Social Security Act. This proposed Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq.

The U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS) authorized funding under section 9817 of the American Rescue Plan Act of 2021 (ARPA) to expand and enhance services provided to home and community-based services waiver participants in the Medicaid program.

The Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services promulgated an Emergency Rule which amended the provisions governing the Adult Day Health Care (ADHC) Waiver in order to add assistive technology as a covered service, as authorized under section 9817 of ARPA (*Louisiana Register*, Volume 48, Number 12). This proposed Rule continues the provisions of the November 18, 2022 Emergency Rule.

Title 50

PUBLIC HEALTH-MEDICAL ASSISTANCE

Part XXI. Home and Community-Based Services

Waivers

Subpart 3. Adult Day Health Care Waiver

Chapter 23. Services

§2301. Covered Services

A. - A.3.b. ...

c. Support coordinators may assist participants to transition for up to six months while the participants still reside in the facility.

4. ...

a. Allowable expenses are those necessary to enable the individual to establish a basic household (excluding expenses for room and board) including, but not limited to:

i. ...

ii. specific set up fees or deposits;

a.iii. - e. ...

f. Funds are available for specific items up to the lifetime maximum amount identified in the federally-approved waiver document.

5. Assistive Technology. These services include the following:

a. an item, piece of equipment, or product system, acquired commercially, that is used to increase, maintain, or improve functional capabilities of participants; and

b. the assistance provided to the participant in the acquisition, set up, and use of an assistive technology device:

i. evaluating to determine if an assistive technology device is appropriate for the participant;

ii. purchasing the most appropriate assistive technology device for the participant; and

iii. costs associated with the delivery, set up, and training.

B. - E. Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Office of Family Security, LR 11:623 (June 1985), amended LR 13:181 (March 1987), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 23:1149 (September 1997), amended LR 25:1100 (June 1999), repromulgated LR 30:2036 (September 2004), amended by the Department of Health and Hospitals, Office of Aging and Adult Services, LR 34:2162 (October 2008), repromulgated LR 34:2566 (December 2008), amended by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult

Services, LR 37:2625 (September 2011), LR 39:2495 (September 2013), LR 40:791 (April 2014), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 44:2163 (December 2018), LR 49:

Implementation of the provisions of this Rule may be contingent upon the approval of the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), if it is determined that submission to CMS for review and approval is required.

Family Impact Statement

In compliance with Act 1183 of the 1999 Regular Session of the Louisiana Legislature, the impact of this proposed Rule on the family has been considered. It is anticipated that this proposed Rule will have a positive impact on family functioning, stability and autonomy as described in R.S. 49:972 by providing assistive technology to improve the quality of life for ADHC waiver participants by allowing them to participate in their healthcare decisions and socialize with others virtually.

Poverty Impact Statement

In compliance with Act 854 of the 2012 Regular Session of the Louisiana Legislature, the poverty impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will have a positive impact on child, individual, or family poverty in relation to individual or community asset development as described in R.S. 49:973 by providing assistive technology to participants who would otherwise not have access to these services.

Small Business Analysis

In compliance with the Small Business Protection Act, the economic impact of this proposed Rule on small businesses has been considered. It is anticipated that this proposed Rule will have a positive impact on small businesses by providing reimbursement for a service that was previously not covered.

Provider Impact Statement

In compliance with House Concurrent Resolution (HCR) 170 of the 2014 Regular Session of the Louisiana Legislature, the provider impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will have no impact on the staffing level requirements or qualifications required to provide the same level of service, but may reduce the total direct and indirect cost to the provider to provide the same level of service, and may enhance the provider's ability to provide the same level of service as described in HCR 170 since this proposed Rule provides reimbursement for a service that was previously not covered.

Public Comments

Interested persons may submit written comments to Tara A. LeBlanc, Bureau of Health Services Financing, P.O. Box 91030, Baton Rouge, LA 70821-9030. Ms. LeBlanc is responsible for responding to inquiries regarding this proposed Rule. The deadline for submitting written comments is at 4:30 p.m. on January 30, 2023.

Public Hearing

Interested persons may submit a written request to conduct a public hearing by U.S. mail to the Office of the Secretary ATTN: LDH Rulemaking Coordinator, Post Office Box 629, Baton Rouge, LA 70821-0629; however, such request must be received no later than 4:30 p.m. on January 9, 2023. If the criteria set forth in R.S. 49:953(A)(2)(a) are satisfied, LDH will conduct a public hearing at 9:30 a.m. on January 26, 2023 in Room 118 of the Bienville Building,

which is located at 628 North Fourth Street, Baton Rouge, LA. To confirm whether or not a public hearing will be held, interested persons should first call Allen Enger at (225) 342-1342 after January 9, 2023. If a public hearing is to be held, all interested persons are invited to attend and present data, views, comments, or arguments, orally or in writing. In the event of a hearing, parking is available to the public in the Galvez Parking Garage, which is located between North Sixth and North Fifth/North and Main Streets (cater-corner from the Bienville Building). Validated parking for the Galvez Garage may be available to public hearing attendees when the parking ticket is presented to LDH staff at the hearing.

Dr. Courtney N. Phillips
Secretary

**FISCAL AND ECONOMIC IMPACT STATEMENT
FOR ADMINISTRATIVE RULES**

**RULE TITLE: Home and Community-Based Services
Waivers—Adult Day Health Care Waiver
Assistive Technology Services**

**I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO
STATE OR LOCAL GOVERNMENT UNITS (Summary)**

It is anticipated that implementation of this proposed rule will have no programmatic fiscal impact to the state other than the cost of promulgation for FY 22-23. It is anticipated that \$648 (\$324 SGF and \$324 FED) will be expended in FY 22-23 for the state's administrative expense for promulgation of this proposed rule and the final rule.

**II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE
OR LOCAL GOVERNMENTAL UNITS (Summary)**

It is anticipated that implementation of this proposed rule will increase federal revenue collections by approximately \$41,294 for FY 22-23, \$40,970 for FY 23-24, and \$0 for FY 24-25. The funding for these services is authorized under section 9817 of the American Rescue Plan Act of 2021 (ARPA) through March 31, 2025 or until it is exhausted. It is anticipated that \$324 will be collected for the federal share in FY 22-23 of the expense for promulgation of the proposed and final rule.

**III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO
DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR
NONGOVERNMENTAL GROUPS (Summary)**

This proposed rule continues the provisions of the November 18, 2022 Emergency Rule, which amended the provisions governing the Adult Day Health Care (ADHC) Waiver in order to add assistive technology as a covered service, as authorized under section 9817 of the American Rescue Plan Act of 2021 (ARPA). This proposed rule will benefit ADHC waiver participants who would otherwise not have access to virtual technology by providing iPads/Tablets and Kindles to allow them to participate in their healthcare decisions and socialize with others virtually to improve their quality of life. Providers of ADHC waiver services will benefit from this proposed rule since it provides reimbursement for a service that was previously not covered. It is anticipated that this proposed rule will increase payments to ADHC providers by approximately \$40,970 for FY 22-23, \$40,970 for FY 23-24, and \$0 for FY 24-25.

**IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT
(Summary)**

This rule has no known effect on competition and employment.

Tara A. LeBlanc
Medicaid Executive Director
2212#048

Alan M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

NOTICE OF INTENT

**Department of Health
Bureau of Health Services Financing
and
Office of Aging and Adult Services**

Home and Community-Based Services Waivers

Community Choices Waiver

Home Delivered Meals and Assistive Technology Services
(LAC 50:XXI.Chapter 83 and 9501)

The Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services propose to amend LAC 50:XXI.Chapter 83 and §9501 in the Medical Assistance Program as authorized by R.S. 36:254 and pursuant to Title XIX of the Social Security Act. This proposed Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq.

The U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS) authorized funding under section 9817 of the American Rescue Plan Act of 2021 (ARPA) to expand and enhance services provided to home and community-based services waiver participants in the Medicaid program.

The Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services promulgated an Emergency Rule, which amended the provisions governing the Community Choices Waiver (CCW) in order to add medically tailored meals and assistive technology as covered services, as authorized under section 9817 of ARPA (*Louisiana Register*, Volume 48, Number 12). This proposed Rule continues the provisions of the November 18, 2022 Emergency Rule.

Title 50

**PUBLIC HEALTH—MEDICAL ASSISTANCE
Part XXI. Home and Community-Based Services
Waivers**

Subpart 7. Community Choices Waiver

Chapter 83. Covered Services

§8307. Personal Assistance Services

A. - C. ...

D. PAS may be provided through the “a.m.” and “p.m.” delivery option defined as follows:

1. ...

2. a minimum of one hour and a maximum of two hours of PAS provided to assist the participant at the end of

his/her day, referred to as the “p.m.” portion of this PAS delivery method; and

3. - 4. ...

5. "a.m. and p.m." PAS cannot be "shared";

D.6. - K....

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 37:3519 (December 2011), amended LR 39:320 (February 2013), LR 39:1778 (July 2013), LR 40:791 (April 2014), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 44:1898 (October 2018), LR 47:885 (July 2021), LR 49:

§8317. Home Delivered Meals

A. - C. ...

D. Medically tailored meals (MTMs) may be delivered to participants with chronic conditions when discharging from the hospital and/or nursing facility. In addition, participants will receive nutritional guidance to support healthy food choices for their third meal and snacks.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 37:3522 (December 2011), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 49:

§8331. Assistive Technology

A. Assistive technology services include the following:

1. an item, piece of equipment or product system, acquired commercially, that is used to increase, maintain or improve functional capabilities of participants; and

2. the assistance provided to the participant in the acquisition, set up and use of an assistive technology device:

a. evaluating to determine if an assistive technology device is appropriate for the participant;

b. purchasing the most appropriate assistive technology device for the participant; and

c. costs associated with the delivery, set up, and training.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 49:

Chapter 95. Reimbursement

§9501. Reimbursement and Rate Requirements

A. - A.6. ...

B. The following services shall be reimbursed at the authorized rate or approved amount of the assessment, inspection, installation/fitting, maintenance, repairs, adaptation, device, equipment, or supply item and when the service has been prior authorized by the plan of care:

1. - 5. ...

6. monitored in-home caregiving (MIHC) assessment;

7. certain nursing, and skilled maintenance therapy procedures; and

8. assistive technology.

C. - H. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 37:3525 (December 2011), amended LR 39:322 (February 2013), LR 39:508, 508 (March 2013), repromulgated LR 39:1048 (April 2013), amended LR 39:1779 (July 2013), LR 40:793 (April 2014), LR 42:897 (June 2016), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 44:1902 (October 2018), LR 47:886 (July 2021), LR 49:

Implementation of the provisions of this Rule may be contingent upon the approval of the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), if it is determined that submission to CMS for review and approval is required.

Family Impact Statement

In compliance with Act 1183 of the 1999 Regular Session of the Louisiana Legislature, the impact of this proposed Rule on the family has been considered. It is anticipated that this proposed Rule will have a positive impact on family functioning, stability and autonomy as described in R.S. 49:972 by providing medically tailored meals to CCW participants to improve their health and decrease hospitalizations, and assistive technology to improve their quality of life by allowing them to participate in their healthcare decisions and socialize with others virtually.

Poverty Impact Statement

In compliance with Act 854 of the 2012 Regular Session of the Louisiana Legislature, the poverty impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will have a positive impact on child, individual, or family poverty in relation to individual or community asset development as described in R.S. 49:973, by providing low-cost, specialized meals to CCW participants to improve their health and decrease hospitalizations, and assistive technology to those who would otherwise not have access to these services.

Small Business Analysis

In compliance with the Small Business Protection Act, the economic impact of this proposed Rule on small businesses has been considered. It is anticipated that this proposed Rule will have a positive impact on small businesses by providing reimbursement for services that were previously not covered.

Provider Impact Statement

In compliance with House Concurrent Resolution (HCR) 170 of the 2014 Regular Session of the Louisiana Legislature, the provider impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will have no impact on the staffing level requirements or qualifications required to provide the same level of service, but may reduce the total direct and indirect cost to the provider to provide the same level of service, and may enhance the provider's ability to provide the same level of service as described in HCR 170 since this proposed Rule provides reimbursement for services that were previously not covered.

Public Comments

Interested persons may submit written comments to Tara A. LeBlanc, Bureau of Health Services Financing, P.O. Box 91030, Baton Rouge, LA 70821-9030. Ms. LeBlanc is responsible for responding to inquiries regarding this

proposed Rule. The deadline for submitting written comments is at 4:30 p.m. on January 30, 2023.

Public Hearing

Interested persons may submit a written request to conduct a public hearing by U.S. mail to the Office of the Secretary ATTN: LDH Rulemaking Coordinator, Post Office Box 629, Baton Rouge, LA 70821-0629; however, such request must be received no later than 4:30 p.m. on January 9, 2023. If the criteria set forth in R.S. 49:953(A)(2)(a) are satisfied, LDH will conduct a public hearing at 9:30 a.m. on January 26, 2023 in Room 118 of the Bienville Building, which is located at 628 North Fourth Street, Baton Rouge, LA. To confirm whether or not a public hearing will be held, interested persons should first call Allen Enger at (225) 342-1342 after January 9, 2023. If a public hearing is to be held, all interested persons are invited to attend and present data, views, comments, or arguments, orally or in writing. In the event of a hearing, parking is available to the public in the Galvez Parking Garage, which is located between North Sixth and North Fifth/North and Main Streets (cater-corner from the Bienville Building). Validated parking for the Galvez Garage may be available to public hearing attendees when the parking ticket is presented to LDH staff at the hearing.

Dr. Courtney N. Phillips
Secretary

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES

RULE TITLE: Home and Community-Based Services Waivers—Community Choices Waiver Home Delivered Meals and Assistive Technology Services

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

It is anticipated that implementation of this proposed rule will have no programmatic fiscal impact to the state other than the cost of promulgation for FY 22-23. It is anticipated that \$864 (\$432 SGF and \$432 FED) will be expended in FY 22-23 for the state's administrative expense for promulgation of this proposed and final rule.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

It is anticipated that implementation of this proposed rule will increase federal revenue collections by approximately \$1,013,062 for FY 22-23, \$899,230 for FY 23-24, and \$0 for FY 24-25. The funding for these services is authorized under section 9817 of the American Rescue Plan Act of 2021 (ARPA) through March 31, 2025 or until it is exhausted. It is anticipated that \$432 will be collected for the federal share of the expense for promulgation of the proposed and final rule.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

This proposed rule continues the provisions of the November 18, 2022 Emergency Rule, which amended the provisions governing the Community Choices Waiver (CCW) in order to add medically tailored meals and assistive technology as covered services, as authorized under section 9817 of the American Rescue Plan Act of 2021 (ARPA). This proposed rule will benefit CCW participants by providing low-cost, specialized meals to improve their health and decrease hospitalizations. The proposed rule also provides iPads/Tablets

and Kindles to participants who otherwise would not have access to virtual technology, which will allow them to participate in their healthcare decisions and socialize with others virtually to improve their quality of life. Providers of CCW services will benefit from this proposed rule since it provides reimbursement for services that were previously not covered. It is anticipated that implementation of this proposed rule will increase payments to CCW providers by approximately \$1,012,630 for FY 22-23, \$899,230 for FY 23-24, and \$0 for FY 24-25.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

This rule has no known effect on competition and employment.

Tara A. LeBlanc
Medicaid Executive Director
2212#049

Alan M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

NOTICE OF INTENT

Department of Health Bureau of Health Services Financing

Inpatient Hospital Services Coverage of Genetic Testing of Critically Ill Infants (LAC 50:V.119)

The Department of Health, Bureau of Health Services Financing proposes to adopt LAC 50:V.119 in the Medical Assistance Program as authorized by R.S. 36:254 and pursuant to Title XIX of the Social Security Act. This proposed Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq.

Act 501 of the 2022 Regular Session of the Louisiana Legislature requires the Department of Health to provide coverage for genetic testing of critically ill infants participating in the Medical Assistance Program. In compliance with Act 501, the Department of Health, Bureau of Health Services Financing proposes to adopt provisions governing coverage of genetic testing of critically ill infants and to provide Medicaid reimbursement outside of the inpatient hospital per diem.

Title 50

PUBLIC HEALTH—MEDICAL ASSISTANCE Part V. Hospital Services

Subpart 1. Inpatient Hospitals Services

Chapter 1. General Provisions

§119. Coverage of Genetic Testing of Critically Ill Infants

A. Pursuant to Act 501 of the 2022 Regular Session of the Louisiana Legislature, effective for dates of service on or after January 1, 2023, the Medicaid Program shall provide reimbursement to inpatient hospitals for rapid whole genome sequencing testing of a Medicaid enrolled infant who meets all of the following criteria:

1. is one year of age or younger;
2. has a complex illness of unknown etiology; and
3. is receiving inpatient hospital services in an intensive care unit or in a pediatric care unit.

B. For the purposes of this Section, rapid whole genome sequencing testing includes individual sequencing, trio sequencing of the parents of the infant, and ultra-rapid sequencing.

C. Reimbursement. Reimbursement will be made as an add-on service in addition to the hospital payment for the inpatient hospital stay.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 49:

Family Impact Statement

In compliance with Act 1183 of the 1999 Regular Session of the Louisiana Legislature, the impact of this proposed Rule on the family has been considered. It is anticipated that this proposed Rule will have a positive impact on family functioning, stability and autonomy as described in R.S. 49:972, as it provides access to genetic testing, which may result in faster diagnosis for beneficiaries with rare conditions and allow parents to join physicians in making informed care decisions to avoid unnecessary additional testing and treatments.

Poverty Impact Statement

In compliance with Act 854 of the 2012 Regular Session of the Louisiana Legislature, the poverty impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will have a positive impact on child, individual, or family poverty in relation to individual or community asset development as described in R.S. 49:973, as it provides reimbursement for genetic testing that may result in faster diagnosis of rare conditions and avoid unnecessary additional testing and treatments, and other costly procedures.

Small Business Analysis

In compliance with the Small Business Protection Act, the economic impact of this proposed Rule on small businesses has been considered. It is anticipated that this proposed Rule will have no impact on small businesses.

Provider Impact Statement

In compliance with House Concurrent Resolution (HCR) 170 of the 2014 Regular Session of the Louisiana Legislature, the provider impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will have no impact on the staffing level requirements or qualifications required to provide the same level of service, but may reduce the total direct and indirect cost to the provider to provide the same level of service, and may enhance the provider's ability to provide the same level of service as described in HCR 170, since this proposed rule provides reimbursement outside of the inpatient hospital per diem for genetic testing of hospitalized infants.

Public Comments

Interested persons may submit written comments to Tara A. LeBlanc, Bureau of Health Services Financing, P.O. Box 91030, Baton Rouge, LA 70821-9030. Ms. LeBlanc is responsible for responding to inquiries regarding this proposed Rule. The deadline for submitting written comments is at 4:30 p.m. on January 30, 2023.

Public Hearing

Interested persons may submit a written request to conduct a public hearing by U.S. mail to the Office of the Secretary ATTN: LDH Rulemaking Coordinator, Post Office Box 629, Baton Rouge, LA 70821-0629; however, such request must be received no later than 4:30 p.m. on January

9, 2023. If the criteria set forth in R.S. 49:953(A)(2)(a) are satisfied, LDH will conduct a public hearing at 9:30 a.m. on January 26, 2023 in Room 118 of the Bienville Building, which is located at 628 North Fourth Street, Baton Rouge, LA. To confirm whether or not a public hearing will be held, interested persons should first call Allen Enger at (225) 342-1342 after January 9, 2023. If a public hearing is to be held, all interested persons are invited to attend and present data, views, comments, or arguments, orally or in writing. In the event of a hearing, parking is available to the public in the Galvez Parking Garage, which is located between North Sixth and North Fifth/North and Main Streets (cater-corner from the Bienville Building). Validated parking for the Galvez Garage may be available to public hearing attendees when the parking ticket is presented to LDH staff at the hearing.

Dr. Courtney N. Phillips
Secretary

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES

RULE TITLE: Inpatient Hospital Services Coverage of Genetic Testing of Critically Ill Infants

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

It is anticipated that the implementation of this proposed rule will result in estimated state programmatic costs of approximately \$913,770 for FY 22-23, \$1,161,679 for FY 23-24, and \$1,339,617 for FY 24-25. It is anticipated that \$540 (\$270 SGF and \$270 FED) will be expended in FY 22-23 for the state's administrative expense for promulgation of this proposed rule and the final rule.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

It is anticipated that the implementation of this proposed Rule will increase statutory dedicated revenue collections from the Medical Assistance Trust Fund by approximately \$61,168 for FY 22-23, \$194,119 for FY 23-24, and \$223,598 for FY 24-25. In addition, it is anticipated that the implementation of this proposed rule will increase federal revenue collections by approximately \$2,190,745 for FY 22-23, \$2,420,433 for FY 23-24, and \$2,791,178 for FY 24-25. It is anticipated that \$270 will be collected in FY 22-23 for the federal share of the expense for promulgation of this proposed rule and the final rule.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

This proposed rule adopts provisions governing coverage of genetic testing of critically ill infants participating in the Medical Assistance Program and provides Medicaid reimbursement outside of the inpatient hospital per diem, in compliance with Act 501 of the 2022 Regular Session of the Louisiana Legislature. Implementation of this proposed rule will provide access to genetic testing which may result in faster diagnosis for beneficiaries with rare conditions and allow parents to join physicians in making informed care decisions to avoid unnecessary additional testing and treatments. Implementation of this proposed rule is anticipated to increase payments for inpatient hospital services by \$3,103,975 for FY 22-23, \$3,582,112 for FY 23-24, and \$4,130,795 for FY 24-25, for genetic testing of critically ill infants.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT
(Summary)

This rule has no known effect on competition and employment.

Tara A. LeBlanc
Medicaid Executive Director
2212#050

Alan M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

NOTICE OF INTENT

**Department of Health
Bureau of Health Services Financing**

Nursing Facilities—Licensing Standards
(LAC 48:I.Chapter 97 and 9911)

The Department of Health, Bureau of Health Services Financing proposes to amend LAC 48:I.Chapter 97 and §9911 as authorized by R.S. 36:254 and 40:2009.1-2009.44. This proposed Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq.

The Department of Health, Bureau of Health Services Financing promulgated an Emergency Rule which amended the provisions governing the licensing of nursing facilities in order to comply with the requirements of the following Acts of the 2022 Regular Session of the Louisiana Legislature: Act 253 required the Department of Health to amend provisions governing the licensing of nursing facilities to provide requirements for generators or other department approved alternate electrical power sources; Act 461 required the department to promulgate provisions concerning healthcare workplace violence; and Act 522 directed the department to promulgate requirements and standards for nursing home emergency preparedness plans (*Louisiana Register*, Volume 48, Number 12). This proposed Rule is being promulgated to continue the provisions of the November 18, 2022 Emergency Rule.

Title 48

PUBLIC HEALTH-GENERAL

Part I. General Administration

Subpart 3. Licensing and Certification

Chapter 97. Nursing Facilities

Subchapter A. General Provisions

§9701. Definitions

* * *

Local Office of Emergency Preparedness (OEP)—a parish office of homeland security and emergency preparedness established pursuant to R.S. 29:727.

* * *

Nursing Facility—Repealed.

Nursing Home and/or Nursing Facility—a nursing home or nursing facility as defined in R.S. 40:2009.2 that is licensed by the Department of Health (LDH) in accordance with the requirements of R.S. 40:2009.3.

* * *

Unlicensed Sheltering Site—any location within or outside the state of Louisiana that is not licensed as a nursing facility by the LDH in accordance with the R.S. 40:2009.3. This includes nursing homes licensed or certified by other states or federal entities.

* * *

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and 40:2009.1-2009.44.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 42:1891 (November 2016), amended LR 46:1393 (October 2020), LR 49:

§9727. Incident Reporting Requirements

A. A nursing facility shall have written procedures for the reporting and documentation of actual and suspected incidents of abuse, neglect, misappropriation of property/funds, and suspicious death. Major injuries of unknown origin (e.g., fractures, burns, suspicious contusions, head injuries, etc.) for which the nursing facility is unable to determine the cause and could possibly be the result of abuse or neglect shall also be reported. Such procedures shall ensure that:

1. ...

2. all alleged violations involving abuse, neglect, exploitation, or mistreatment, including injuries of unknown origin and misappropriation of resident property, are reported immediately, but not later than two hours after the allegation is made or discovered, to the administrator of the facility and to other officials (including Health Standards Section (HSS) and law enforcement) where state law provides jurisdiction, if the events that caused the allegation involve abuse or result in a serious bodily injury; or not later than 24 hours after the events that caused an allegation which does not involve abuse or result in serious bodily injury, to the administrator of the facility and to other officials;

3. allegations of an event that do not involve abuse or result in serious bodily injury shall be reported to the administrator of the facility and HSS not later than 24 hours after the occurrence of or discovery of the incident. The nursing facility shall utilize the current department reporting database system to provide notification;

NOTE: Repealed.

4. - 5. ...

6. immediate attempts are made to notify other involved agencies and parties as appropriate;

7. immediate notification is made to the appropriate law enforcement authority whenever warranted; and

8. the nursing facility is required to maintain internet access and to keep the department informed of its active and monitored electronic mail address at all times.

B. - C. ...

D. A final report with the results of all investigations shall be reported to HSS within five working days of the incident through use of the current department reporting database system. The report shall include:

D.1. - F.8. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and 40:2009.1-2009.44.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 42:1900 (November 2016), amended LR 49:

§9761. Policies and Procedures

A. There shall be written policies and procedures that:

1. are available to staff, residents and legal representatives governing all areas of care and services provided by the nursing facility;

2. ensure that each resident receives the necessary care and services to promote the highest level of physical,

medical, psychosocial functioning, and well-being of each resident;

3. are developed with the advice of a group of professional personnel consisting of at least a currently licensed physician, the administrator, and the director of nursing services;

4. are revised as necessary, but reviewed by the professional personnel group referenced in Paragraph A.3 of this Section at least annually;

5. are available to admitting physicians;

6. reflect an awareness of, and provisions for, meeting the total physical, medical, and psychosocial needs of residents, including admission, transfer and discharge planning, and the range of services available to residents, including frequency of physician visits by each type of similarly diagnosed resident admitted; and

7. are approved by the governing body.

B. The nursing facility shall develop and implement written policies and procedures that prohibit mistreatment, neglect, and abuse of residents and misappropriation of resident property.

1. The nursing facility's personnel, visitors, and residents shall not use verbal, mental, sexual or physical abuse, corporal punishment, or involuntary seclusion.

2. The nursing facility shall develop and implement policies and procedures for screening and training employees, for protection of the residents, and for the preventing, identifying, investigating, and reporting of abuse.

C. The nursing facility shall develop and implement policies and procedures to prevent, respond to, report, and mitigate instances of healthcare workplace violence.

D. The nursing facility is not required to admit registered sex offenders; however, if the nursing facility admits a registered sex offender, then the nursing facility shall develop policies and procedures to ensure that residents, their family members, and/or their responsible parties or guardians are notified upon admission of sex offenders living in the facilities. Such policies and procedures must include provisions for addressing the safety and well-being of other residents, staff, and visitors. The requirement of notification shall continue for as long as the information is considered a public record.

E. The administrator or his designee is responsible, in writing, for the execution of such policies.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and 40:2009.1-2009.44.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 42:1903 (November 2016), amended LR 49:

§9767. Emergency Preparedness

A. General Provisions

1. The nursing facility shall have an emergency preparedness plan that conforms to the format and specifications and the licensing regulations promulgated herein (see the Louisiana Model Nursing Home Emergency Plan). The plan shall be designed to manage the consequences of all hazards, declared disasters, or other emergencies that either have the potential to disrupt and/or actually disrupt the nursing facility's ability to provide care and treatment, or threatens the health, safety, and welfare of the residents. The nursing facility shall follow and execute

its emergency preparedness plan in the event of a declared disaster or other emergency.

2. All nursing facilities shall submit their full, updated emergency preparedness plan to the department for approval on its current emergency preparedness webpage or electronic database. The emergency preparedness plan shall be signed by the nursing home's owner or owners, or any designee of such parties, and its administrator.

a. - d. Repealed.

3. The nursing facility's emergency preparedness plan shall include a shelter in place plan and an evacuation plan, both of which shall be activated at least once annually, either in response to an emergency or in a planned drill.

4. The nursing facility's emergency preparedness plan shall be individualized, site specific, current, and correct, and it shall comport with all requirements in Subsections C and D of this Section below.

5. The nursing facility's plan shall follow all applicable laws, standards, rules, or regulations, including R.S. 40:2009.25.

B. Emergency Preparedness Plan Approval Process

1. The review and approval of nursing home emergency preparedness plans by the department and each entity listed in Paragraph 3.a of this Subsection below shall be performed pursuant to each reviewing entities' respective areas of knowledge, expertise, or jurisdiction.

a. - d.iii. Repealed.

2. The departmental review and approval process required by this Subsection may include transmittal to any other local, parish, regional, or other state agencies or entities for consultation as the department deems appropriate. Each such agency or entity shall cooperate and contribute to the department's review and approval process, as required by state statute.

3. Departmental Review, Transmittal, and Approval of Emergency Preparedness Plan

a. The department shall conduct a review and, if appropriate, approval of each nursing home's emergency preparedness plan submitted to it via the current department emergency preparedness webpage or other electronic database. The departmental review and approval process required by this Subsection shall include transmittal of each nursing home's emergency preparedness plan to all of the following entities for review by those entities:

i. the Office of State Fire Marshal(OSFM);

ii. the Governor's Office of Homeland Security and Emergency Preparedness;

iii. the Department of Transportation and Development;

iv. the Louisiana Emergency Response Network;

v. the local office of emergency preparedness (OEP) of the parish in which the nursing home is located; and

vi. the local OEP of any parish in which an evacuation site, including any unlicensed sheltering site, as identified in the nursing home's emergency preparedness plan, is located.

b. After review of a nursing home emergency preparedness plan by the entities listed above, the department shall either issue final approval of the emergency preparedness plan or require changes, amendments, or other revisions to the emergency preparedness plan. The

department shall notify the nursing home that submitted the plan of the department's decision.

i. - vi. Repealed.

NOTE: Repealed.

4. Emergency Preparedness Plan Review by Other Entities

a. Each entity listed in Paragraph 3.a above of this Subsection shall review each nursing home emergency preparedness plan submitted to it, and shall submit one of the following documents to the department within 90 days of receipt of the emergency preparedness plan from the department:

i. a letter of preliminary approval of the nursing home's emergency preparedness plan; or

ii. a letter detailing what changes, amendments, or revisions to the emergency preparedness plan are necessary.

b. any entity listed in Paragraph 3.a of this Subsection that does not respond to the department concerning a nursing home emergency preparedness plan within 90 days of receipt of the plan shall be deemed to have been granted preliminary approval to the plan.

5. Revision and Resubmission of Emergency Preparedness Plan

a. Within 15 days of receipt by the nursing home of an electronic notification from the department that the nursing home's emergency preparedness plan requires changes, amendments, or revisions, the nursing home shall update and revise its emergency preparedness plan to incorporate the required changes, amendments, or revisions, and shall return a copy of the updated and revised emergency preparedness plan to the department.

b. After receipt of the nursing home's updated and revised emergency preparedness plan within the 15 day time period, the department may, at its discretion, schedule a conference call with the nursing home to get clarification, information, or edits from the nursing home; such conference call may result in the nursing home submitting an additional updated or revised emergency preparedness plan.

c. The department shall review the nursing home's updated and revised emergency preparedness plan to confirm that all required changes, amendments, or revisions have been incorporated into the plan, and it shall approve the emergency preparedness plan and issue an approval letter to the nursing home. If the required changes, amendments, or revisions have not been incorporated, the department shall reject the emergency preparedness plan and issue a letter of rejection to the nursing home. The department shall not issue a license to or renew a license of a nursing home that has received a letter of rejection of its emergency preparedness plan.

6. Each nursing home shall transmit, if available, a copy of its final, approved emergency preparedness plan and a copy of the approval letter from the department to the OSFM and the applicable local office or OEP. If the nursing home received a letter of rejection from the department, the nursing home shall transmit a copy of that letter to the OSFM and the applicable local office or OEP.

7. Emergency Preparedness Plan Submission Deadlines for Nursing Facilities Located in Coastal Parishes

a. The following deadlines shall apply to each nursing home located in the parishes of Acadia, Ascension, Assumption, Calcasieu, Cameron, Iberia, Jefferson,

Jefferson Davis, Lafayette, Lafourche, Orleans, Plaquemines, Saint Bernard, Saint Charles, Saint James, Saint John the Baptist, Saint Martin, Saint Mary, Saint Tammany, Tangipahoa, Terrebonne, and Vermilion.

b. Each nursing home located in a parish listed in this Paragraph shall develop its emergency preparedness plan on or before August 30, 2022, pursuant to Act 522 of the 2022 Regular Session of the Louisiana Legislature.

c. Each nursing home located in a parish listed in this Paragraph shall submit copies of its emergency preparedness plan to the department on or before September 1, 2022, pursuant to Act 522 of the 2022 Regular Session of the Louisiana Legislature.

d. The department shall transmit its notification letter approving or rejecting the emergency preparedness plan to all nursing homes located in a parish listed in this Paragraph on or before March 1, 2023.

e. The department shall either approve or reject all resubmitted emergency preparedness plans and transmit to the nursing homes located in a parish listed in this Paragraph an approval or rejection letter on or before May 15, 2023.

f. Each nursing home located in a parish listed in this Paragraph shall transmit a copy of its final, approved emergency preparedness plan and the approval letter from the department, or alternatively it shall transmit the rejection letter it received from the department, to the OSFM and the applicable local office or OEP on or before May 31, 2023.

8. Emergency Preparedness Plan Submission Deadlines for Nursing Facilities Located in Non-Coastal Parishes

a. The following deadlines shall apply to each nursing home located in the parishes of Allen, Avoyelles, Beauregard, Bienville, Bossier, Caddo, Caldwell, Catahoula, Claiborne, Concordia, DeSoto, East Baton Rouge, East Carroll, East Feliciana, Evangeline, Franklin, Grant, Iberville, Jackson, LaSalle, Lincoln, Livingston, Madison, Morehouse, Natchitoches, Ouachita, Pointe Coupee, Rapides, Red River, Richland, Sabine, Saint Helena, Saint Landry, Tensas, Union, Vernon, Washington, Webster, West Baton Rouge, West Carroll, West Feliciana, and Winn.

b. Each nursing home located in a parish listed in this Paragraph shall develop its emergency preparedness plan on or before August 30, 2023.

c. Each nursing home located in a parish listed in this Paragraph shall submit copies of its emergency preparedness plan to the department on or before September 1, 2023.

d. The department shall transmit its notification letter approving or rejecting the emergency preparedness plan to all nursing homes located in a parish listed in this Paragraph on or before March 1, 2024.

e. The department shall either approve or reject all resubmitted emergency preparedness plans and transmit to nursing homes located in a parish listed in this Paragraph an approval or rejection letter on or before May 15, 2024.

f. Each nursing home located in a parish listed in this Paragraph shall transmit a copy of its final, approved emergency preparedness plan and the approval letter from the department, or alternatively it shall transmit the rejection letter it received from the department, to the OSFM and the applicable local office or OEP on or before May 31, 2024.

9. Annual Review of Emergency Preparedness Plan

a. On or before October 31, 2023, and annually thereafter each nursing home located in the parishes listed in Subsection B.7 above shall review its emergency preparedness plan.

b. On or before October 31, 2024, and annually thereafter, each nursing home located in the parishes listed in Subsection B.8 above shall review its emergency preparedness plan.

c. In conducting the annual review required by this Paragraph, a nursing home shall review any changes in the state licensing rules and regulations and any changes in federal rules and regulations for nursing homes that have been adopted since the date of its last review of its emergency preparedness plan.

d. If a nursing home conducts a review and determines that no changes, modifications, or amendments to its emergency preparedness plan are necessary, then the nursing home shall notify all of the following entities of this determination on or before November 1 of the current review period:

i. the local OEP of the parish in which the nursing home is located;

ii. the local OEP of any parish in which a sheltering site, alternative sheltering site, or evacuation site, as identified in the nursing home's emergency preparedness plan, is located;

iii. the OSFM; and

iv. the department.

e. Each notification required by Subparagraph 9.d above shall be in the form of a written attestation signed by the owner or owners, or any designee of such parties, and the administrator of the nursing home submitting the notification. A nursing home may submit an attestation provided for in this Subparagraph for no more than four consecutive years.

f. If the nursing home conducting the annual review determines that any changes, modifications, or amendments are necessary, or if the nursing home has previously submitted an attestation, as provided for in Subparagraph 9.e above, for four consecutive years, then the nursing home shall furnish a full emergency preparedness plan, prepared in accordance with the requirements and procedures provided in Subsections A through D of Section 9767, to the department on or before November 1 of the current review period.

i. Following review of the full emergency preparedness plan submitted in accordance with Subparagraph 9.f above, the department shall notify the nursing home of its decision to either approve the plan or to require changes, amendments, or revisions to the plan on or before March 1 of the current review period.

ii. In the event that the department requires changes, amendments, or revisions to the nursing home's emergency preparedness plan, the nursing home shall update and revise the plan to incorporate the required changes, amendments, or revisions, and it shall resubmit the plan to the department within 15 days of its receipt of the electronic notification from the department that changes, amendments, or revisions are required.

iii. After receipt of the nursing home's amended plan within the 15 day time period, the department may, at its discretion, schedule a conference call with the nursing

home to get clarification, information, or edits from the nursing home; such conference call may result in the nursing home submitting an additional updated or revised emergency preparedness plan.

iv. The department shall review the nursing home's updated and revised emergency preparedness plan to confirm that the required changes have been incorporated into the updated plan and it shall issue an approval or rejection letter to the nursing home on or before May 15 of the current review period.

(a). The department shall not issue a license to or renew a license of a nursing home that has received a letter of rejection of its emergency preparedness plan.

v. The nursing home shall transmit a copy of its final, approved emergency preparedness plan and a copy of the approval letter, or in the alternative, a copy of the rejection letter it received from the department, to the OSFM and the applicable local office or OEP on or before May 31 of the current review period.

(a). The nursing home shall submit the final, approved emergency preparedness plan to the above recipients in electronic format, if available.

C. Contents of Emergency Preparedness Plan

1. Each nursing home's written emergency preparedness plan shall identify, at a minimum, a primary evacuation site location and a secondary evacuation site location for emergencies or disasters. Such evacuation site locations may include the premises of other nursing homes, unlicensed sheltering sites, or both. Each such plan shall include and identify, at a minimum, all of the following:

a. the procedures and criteria used for determining when the nursing facility will evacuate, including a listing of specific evacuation determinations for those procedures and criteria;

b. the procedures and criteria used for determining when the nursing facility will shelter in place, including a listing of specific sheltering in place determinations for those procedures and criteria;

c. a primary evacuation site and a secondary evacuation site, as well as any other alternative evacuation sites that the nursing home may have;

i. these evacuation sites shall be evidenced by written agreements or contracts that have been signed and dated by all parties; and

ii. a nursing facility shall accept only the number of residents for which it is licensed unless prior written approval has been secured from the department or if the nursing facility is acting as an evacuation site during a declared or non-declared emergency;

d. the policies and procedures for mandatory evacuations, which shall provide that if the state, parish, or local office of emergency preparedness (OEP) orders a mandatory evacuation of the parish or area in which the nursing facility is located, the nursing facility shall evacuate unless the nursing facility receives a written exemption from the ordering authority prior to the mandated evacuation;

e. a plan for monitoring emergency alerts or notifications, including weather warnings and watches, as well as evacuation orders from local and state emergency preparedness officials;

i. this monitoring plan shall identify the staff position who will perform the monitoring, what equipment

will be used for monitoring, and who should be contacted if needed; and

ii. the nursing facility shall have plans for monitoring during normal daily operations and when sheltering in place or during evacuations;

f. the policies and procedures for the delivery of essential care and services to residents, whether the residents are housed in the nursing facility, at an off-site location, or when additional residents are housed in the nursing facility during an emergency;

g. the policies and procedures for inspection by the nursing facility, for any damage to its entire facility during and post-event;

h. the provisions for the management of staff, including sufficient and competent staffing, and the distribution and assignment of staff responsibilities and functions, either within the nursing facility or at another location;

i. an executable plan for coordinating transportation services that are sufficient to accommodate the resident census and staff. The vehicles required for evacuating residents to another location shall be equipped with temperature controls. The plan shall include the following information:

i. a system to identify residents who require specialized transportation and medical needs, including the number of residents who will be classified as:

i. red—high risk residents who will need to be transported by advanced life support ambulance due to dependency on mechanical or electrical life sustaining devices or very critical medical condition;

ii. yellow—residents who are not dependent on mechanical or electrical life sustaining devices, but cannot be transported using normal means (buses, vans, cars), and may need to be transported by a BLS ambulance. However, in the event of inaccessibility of medical transport, buses, vans, or cars may be used as a last resort; or

iii. green—residents who need no specialized transportation and may be transported by car, van, bus, or wheelchair accessible transportation;

j. a copy of the primary and secondary written transportation agreements for the evacuation of residents and staff that is signed and dated by all parties. Vehicles that are owned by, or are at the disposal of the nursing facility, shall have written usage agreements that are signed, dated and shall include verification of ownership, which shall include a copy of the vehicle's title or registration and the following information:

i. the number and type of vehicles;

ii. the capacity of each vehicle;

iii. a statement that each vehicle is equipped with temperature controls; and

iv. a statement that each vehicle is in good working condition;

k. policies and procedures outlining how the facility will prevent and treat heat-related medical illnesses due to the failure of temperature controls or due to other circumstances during transport;

l. the nursing facility's procedures for notifying the evacuation host site(s) local OEP, and the resident's family, legal representative or designated contact, and the department when the facility initiates its evacuation plan.

The nursing facility shall have a staff position designated who is responsible for generating and documenting all attempts of notifications to the local OEPs, resident's family or responsible representative, and the department.

m. policies and procedures to ensure that an identification is directly attached to the nursing facility resident. The nursing facility shall designate a staff position to be responsible for this procedure and documentation. This identification shall remain directly attached to the resident during all phases of an evacuation and shall include, but not be limited to, the following information:

i. current and active diagnosis;

ii. medications, including dosage and times administered;

iii. allergies;

iv. special dietary needs or restrictions;

v. advanced directive, if applicable; and

vi. next of kin or responsible party, including contact information and relationship to resident;

n. policies and procedures, as well as a designated staff position who is responsible for ensuring, documenting, and certifying that a sufficient supply of the following items accompanies residents on buses or other transportation during all phases of an evacuation:

i. water;

ii. food;

iii. nutritional supplies and supplements;

iv. medication(s); and

v. other necessary supplies;

o. staffing patterns for evacuation and the procedures for ensuring that all residents have access to licensed nursing staff and that appropriate nursing services are being provided during all phases of the evacuation, including transport of residents. For buses or vehicles transporting 15 or more residents, licensed nursing staff shall accompany the residents on the bus or vehicle. A licensed therapist who is BLS certified, or paramedic, may substitute for licensed nursing staff;

p. a plan for sheltering in place if the nursing facility determines that sheltering in place is appropriate, which shall include:

i. policies and procedures to ensure that seven days of necessary supplies are on hand for the duration of the shelter in place, or including any written agreements, with timelines, for how supplies will be delivered prior to the emergency event. The plan shall include a staff position responsible for ensuring and documenting that the necessary supplies are available. Supplies shall include, but are not limited to:

(a). drinking water or fluids, a minimum of one gallon per day, per person;

(b). water for sanitation, a minimum of three gallons per day, per person;

(c). non-perishable food, including special diets;

(d). medications;

(e). medical supplies;

(f). personal hygiene supplies; and

(g). sanitary supplies;

ii. policies and procedures for maintaining and posting a communications plan for contacting emergency services. The nursing facility shall designate a staff position

to be responsible for documenting and contacting emergency services. The communication plan shall include:

- (a). the type of equipment to be used;
- (b). back-up equipment to be used if available;
- (c). the equipment's testing schedule; and
- (d). the power supply for the equipment being used;

iii. policies and procedures addressing the supply of emergency electrical power, including but not limited to a generator, in instances when primary electrical power in the nursing home is lost, but evacuation from the nursing home is not required. The plan shall include the type(s), size(s) and location(s) of the generator(s), if applicable. Such plan shall also include a statement indicating whether the nursing facility has a generator for sheltering in place. If the nursing facility has such a generator, the plan shall provide for fuel, either on hand or delivered prior to the emergency event. Such nursing facilities shall have fuel delivery agreements in place that will extend the uninterrupted operation of the generator or alternative electrical power source under full load to a total period of 168 hours for a single emergent event. Nursing facilities may interrupt operation of the generator or alternative electrical power source to conduct routine maintenance as recommended by manufacturer's specifications. If the nursing facility has such a generator, the plan shall also provide a list of the generator's capabilities including:

- (a). its ability to provide cooling or heating for all or designated areas in the nursing facility;
- (b). its ability to power an Office of Public Health (OPH)-approved sewerage system;
- (c). its ability to power an OPH-approved water system;

- (d). its ability to power medical equipment;
- (e). its ability to power refrigeration;
- (f). its ability to power lights; and
- (g). its ability to power communications;

iv. an assessment of the nursing facility's building to include, but not be limited to:

- (a). wind load or ability to withstand wind;
- (b). flood zone and flood plain information;
- (c). possible causes and probability of power failure;

- (d). age of building and type of construction; and
- (e). determinations of, and locations of interior safe zones;

v. policies and procedures for preventing and treating heat related medical illnesses due to the failure of or the lack of air conditioning, or due to other circumstances, while sheltering in place;

vi. staffing patterns for sheltering in place and for evacuation;

q. the nursing facility's location, physical street address with longitude and latitude, and current nursing facility contact information;

r. a risk assessment to determine the nursing facility's physical integrity. The physical integrity of the nursing facility and all relevant and available information shall be used in determining whether sheltering in place is appropriate. All elevations shall be given in reference to sea level or adjacent grade, as appropriate. If the facility has an unlicensed sheltering site(s) as an evacuation location, it

shall also perform a risk assessment of each unlicensed sheltering site. The assessment(s) shall be reviewed annually and updated as necessary. The risk assessment shall include the nursing facility's determinations and the following information:

i. the nursing facility's latitude and longitude as well as the latitude and longitude for any unlicensed sheltering site;

ii. the flood zone determination for the nursing facility and any unlicensed sheltering site and base flood elevation for each, and the nursing facility shall evaluate how these factors will affect the building(s);

iii. the elevations of the building(s), heating ventilation and air conditioning (HVAC) system(s), generator(s), fuel storage, electrical service, water system and sewer motor. If applicable, the nursing facility shall evaluate how these factors will affect the viability of a site considering projected flood and surge water depths;

iv. an evaluation of the building to determine its ability to withstand wind and flood hazards to include:

- (a). the construction type and age;
- (b). the roof type and wind load;
- (c). the windows, shutters, and wind load;
- (d). the wind load of shelter building; and
- (e). the location of interior safe zones;

v. an evaluation of each generator's fuel source(s), including refueling plans, fuel consumption rate and a statement that the output of the generator(s) will meet the electrical load or demand of the required (or designated) emergency equipment;

vi. the determinations based upon an evaluation of surroundings, including lay-down hazards or objects that could fall on the building and hazardous materials, such as:

- (a). trees;
- (b). towers;
- (c). storage tanks;
- (d). other buildings;
- (e). pipe lines;
- (f). chemical and biological hazards; and
- (g). fuels;

vii. the sea, lake and overland surge from hurricanes (SLOSH) modeling using the maximum's of the maximum envelope of waters (MOM) for the nursing facility's specific location and the findings for all categories of hurricanes. The nursing facility's plan shall include an evaluation of how this will or will not affect the nursing facility;

s. the nursing facility's plan shall provide for an evaluation of security risks and corresponding security precautions that will be taken for protecting residents, staff and supplies during and after an emergency event;

t. the nursing facility's plan shall include clearly labeled and legible floor plan(s) of the nursing facility's building(s). The nursing facility's plan shall include the following:

- i. the areas being used as shelter or safe zones;
- ii. the supply and emergency supply storage areas;
- iii. the emergency power outlets;
- iv. the communications center;
- v. the location of the posted emergency floor plan, which shall be easily accessible to staff; and

vi. a pre-designated command post.

2. - 17.f. Repealed.

D. Unlicensed Sheltering Sites

1. Additional plan requirements for unlicensed sheltering sites shall include documentation of the following for review and approval:

a. a detailed floor plan of the sheltering site, which shall include the bed layout of the sleeping area, and copies of any contracts or documentation related to the unlicensed shelters;

b. required approvals from the OSFM and the OPH as a shelter site;

c. a covered area at the entrance of the building to afford protection from the weather;

d. adequate parking area for transportation needs;

e. adequate driveway(s) to allow for easy ingress and egress of transportation;

f. that building and equipment are maintained in good repair and free of hazards;

g. the accessibility for all occupants, including those in wheelchairs or on crutches in accordance with the Americans with Disabilities Act;

h. the installment of, or a contract to provide, an alternate power source onsite which shall be sufficient to power HVAC, lighting, refrigeration, and adequate power outlets with a minimum fuel supply for 72 hours;

i. contract(s) for fuel supply deliveries;

j. a designated area for isolation;

k. an operational HVAC that maintains a comfortable temperature;

l. adequate ventilation, i.e., facility well ventilated and free of air hazards (e.g., smoke, fumes, etc.);

m. adequate space per person in sleeping area, a minimum of 60 square feet per person;

n. a kitchen area that meets OPH requirements for meal preparation or a food service contract to provide at least three meals daily per person onsite;

o. contract(s) for waste removal, including but not limited to bio-hazard;

p. adequate onsite or contracted laundry services that shall have separate areas for soiled and clean laundry;

q. adequate onsite or contracted number of working hand-washing stations, minimum one per 15 persons;

r. adequate onsite or contracted number of permanently fixed and/or portable working toilets, minimum one per 20 persons;

s. adequate onsite or contracted number of permanently fixed and/or portable working showers/bathing facilities, minimum one per 15 persons.

2. For the requirements in D.1.q, r, and s in this Subsection, an environmental waiver for the unlicensed shelter site may be granted, at the discretion of the department, if the department determines that the waiver does not jeopardize the health, safety, and welfare of the evacuated facility's residents. The facility must submit a request in writing which must include the following:

i. which specific environmental requirement waiver is being requested and why;

ii. how the facility plans to mitigate their inability to meet the requirement; and

iii. an explanation as to why the environmental requirement waiver would not endanger the health, safety, and welfare of the evacuated facility's residents.

3. On an annual basis, the department, in conjunction with the OSFM and other entities, shall inspect and survey unlicensed sheltering sites identified in nursing home emergency preparedness plans. Any refusal by an unlicensed sheltering site to allow an inspection or survey of the site by the department may result in rejection of the unlicensed sheltering site, and the emergency preparedness plan as a whole. If such a refusal to allow an inspection or survey occurs when nursing home residents are being sheltered at the site, the facility shall cooperate with the department for orderly evacuation of residents and staff. The department may revoke the license of the nursing home that refuses to allow an inspection or survey.

4. If any unlicensed sheltering site is located outside of Louisiana, including nursing homes, the OSFM and the department shall coordinate with their state agency counterparts in the state in which the site is located for inspection, review, approval, and surveys of the site.

5. The local OEP of the parish in which an unlicensed sheltering site is located shall inspect the site prior to October 15, 2022, and annually thereafter. The office shall inspect any new unlicensed sheltering site identified after May 31, 2023, in a nursing home emergency preparedness plan within 30 days of receiving the plan and annually thereafter, as required by statute. The local OEP may inspect the unlicensed sheltering site at such other times as the director of the local OEP deems necessary or appropriate.

E. Emergency Preparedness Notifications and Reports

1. A nursing facility shall enter current nursing facility information into the current department emergency preparedness webpage or electronic database for reporting.

a. The following information shall be entered or updated into the current department emergency preparedness webpage or electronic database for reporting before the fifteenth day of each month:

i. operational status;

ii. current census and number of licensed beds;

iii. emergency contact and evacuation location(s);

iv. emergency evacuation transportation needs categorized by the following types:

(a). number of red—high risk residents who will need to be transported by advanced life support ambulance due to dependency on mechanical or electrical life sustaining devices or very critical medical condition;

(b). number of yellow—residents who are not dependent on mechanical or electrical life sustaining devices, but cannot be transported using normal means (buses, vans, cars), may need to be transported by a basic life support (BLS) ambulance. However, in the event of inaccessibility of medical transport, buses, vans, or cars may be used as a last resort; or

(c). number of green—residents who need no specialized transportation and can be transported by car, van, bus, or wheelchair accessible transportation.

b. A nursing facility shall also enter or update the nursing facility's information upon request, or as required following notification of an emergency declared by the

secretary. Emergency events include, but are not limited to hurricanes, floods, fires, chemical or biological hazards, power outages, tornados, tropical storms, freezing temperatures, and other severe weather.

c. Upon notification of a declared emergency, and as required by the department, nursing facilities shall file an electronic report on the current department emergency preparedness webpage or electronic database for reporting.

i. the electronic report shall be filed as required by the department, but at least daily, throughout the duration of the emergency declaration.

ii. the electronic report shall include, but not be limited to, the following:

- (a). status of operation;
- (b). availability of beds;
- (c). generator status;
- (d). evacuation status;
- (e). shelter in place status;
- (f). utility status; and
- (g). other information requested by the department.

iii. the electronic report shall not be used to request resources.

F. Emergency Plan Activation

1. Shelter in Place

a. A shelter in place notification shall be sent within one hour of the facility's decision to shelter in place to the local OEP where the provider is located and to the department.

b. A shelter in place notification shall be sent to the resident's family, or responsible representative as far in advance as possible, but at least within 12 hours of the determination.

2. Evacuation and Temporary Relocation

a. The following applies to any nursing facility that evacuates, temporarily relocates or temporarily ceases operation at its licensed location due to an emergency:

i. the nursing facility shall immediately give written notice to HSS by hand delivery, facsimile or electronically of the following information:

(a). the date and approximate time of the evacuation;

(b). the sheltering evacuation site(s) to which the nursing facility is evacuating; and

(c). a list of residents being evacuated, which shall indicate the evacuation site for each resident;

ii. the evacuation sites' local OEP shall be provided the following within one hour of the decision to evacuate:

(a). the contact name and the telephone number that the evacuation sites' local OEP can call for information regarding the nursing facility's evacuation;

(b). the number of residents being evacuated to that location(s);

(c). the date and approximate time that the nursing facility is evacuating, and date and approximate time of arrival to the location(s);

(d). the site place or location to which the nursing facility is evacuating, including the:

- (i). name of the site(s);
- (ii). address(es); and
- (iii). telephone number(s).

iii. an evacuation notification shall also be sent to the resident's family, or responsible representative, and made as far in advance as possible, but at least within 12 hours of the determination to evacuate or after evacuation when communication is available. The notifications shall include:

(a). a telephone number that the family, or responsible representative, can call for information regarding the nursing facility's evacuation;

(b). name of the site(s); and

(c). address(es).

iv. the nursing facility shall notify the department within one hour of its decision regarding whether the nursing facility's residents will return to its licensed location from an unlicensed sheltering site, be placed in alternate licensed nursing facility beds, or request an extension to remain at the unlicensed sheltering site;

v. the nursing facility shall notify the current HSS emergency preparedness manager, or designee, as well as, the local OEP of the parish(es) in which nursing facility residents will be relocated to. Included in this notice, the nursing facility shall provide HSS with a list of all residents' names, dates of birth, and their locations within 48 hours of the decision to relocate from the unlicensed sheltering site.

vi. upon receipt of a nursing facility evacuation notification that includes unlicensed sheltering site(s), HSS and the OPH shall immediately conduct a site visit at the unlicensed sheltering site unless time, weather conditions, or other factors do not allow for such visit. The department may conduct onsite inspections of the unlicensed shelter site at any time deemed necessary or appropriate by the secretary of the department. If deemed to be necessary, HSS will conduct daily on-site visits while the unlicensed shelter site is occupied. The department's authority to conduct such visits will be in accordance with its authority to conduct onsite surveys of the nursing home, regardless of location.

3. In the event that a nursing facility evacuates, temporarily relocates or temporarily ceases operations at its licensed location due to an emergency event, the nursing facility shall be allowed to remain at an unlicensed sheltering site for a maximum of five days. A nursing facility may request one 15 day extension, not to exceed a total of 20 days to remain at the unlicensed sheltering site.

a. By noon on the fifth day of evacuation, the nursing facility shall submit a written request for extension to HSS if it desires to remain at the unlicensed sheltering site. The request shall include the reasons that the facility is unable to return to their facility and why their residents cannot be placed in an alternate nursing facility(ies). The request shall also include a written plan with timeline to either return residents to the licensed location or be placed in an alternate nursing facility(ies) within the extension period requested, if such is granted.

b. The extension shall only be granted for good cause shown and for circumstances beyond the control of the nursing facility. If extension is not granted, the facility must cooperate with the department for an orderly evacuation of residents and staff to the alternate location.

c. This extension shall be granted only if essential care and services to residents are ensured to continue at the current sheltering facility.

d. Upon expiration of the five days or upon expiration of the written extension granted to the nursing

facility, all residents shall be relocated to a nursing facility and HSS, and the local OEP shall be informed of the residents' new location(s).

G. Reopening of Nursing Facility and Repatriation of Residents

1. The evacuated nursing facility shall conduct and document an inspection of their entire facility for damages prior to submitting a written request to HSS to reopen at the licensed location. That request shall include:

- a. damage report;
- b. extent and duration of any power outages;
- c. re-entry census;
- d. staffing availability; and
- e. information regarding access to the community service infrastructure, such as hospitals, transportation, physicians, professional services, and necessary supplies, such as food, water, medical supplies, and medications.

2. Upon receipt of a reopening request, the department shall review and determine if reopening will be appropriate. The department may request additional information from the nursing facility as necessary to make determinations regarding reopening.

3. After review of all documentation, the department shall issue a notice of one of the following determinations:

- a. approval of reopening without survey;
- b. surveys required before approval to reopen will be granted. This may include surveys by the OPH, OSFM, and HSS; or
- c. denial of reopening.

H. After Action Written Summary

1. Upon request by the department, the nursing facility shall submit a written summary attesting how the nursing facility's emergency preparedness plan was followed and executed. The initial summary shall contain, at a minimum:

- a. pertinent plan provisions and how the plan was followed and executed;
 - i. - iii. Repealed.
- b. plan provisions that were not followed;
- c. reasons and mitigating circumstances for failure to follow and execute certain plan provisions;
- d. contingency arrangements made for those plan provisions not followed; and
 - i. - vi. Repealed.
- e. a list of all injuries and deaths of residents that occurred during execution of the plan, evacuation and temporary relocation including the date, time, causes, and circumstances of the injuries and deaths.

2. - 5.e. Repealed.

I. Inactivation of License Due to Declared Disaster or Emergency

1. A nursing facility in an area or areas that has been affected by a declared disaster or emergency and included in an executive order or proclamation of emergency or disaster issued in accordance with R.S. 29:724 or R.S. 29:766 may seek to inactivate its license for a period not to exceed two years, provided that the following conditions are met:

- a. the nursing facility shall submit written notification to HSS within 60 days of the date of the executive order or proclamation of emergency or disaster that:

- i. the nursing facility has experienced an interruption in the delivery of services at its licensed facility as a result of events that are the subject of such executive order or proclamation of emergency or disaster issued in accordance with R.S. 29:724 or R.S. 29:766;

- ii. the nursing facility intends to resume operation as a nursing facility in the same service area;

- iii. includes an attestation that the emergency or disaster is the sole causal factor in the interruption of the provision of services; and

- iv. pursuant to these provisions, an extension of the 60-day deadline may be granted at the discretion of the department;

- b. the nursing facility resumes operating as a nursing facility in the same service area within two years of issuance of an executive order or proclamation of emergency or disaster in accordance with R.S. 29:724 or R.S. 29:766, unless an extension has been granted;

- i. a nursing facility may request one extension, not to exceed an additional one year for good cause shown by the facility. This request for an extension may be granted at the sole discretion of the department;

- c. the nursing facility continues to pay all fees and costs due and owed to the department including, but not limited to , annual licensing fees and outstanding civil monetary penalties and/or civil fines; and

- d. the nursing facility continues to submit required documentation and information to the department, including but not limited to cost reports.

- e. Repealed.

2. Upon receiving a completed written request to inactivate a nursing facility license, if the department determines that all of the requirements have been met, the department shall issue a notice of inactivation of license to the nursing facility.

3. Upon completion of repairs, renovations, rebuilding or replacement of the facility, a nursing facility, which has received a notice of inactivation of its license from the department, shall be allowed to reinstate its license upon the following conditions being met:

- a. the nursing facility shall submit a written license reinstatement request to HSS within two years of the executive order or proclamation of emergency or disaster issued in accordance with R.S. 29:724 or R.S. 29:766, unless an extension has been granted;

- b. the license reinstatement request shall inform the department of the anticipated date of opening and shall request the scheduling of a licensing survey; and

- c. the license reinstatement request shall include a completed licensing application with appropriate licensing fees.

4. Upon receiving a completed written request to reinstate a nursing facility license, the department shall conduct a licensing survey. If the nursing facility meets the requirements for licensure and the requirements provided for in Paragraph I.3 above, the department shall issue a notice of reinstatement of the nursing facility license. The licensed bed capacity of the reinstated license shall not exceed the licensed bed capacity of the nursing facility at the time of the request to inactivate the license.

5. No change of ownership in the nursing facility shall occur until such nursing facility has completed repairs, renovations, rebuilding, or replacement construction and has resumed operations as a nursing facility.

6. The provisions of this Subsection shall not apply to a nursing facility that has voluntarily surrendered its license and ceased operation.

7. Failure to comply with any of the provisions of this Subsection shall be deemed a voluntary surrender of the nursing facility license.

J. Inactivation of License Due to Non-Declared Emergency or Disaster

1. A nursing facility in an area or areas that have been affected by a non-declared emergency or disaster may seek to inactivate its license, provided that the following conditions are met:

a. the nursing facility shall submit written notification to the HSS within 30 days of the date of the non-declared emergency or disaster stating that:

i. the nursing facility has experienced an interruption in the provisions of services as a result of events that are due to a non-declared emergency or disaster;

ii. the nursing facility intends to resume operation as a nursing facility in the same service area;

iii. the nursing facility attests that the emergency or disaster is the sole causal factor in the interruption of the provision of services;

iv. the nursing facility's initial request to inactivate does not exceed two years from the date of the non-declared emergency or disaster for the completion of repairs, renovations, rebuilding, or replacement of the facility; and

v. pursuant to these provisions, an extension of the 30 day deadline for initiation of request may be granted at the discretion of the department.

b. the nursing facility continues to pay all fees and costs due and owed to the department including, but not limited to, annual licensing fees and outstanding civil monetary penalties and/or civil fines;

c. the nursing facility continues to submit required documentation and information to the department, including but not limited to cost reports, and;

d. if major alterations are to be completed in areas where beds have been placed in alternate use, those beds shall be removed from alternate use and relicensed and re-enrolled as nursing facility beds at the time of request.

2. Upon receiving a completed written request to temporarily inactivate a nursing facility license, the department shall issue a notice of inactivation of license to the nursing facility.

3. Upon the facility's receipt of the department's approval of request to inactivate the facility's license, the facility shall have 90 days to submit plans for the repairs, renovations, rebuilding, or replacement of the facility to the OSFM and the OPH, as required.

4. The nursing facility shall resume operating as a nursing facility in the same service area within two years from the non-declared emergency or disaster, unless an extension has been granted.

5. A nursing facility may request one extension, not to exceed an additional six months for good cause shown by

the facility. This request for an extension may be granted at the sole discretion of the department.

6. Upon completion of repairs, renovations, rebuilding, or replacement of the facility, a nursing facility that has received a notice of inactivation of its license from the department shall be allowed to reinstate its license upon the following conditions being met:

a. the nursing facility shall submit a written license reinstatement request to HSS;

b. the license reinstatement request shall inform the department of the anticipated date of opening and shall request scheduling of a licensing survey; and

c. the license reinstatement request shall include a completed licensing application with appropriate licensing fees.

7. Upon receiving a completed written request to reinstate a nursing facility license, the department may conduct a licensing survey. The department may issue a notice of reinstatement if the facility has met the requirements for licensure including the requirements of this Subsection. The licensed bed capacity of the reinstated license shall not exceed the licensed bed capacity of the nursing facility at the time of the request to temporarily inactivate the license.

8. No change of ownership in the nursing facility shall occur until such nursing facility has completed repairs, renovations, rebuilding or replacement construction and has resumed operations as a nursing facility.

9. The provisions of this Subsection shall not apply to a nursing facility that has voluntarily surrendered its license and ceased operation.

10. Failure to comply with any of the provisions of this Subsection shall be deemed a voluntary surrender of the nursing facility license.

K. Temporary Inactivation of Licensed Nursing Facility Beds Due to Major Alterations

1. A nursing facility, which is undergoing major alterations to its physical plant, may request a temporary inactivation of a certain number of licensed beds provided that:

a. the nursing facility submits a written request to HSS seeking temporary inactivation of a certain number of its licensed bed capacity. Such written request shall include the following:

i. that the nursing facility has experienced or will experience a temporary interruption in the provision of services to its licensed bed capacity as a result of major alterations;

ii. an attestation that the renovations are the sole causal factor in the request for temporary inactivation of a certain number of its licensed beds;

iii. the anticipated start date of the temporary inactivation of a certain number of licensed beds;

NOTE: Repealed.

iv. the anticipated end date of the temporary inactivation of a certain number of licensed beds; and

v. the number of licensed beds requested to be inactivated temporarily;

b. the nursing facility ensures the health, safety, and welfare of each resident during the major alterations;

i. Repealed.

c. the nursing facility continues to provide, and each resident continues to receive, the necessary care and services to attain or maintain the resident's highest practicable physical, medical and psychosocial well-being, in accordance with each resident's comprehensive assessment and plan of care; and

d. if major alterations are to be completed in areas where beds have been placed in alternate use, those beds shall be removed from alternate use and relicensed and re-enrolled as nursing facility beds at the time of request.

2. Upon receiving a completed written request for temporary inactivation of a certain number of the licensed bed capacity of a nursing facility, if appropriate the department shall issue a notice of temporary inactivation of a certain number of the nursing facility's licensed beds.

3. No change of ownership in the nursing facility shall occur until such nursing facility has completed the major alterations and has resumed operating at prior approved licensed bed capacity.

a. - c. Repealed.

4. Upon completion of the major alterations and receiving a completed written request to reinstate the number of licensed beds of a nursing facility, the department may conduct a licensing survey. If the nursing facility meets the requirements for licensure and the requirements under this Subsection, the department may issue a notice of reinstatement of the nursing facility licensed bed capacity.

5. The licensed bed capacity after major alterations are completed shall not exceed the licensed bed capacity of the nursing facility at the time of the request to temporarily inactivate a certain number of its licensed bed capacity prior to renovations.

6. The provisions of this Subsection shall not apply to a nursing facility that has voluntarily surrendered its license and ceased operation.

K.7. - M.5. Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and 40:2009.1-2009.44.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 42:1905 (November 2016), amended LR 48:1290 (May 2022), LR 49:

Chapter 99. Nursing Facilities

Subchapter B. Physical Environment

§9911. General Provisions

A. - D. ...

E. No later than June 30, 2023, nursing facilities shall have a generator or other department approved alternate electrical power source in the event of the loss of primary electrical power. The department may grant a one-time extension, not to exceed six months, upon written application by a nursing facility that compliance has been delayed due to extraordinary and unforeseen circumstances. No extension shall be granted if the nursing facility fails to provide sufficient evidence of substantial compliance or good faith efforts to comply with the requirement deadline.

1. The generator or alternate electrical power source shall have a simultaneous capability of providing sufficient electrical power for all of the following:

- a. life safety systems;
- b. lighting in patient care areas;
- c. medical equipment in patient care areas;
- d. electrical components of the approved potable water system;

e. electrical components of the approved sewer systems;

f. operation of the nursing facility's medication dispensing and medication refrigeration systems;

g. operation of the nursing facility's dietary services and related refrigeration; and

h. operation of the nursing facility's laundry services.

2. For nursing facilities built or whose construction plans have been approved by the department:

a. prior to August 1, 2022, HVAC systems or portions of systems are required to maintain a safe indoor temperature and to be powered at a minimum 50 percent of the air conditioning systems and 50 percent of the heating systems in the facility.

b. on or after August 1, 2022, HVAC systems or portions of systems are required to maintain a safe indoor temperature and to be powered at a minimum 90 percent of the air conditioning systems and 90 percent of the heating systems in the facility.

3. The generator or alternate electrical power source shall be permanently installed onsite at the nursing facility and shall have fuel stored onsite at the nursing facility or delivered prior to an emergency event, in the following quantities:

a. for nursing facilities built or whose construction plans have been approved by the department prior to August 1, 2022, in an amount sufficient to operate the generator or alternative electrical power source under full load for 48 hours.

b. for nursing facilities approved for construction and built on or after August 1, 2022, in an amount sufficient to operate the generator or alternative electrical power source under full load for 72 hours.

4. Natural gas is an allowable fuel source and meets the onsite fuel requirement as long as there is an onsite propane tank sufficient in size to meet the fuel requirements, in the event a natural gas disruption occurs.

5. For nursing facilities built or whose construction plans have been approved by the department prior to August 1, 2022, the department may provide a waiver for the permanently installed generator or alternative electrical power source required by this Subsection if it is determined by the department that there is not sufficient physical space available or a governmental ordinance exists that makes it impossible to place a generator or alternative electrical power source and the fuel required by this Subsection on the premises of the nursing facility. Each nursing facility that receives a waiver pursuant to this Paragraph shall annually submit to the department for review and approval a plan to provide for the health and safety of the facility's residents in the event of power loss. The annual plan may incorporate, but is not limited to mobile generators, chillers, or evacuation.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and 40:2009.1-2009.44.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 42:1926 (November 2016), amended LR 49:

Family Impact Statement

In compliance with Act 1183 of the 1999 Regular Session of the Louisiana Legislature, the impact of this proposed Rule on the family has been considered. It is anticipated that

this proposed Rule will have no impact on family functioning, stability and autonomy as described in R.S. 49:972.

Poverty Impact Statement

In compliance with Act 854 of the 2012 Regular Session of the Louisiana Legislature, the poverty impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will have no impact on child, individual, or family poverty in relation to individual or community asset development as described in R.S. 49:973.

Small Business Analysis

In compliance with the Small Business Protection Act, the economic impact of this proposed Rule on small businesses has been considered. It is anticipated that this proposed Rule will have no impact on small businesses.

Provider Impact Statement

In compliance with House Concurrent Resolution (HCR) 170 of the 2014 Regular Session of the Louisiana Legislature, the provider impact of this proposed Rule has been considered. It is anticipated that this Emergency Rule will have no impact on the staffing level requirements or qualifications required to provide the same level of service.

Public Comments

Interested persons may submit written comments to Tasheka Dukes, RN, Health Standards Section, P.O. Box 3767, Baton Rouge, LA 70821. Ms. Dukes is responsible for responding to inquiries regarding this proposed Rule. The deadline for submitting written comments is at 4:30 p.m. on January 30, 2023.

Public Hearing

Interested persons may submit a written request to conduct a public hearing by U.S. mail to the Office of the Secretary ATTN: LDH Rulemaking Coordinator, Post Office Box 629, Baton Rouge, LA 70821-0629; however, such request must be received no later than 4:30 p.m. on January 9, 2023. If the criteria set forth in R.S. 49:953(A)(2)(a) are satisfied, LDH will conduct a public hearing at 9:30 a.m. on January 26, 2023 in Room 118 of the Bienville Building, which is located at 628 North Fourth Street, Baton Rouge, LA. To confirm whether or not a public hearing will be held, interested persons should first call Allen Enger at (225) 342-1342 after January 9, 2023. If a public hearing is to be held, all interested persons are invited to attend and present data, views, comments, or arguments, orally or in writing. In the event of a hearing, parking is available to the public in the Galvez Parking Garage, which is located between North Sixth and North Fifth/North and Main Streets (cater-corner from the Bienville Building). Validated parking for the Galvez Garage may be available to public hearing attendees when the parking ticket is presented to LDH staff at the hearing.

Dr. Courtney N. Phillips
Secretary

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES

RULE TITLE: Nursing Facilities

Licensing Standards

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

It is anticipated that implementation of this proposed rule will increase state general fund costs by approximately \$404,182 for FY 22-23, \$520,220 for FY 23-24, and \$520,220 for FY 24-25. Funding and staff to implement this proposed rule will be transferred from the Medical Vendor Administration and the Office of Public Health to the Health Standards Section. It is anticipated that \$6,588 will be expended in FY 22-23 for the state's administrative expense for promulgation of this proposed rule and the final rule.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

It is anticipated that the implementation of this proposed rule will not affect federal revenue collections since the licensing fees, in the same amounts, will continue to be collected.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

This proposed rule continues the provisions of the November 18, 2022 Emergency Rule, which amended the provisions governing the licensing of nursing facilities in order to: provide requirements for generators or other department approved alternate electrical power sources; adopt provisions concerning healthcare workplace violence; and adopt requirements and standards for nursing home emergency preparedness plans, in compliance with Acts 253, 461, and 522 of the 2022 Regular Session of the Louisiana Legislature. This proposed rule will be beneficial to staff and residents as it implements requirements to prevent workplace violence and procedures for ensuring safety during emergencies and disasters. This proposed rule may result in indeterminable costs to nursing facility providers for equipment and maintenance. Implementation of this proposed rule is anticipated to result in costs to the Department of Health of \$397,594 for FY 22-23, \$520,220 for FY 23-24, and \$520,220 for FY 24-25 for staffing; however, funding for the positions will be transferred from the Medical Vendor Administration and the Office of Public Health to the Health Standards Section.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

This rule has no known effect on competition and employment.

Tasheka Dukes, RN
Deputy Assistant Secretary
2212#051

Alan M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

NOTICE OF INTENT

Department of Insurance Office of the Commissioner

Regulation 31—Holding Company
(LAC 37:XIII.Chapter 1)

The Department of Insurance, pursuant to the authority of the Louisiana Insurance Code, R.S. 22:1 et seq., and in accordance with the Administrative Procedure Act, R.S. 49:950 et seq., hereby gives notice of its intent to amend Regulation 31—Holding Company. The purpose of the amendment to Regulation 31 is to add provisions for the continuity of essential services and functions provided by affiliates when an insurer is placed into receivership as provided in Act 713 of the 2022 Regular Legislative Session and to implement the revisions to the NAIC Insurance Holding Company System Model Regulation (#450) related to transactions subject to notice regarding agreements for

cost sharing services and management services and group capital calculations.

Title 37
INSURANCE

Part XIII. Regulations

Chapter 1. Regulation Number 31—Holding Company

§128. Group Capital Calculation

A. The lead state commissioner has the discretion to exempt the ultimate controlling person from filing the annual group capital calculation if the lead state commissioner makes a determination based upon that filing that the insurance holding company system meets all of the following criteria:

1. has annual direct written and unaffiliated assumed premium (including international direct and assumed premium), but excluding premiums reinsured with the Federal Crop Insurance Corporation and Federal Flood Program, of less than \$1,000,000,000;

2. has no insurers within its holding company structure that are domiciled outside of the United States or one of its territories;

3. has no banking, depository or other financial entity that is subject to an identified regulatory capital framework within its holding company structure;

4. the holding company system attests that there are no material changes in the transactions between insurers and non-insurers in the group that have occurred since the last filing of the annual group capital; and

5. the non-insurers within the holding company system do not pose a material financial risk to the insurer's ability to honor policyholder obligations.

B. Where an insurance holding company system has previously filed the annual group capital calculation at least once, the lead state commissioner has the discretion to accept in lieu of the group capital calculation a limited group capital filing if:

1. the insurance holding company system has annual direct written and unaffiliated assumed premium (including international direct and assumed premium), but excluding premiums reinsured with the Federal Crop Insurance Corporation and Federal Flood Program, of less than \$1,000,000,000; and all of the following additional criteria are met:

a. has no insurers within its holding company structure that are domiciled outside of the United States or one of its territories;

b. does not include a banking, depository or other financial entity that is subject to an identified regulatory capital framework; and

c. the holding company system attests that there are no material changes in transactions between insurers and non-insurers in the group that have occurred since the last filing of the report to the lead state commissioner and the non-insurers within the holding company system do not pose a material financial risk to the insurers ability to honor policyholder obligations.

C. For an insurance holding company that has previously met an exemption with respect to the group capital calculation pursuant to Subsection A and B, the lead state commissioner may require at any time the ultimate controlling person to file an annual group capital calculation,

completed in accordance with the NAIC Group Capital Calculation Instructions, if any of the following criteria are met:

1. any insurer within the insurance holding company system is in a Risk-Based Capital action level event as set forth in R.S. 22:611 et seq. and R.S. 22:631 et seq. or a similar standard for a non-U.S. insurer; or

2. any insurer within the insurance holding company system meets one or more of the standards of an insurer deemed to be in hazardous financial condition as defined in §1305 and §1307 of Regulation 43; or

3. any insurer within the insurance holding company system otherwise exhibits qualities of a troubled insurer as determined by the lead state commissioner based on unique circumstances including, but not limited to, the type and volume of business written, ownership and organizational structure, federal agency requests, and international supervisor requests.

D. A non-U.S. jurisdiction is considered to "recognize and accept" the group capital calculation if it satisfies the following criteria:

1. with respect to an insurance holding company system described in R.S. 22:691.6(M)(2)(d):

a. the non-U.S. jurisdiction recognizes the U.S. state regulatory approach to group supervision and group capital, by providing confirmation by a competent regulatory authority, in such jurisdiction, that insurers and insurance groups whose lead state is accredited by the NAIC under the NAIC Accreditation Program shall be subject only to worldwide prudential insurance group supervision including worldwide group governance, solvency and capital, and reporting, as applicable, by the lead state and will not be subject to group supervision, including worldwide group governance, solvency and capital, and reporting, at the level of the worldwide parent undertaking of the insurance or reinsurance group by the non-U.S. jurisdiction; or

b. where no U.S. insurance groups operate in the non-U.S. jurisdiction, that non-U.S. jurisdiction indicates formally in writing to the lead state with a copy to the International Association of Insurance Supervisors that the group capital calculation is an acceptable international capital standard. This will serve as the documentation otherwise required in Subsection D.1.a.

2. the non-U.S. jurisdiction provides confirmation by a competent regulatory authority in such jurisdiction that information regarding insurers and their parent, subsidiary, or affiliated entities, if applicable, shall be provided to the lead state commissioner in accordance with a memorandum of understanding or similar document between the commissioner and such jurisdiction, including but not limited to the International Association of Insurance Supervisors Multilateral Memorandum of Understanding or other multilateral memoranda of understanding coordinated by the NAIC. The commissioner shall determine, in consultation with the NAIC Committee Process, if the requirements of the information sharing agreements are in force.

E. A list of non-U.S. jurisdictions that "recognize and accept" the group capital calculation will be published through the NAIC Committee Process:

1. a list of jurisdictions that "recognize and accept" the group capital calculation pursuant to R.S.

22:691.6(M)(2)(d), is published through the NAIC Committee Process to assist the lead state commissioner in determining which insurers shall file an annual group capital calculation. The list will clarify those situations in which a jurisdiction is exempted from filing under R.S. 22:691.6(M)(2)(d). To assist with a determination under R.S. 22:691.6(M)(3), the list will also identify whether a jurisdiction that is exempted under either R.S. 22:691.6(M)(2)(c) or (d) requires a group capital filing for any U.S. based insurance group's operations in that non-U.S. jurisdiction.

2. for a non-U.S. jurisdiction where no U.S. insurance groups operate, the confirmation provided to meet the requirement of Subsection D.1.b will serve as support for recommendation to be published as a jurisdiction that "recognizes and accepts" the group capital calculation through the NAIC Committee Process.

3. if the lead state commissioner makes a determination pursuant to R.S. 22:691.6(M)(2)(d) that differs from the NAIC List, the lead state commissioner shall provide thoroughly documented justification to the NAIC and other states.

4. upon determination by the lead state commissioner that a non-U.S. jurisdiction no longer meets one or more of the requirements to "recognize and accept" the group capital calculation, the lead state commissioner may provide a recommendation to the NAIC that the non-U.S. jurisdiction be removed from the list of jurisdictions that "recognize and accepts" the group capital calculation.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:611 et seq., R.S. 22:631 et seq., and R.S. 22:691.1-691.27.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 49:

§129. Transactions Subject to Prior Notice—Notice Filing

A. ...

B. Agreements for cost sharing services and management services shall at a minimum and as applicable:

1. identify the person providing services and the nature of such services;

2. set forth the methods to allocate costs;

3. require timely settlement, not less frequently than on a quarterly basis, and compliance with the requirements in the Accounting Practices and Procedures Manual;

4. prohibit advancement of funds by the insurer to the affiliate except to pay for services defined in the agreement;

5. state that the insurer will maintain oversight for functions provided to the insurer by the affiliate and that the insurer will monitor services annually for quality assurance;

6. define records and data of the insurer to include all records and data developed or maintained under or related to the agreement that are otherwise the property of the insurer, in whatever form maintained, including, but not limited to, claims and claim files, policyholder lists, application files, litigation files, premium records, rate books, underwriting manuals, personnel records, financial records or similar records within the possession, custody or control of the affiliate;

7. specify that all records and data of the insurer are and remain the property of the insurer and;

a. are subject to control of the insurer;

b. are identifiable; and

c. are segregated from all other persons' records and data or are readily capable of segregation at no additional cost to the insurer;

8. state that all funds and invested assets of the insurer are the exclusive property of the insurer, held for the benefit of the insurer and are subject to the control of the insurer;

9. include standards for termination of the agreement with and without cause;

10. include provisions for indemnification of the insurer in the event of gross negligence or willful misconduct on the part of the affiliate providing the services and for any actions by the affiliate that violate provisions of the agreement required in §129.B.11 through §129.B.15 of this regulation;

11. specify that, if the insurer is placed in supervision, seizure, conservatorship or receivership pursuant to R.S. 22:2001-2044 and R.S. 22:731-737:

a. all of the rights of the insurer under the agreement extend to the receiver or commissioner to the extent permitted by R.S. 22:691.7; and

b. all records and data of the insurer shall be identifiable and segregated from all other persons' records and data or readily capable of segregation at no additional cost to the receiver or the commissioner;

c. a complete set of records and data of the insurer will immediately be made available to the receiver or the commissioner, shall be made available in a usable format and shall be turned over to the receiver or commissioner immediately upon the receiver or the commissioner's request, and the cost to transfer data to the receiver or the commissioner shall be fair and reasonable; and

d. the affiliated person(s) will make available all employees essential to the operations of the insurer and the services associated therewith for the immediate continued performance of the essential services ordered or directed by the receiver or commissioner;

12. specify that the affiliate has no automatic right to terminate the agreement if the insurer is placed into supervision, seizure, conservatorship or receivership pursuant to R.S. 22:2001-2044 and R.S. 22:731-737;

13. specify that the affiliate will provide the essential services for a minimum period of time after termination of the agreement, if the insurer is placed into supervision, seizure, conservatorship or receivership pursuant to R.S. 22:2001-2044 and R.S. 22:731-737, as ordered or directed by the receiver or commissioner. Performance of the essential services will continue to be provided without regard to pre-receivership unpaid fees, so long as the affiliate continues to receive timely payment for post-receivership services rendered, and unless released by the receiver, commissioner or supervising court;

14. specify that the affiliate will continue to maintain any systems, programs, or other infrastructure notwithstanding supervision, a seizure, conservatorship or receivership pursuant to R.S. 22:2001-2044 and R.S. 22:731-737, and will make them available to the receiver or commissioner as ordered or directed by the receiver or commissioner for so long as the affiliate continues to receive timely payment for post-receivership services rendered, and unless released by the receiver, commissioner, or supervising court; and

15. specify that, in furtherance of the cooperation between the receiver and the affected guaranty association(s) and subject to the receiver's authority over the insurer, if the insurer is placed into supervision, seizure, conservatorship or receivership pursuant to R.S. 22:2001-2044 and R.S. 22:731-737, and portions of the insurer's policies or contracts are eligible for coverage by one or more guaranty associations, the affiliate's commitments under §129.B.11 through §129.B.14 of this regulation will extend to such guaranty association(s).

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:691.1-691.27, R.S. 22:731-737, and R.S. 22:2001-2044.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Commissioner of Insurance, LR 18:274 (March 1992), amended LR 19:501 (April 1993), amended by the Office of the Commissioner, LR 41:1298 (July 2015), amended LR 49:

Family Impact Statement

1. Describe the Effect of the Proposed Regulation on the Stability of the Family. The proposed regulation should have no measurable impact upon the stability of the family.

2. Describe the Effect of the Proposed Regulation on the Authority and Rights of Parents Regarding the Education and Supervision of their Children. The proposed regulation should have no impact upon the rights and authority of parents regarding the education and supervision of their children.

3. Describe the Effect of the Proposed Regulation on the Functioning of the Family. The proposed regulation should have no direct impact upon the functioning of the family.

4. Describe the Effect of the Proposed Regulation on Family Earnings and Budget. The proposed regulation should have no direct impact upon family earnings and budget.

5. Describe the Effect of the Proposed Regulation on the Behavior and Personal Responsibility of Children. The proposed regulation should have no impact upon the behavior and personal responsibility of children.

6. Describe the Effect of the Proposed Regulation on the Ability of the Family or a Local Government to Perform the Function as Contained in the Rule. The proposed regulation should have no impact upon the ability of the family or a local governmental unit to perform the function as contained in the rule.

Poverty Impact Statement

1. Describe the Effect on Household Income, Assets, and Financial Security. The proposed regulation should have no effect on household income assets and financial security.

2. Describe the Effect on Early Childhood Development and Preschool through Postsecondary Education Development. The proposed regulation should have no effect on early childhood development and preschool through postsecondary education development.

3. Describe the Effect on Employment and Workforce Development. The proposed regulation should have no effect on employment and workforce development.

4. Describe the Effect on Taxes and Tax Credits. The proposed regulation should have no effect on taxes and tax credits.

5. Describe the Effect on Child and Dependent Care, Housing, Health Care, Nutrition, Transportation and Utilities Assistance. The proposed regulation should have no effect on child and dependent care, housing, health care, nutrition, transportation, and utilities assistance.

Small Business Analysis

The impact of the proposed regulation on small businesses as defined in the Regulatory Flexibility Act has been considered. It is estimated that the proposed action is not expected to have a significant adverse impact on small businesses. The agency, consistent with health, safety, environmental and economic welfare factors has considered and, where possible, utilized regulatory methods in the drafting of the proposed regulation that will accomplish the objectives of applicable statutes while minimizing the adverse impact of the proposed regulation on small businesses.

1. Identification and Estimate of the Number of the Small Businesses Subject to the Proposed Rule. The proposed regulation should have no measurable impact upon small businesses.

2. The Projected Reporting, Record Keeping, and Other Administrative Costs Required for Compliance with the Proposed Rule, Including the Type of Professional Skills Necessary for Preparation of the Report or Record. The proposed regulation should have no measurable impact upon small businesses.

3. A Statement of the Probable Effect on Impacted Small Businesses. The proposed regulation should have no measurable impact upon small businesses.

4. Describe any Less Intrusive or Less Costly Alternative Methods of Achieving the Purpose of the Proposed Rule. The proposed regulation should have no measurable impact on small businesses; therefore, there is no less intrusive or less costly alternative method of achieving the purpose of the proposed regulation.

Provider Impact Statement

1. Describe the Effect on the Staffing Level Requirements or Qualifications Required to Provide the Same Level of Service. The proposed regulation will have no effect.

2. The Total Direct and Indirect Effect on the Cost to the Provider to Provide the Same Level of Service. The proposed regulation will have no effect.

3. The Overall Effect on the Ability of the Provider to Provide the Same Level of Service. The proposed regulation will have no effect.

Public Comments

Interested persons who wish to make comments may do so by writing to Jennifer Land, Staff Attorney, Louisiana Department of Insurance, P.O. Box 94214, Baton Rouge, LA 70804-9214, by faxing comments to 225-342-1632, or electronically at regulations@ldi.la.gov. Comments will be accepted through the close of business, 4:30 p.m., January 9, 2023.

James J. Donelon
Commissioner

**FISCAL AND ECONOMIC IMPACT STATEMENT
FOR ADMINISTRATIVE RULES**

RULE TITLE: Regulation 31—Holding Company

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

The proposed rule is not anticipated to result in implementation costs or savings to the state or local governmental units. The proposed rule is being amended to add the provisions from Act 713 of the 2022 Regular Legislative Session and to implement the revisions to the NAIC Insurance Holding Company System Model Regulation. These provisions from Act 713 are related to the continuity of essential services and functions provided by affiliates when an insurer is placed into receivership. The NAIC model revisions are related to group capital calculations and transactions subject to notice regarding agreements for cost-sharing and management services.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

The proposed rule will have no impact on state or local governmental revenues.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

The proposed rule is not anticipated to have any costs and/or economic benefits to directly affected persons, small businesses, or non-governmental groups. The rule is being amended to comply with NAIC standards and to implement provisions from Act 713 of the 2022 Regular Legislative Session.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

The proposed rule will have no impact upon competition and employment in the state.

S. Denise Gardner
Chief of Staff
2212#058

Alan M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

NOTICE OF INTENT

**Department of Public Safety and Corrections
Corrections Services**

**Equal Employment Opportunity
(LAC 22:I.201)**

In accordance with the provisions of the Administrative Procedure Act (R.S. 49:950), the Department of Public Safety and Corrections, Corrections Services, hereby gives notice of its intent to amend the contents of §201, Equal Employment Opportunity (Includes Americans with Disabilities Act).

The proposed revisions are in accordance with the provisions of ACT 103 of the 2022 Regular Session. Several definitions have been revised for compliance with Americans with Disabilities Act (ADA) and ACT 103. A provision was added regarding employee voluntary self-identification of disability, as well as, provisions regarding training in accordance with ACT 103. Also revised Section

203 Request for Accommodation form and Section 205 Medical Inquiry form.

Title 22

**CORRECTIONS, CRIMINAL JUSTICE AND LAW
ENFORCEMENT**

Part I. Corrections

Chapter 2. Adult Services

§201. Equal Employment Opportunity (Includes Americans with Disabilities Act)

A. Purpose—to establish the secretary's commitment to equal employment opportunities and to establish formal procedures regarding reasonable accommodation for all employees, applicants, candidates for employment (including qualified ex-offenders) and visitors.

B. Applicability—deputy secretary, undersecretary, chief of operations, assistant secretary, regional wardens, wardens, director of Probation and Parole, director of Prison Enterprises, employees, applicants, candidates for employment (including ex-offenders) and visitors. Each unit head is responsible for ensuring that appropriate unit written policy and procedures are in place to comply with the provisions of this regulation.

C. Policy. It is the secretary's policy to assure equal opportunities to all employees, applicants, candidates for employment (including ex-offenders) and visitors without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, political affiliation, disability or age and ensure compliance with the requirements of the Americans with Disabilities Act as amended.

1. Exceptions:

a. where age, sex or physical requirements constitute a bona fide occupational qualification necessary for proper and efficient operations;

b. where the implications of nepotism restrict such employment or employment opportunity; and

c. preferential hiring will be given to veterans in accordance with Chapter 22 of the Civil Service rules.

2. Equal opportunities will be provided for employees in areas of compensation, benefits, promotion, recruitment, training and all other conditions of employment. Notices of equal employment opportunities will be posted in prominent accessible places at each employment location.

3. Equal access to programs, services and activities will be provided to all visitors. Advance notice of a requested accommodation shall be made during normal business hours to ensure availability at the time of the visit.

4. If any employee is made aware of or has reason to believe that a visitor to the unit is deaf or hard of hearing, the employee is required to advise the person that appropriate auxiliary aids and services will be provided. The employee should then direct the visitor to the unit ADA coordinator or designee. Likewise, such information must be forthcoming in response to any request for auxiliary aid or services.

5. Harassment, discrimination, or retaliating against an individual related to exercising or aiding in the exercise of ADA rights or for having a relationship or association with another individual with a known disability is prohibited.

D. Definitions

Age Discrimination in Employment Act (ADEA)—a federal law to protect individuals 40 years of age and over from arbitrary discrimination in employment practices, unless age is a bona fide occupational qualification. The state of Louisiana has passed similar legislation and the term *ADEA* will refer to both federal and state prohibitions against age discrimination in this regulation.

Americans with Disabilities Act (ADA)—a comprehensive federal law which requires the state to provide equal access for people with disabilities to programs, services and activities of the department, as well as to employment opportunities.

Applicant—a person who has applied for a job and whose qualification for such is unknown.

Auxiliary Aids and Services (AAS)—external aids used to assist people who are hearing-impaired and may include qualified sign language or oral interpreters, written materials, telephone handset amplifiers, assistive listening devices, telephones compatible with hearing aids, closed caption decoders, open and closed captioning, telecommunication devices for deaf persons (TDD/TTY), videotext displays or other effective methods of making aurally delivered materials available to individuals with hearing impairments.

Candidate—a person who has successfully passed the required test and/or meets the Civil Service minimum qualifications for the job sought.

Disability—a physical or mental impairment that substantially limits one or more of the major life activities of an individual, a record of such impairment, or being regarded as having such impairment.

a. *Impairment*—any physiological, mental or psychological disorder or condition, including those that are episodic or in remission, that substantially limits one or more major life activities when active.

b. Major Life Activities:

i. generally, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, sitting, reaching, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, interacting with others and working; and

ii. the operation of a major bodily function, including functions of the immune system, special sense organs and skin; normal cell growth; and digestive, genitourinary, bowel, bladder, neurological, brain, respiratory, circulatory, cardiovascular, endocrine, hemic, lymphatic, musculoskeletal and reproductive functions. The operation of a major bodily function includes the operation of an individual organ within a body system.

Effective Communication—communication with persons with disabilities that is as effective as communication with others. Effective communication is achieved by furnishing appropriate auxiliary aids and services where necessary to afford qualified individuals with disabilities an equal opportunity to participate in or benefit from the services, programs or activities of the department.

Equal Employment Opportunity (EEO)—the operation of a system of human resources administration which ensures an environment that will provide an equal opportunity for public employment to all segments of society based on individual merit and fitness of applicants

without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, political affiliation, disability or age (except where sex, age or physical requirements constitute a bona fide occupational qualification necessary to the proper and efficient operation of the department).

a. The Equal Employment Opportunity Commission (EEOC) is the federal regulatory body for EEO related complaints and charges.

Essential Functions—the fundamental and primary job duties of a position. Considerations in determining whether a function is essential includes such factors as the written job description; whether the reason the position exists is to perform that function; the limited number of employees available to perform that function; and the degree of expertise required to perform the function.

Ex-Offender—those offenders who are no longer in the physical custody of the DPS and C or no longer under the supervision of the Division of Probation and Parole.

Family and Medical Leave—leave for which an employee may be eligible under the provisions of the Family and Medical Leave Act of 1993.

HDQ ADA Director—the department representative responsible for facilitating the appeals process relative to any grievances filed regarding a request for accommodation.

Qualified Individual—

a. Under Title I of the ADA, an individual with a disability who meets the requisite skill, experience, and education requirements for the position and who can perform the essential functions of the position held or applied for, with or without reasonable accommodation(s).

b. Under Title II of the ADA, an individual with a disability who meets the essential eligibility requirements for the receipt of services or the participation in programs or activities provided by the department, with or without reasonable accommodation(s).

Reasonable Accommodation—

a. Under Title I, a modification or adjustment to the work environment that will enable a qualified individual with a disability to:

i. participate in the testing, application and/or interview process;

ii. perform the essential functions of the job; or

iii. provide equal opportunity to the benefits and privileges of employment.

b. Under Title II, a modification that permits an individual with a disability to effectively communicate with the department and/or ensure equal opportunity relative to department's programs, services, activities and facilities.

Requestor—a person who requests an accommodation for a disability.

Seniority—a calculation of the number of years of service to the department and used in comparison to another employee's or applicant's number of years of service to the department. Seniority may be used as a factor in employment decisions but may never be used as a substitute for age discrimination.

Substantially Limits—an impairment that prevents the ability of an individual to perform one or more major life activities as compared to most people in the general population when taking into consideration factors such as the nature, severity, duration and long-term impact of the

condition. Such consideration must be regardless of any mitigating measures such as modifications, auxiliary aids or medications used to lessen the effects of the condition (except for use of ordinary eyeglasses or contact lenses).

Undue Hardship—an accommodation that would be unduly costly, extensive, substantial or disruptive, in light of factors such as the size of the agency, the resources available and the nature of the agency's business operations.

Unit ADA Coordinator—the department representative responsible for facilitating the interactive evaluation process relative to any request for accommodation.

Visitor—for the purpose of this regulation, includes any non-departmental employee who is authorized to be on institutional grounds (i.e., volunteers, contractors, official guests, etc.).

E. Procedures

1. Coordination of ADA Matters

a. The secretary will establish and designate a headquarters ADA director. This employee is charged with reviewing, recording and monitoring ADA matters for the department and will also advise and make recommendations to the secretary or designee regarding such matters as appropriate.

b. Each unit head will designate a primary unit ADA coordinator to coordinate unit ADA matters. All units will prominently post the name and telephone number of the unit ADA coordinator.

2. Initiation of Requests for Accommodation

a. A qualified requestor with a known disability of a long term nature should be accommodated where reasonably possible, providing the accommodation does not constitute a danger to the requestor or others and does not create undue hardship on the department or its employees.

NOTE: If a requestor is an employee, applicant or a candidate for employment, the requestor must be able to perform the essential functions of the job with the accommodation.

b. The ADA does not require that a request for accommodation be provided in any particular manner; therefore, regardless of the form of the request, the department is deemed to have knowledge of the request.

c. If an employee, applicant or candidate for employment informs anyone in his chain of command, human resources personnel, or the unit ADA coordinator that he has difficulty performing his job duties or participating in a program or service due to a medical condition, the employee, applicant or candidate for employment is deemed to have made a request for accommodation.

d. If a visitor informs an employee that he cannot participate in the visiting process or any other program or service that the visitor is entitled to participate in, the visitor is deemed to have made a request for accommodation.

e. Once any request for accommodation has been received, either verbally or in writing, the person receiving the request should immediately relay the request to the unit ADA coordinator or designee.

f. An employee, applicant, candidate for employment (including ex-offenders) or visitor may complete a request for accommodation form. The requestor completing the form must forward it to the unit ADA coordinator for processing.

3. Accommodation Review Process

a. Upon receipt of the completed request for accommodation the unit ADA coordinator shall seek to determine the following:

i. if the medical condition is of a temporary or long-term nature;

ii. if additional medical information is needed from the requestor's physician or through a second opinion. At this point of the process, the unit ADA coordinator may inform the requestor that his doctor must complete an essential function form to determine the following:

NOTE: The Index of Essential Job Functions contains the Essential Functions Form for each job category used by the department. The index is maintained in each unit Human Resources Office.

(a). what specific symptoms and functional limitations are creating barriers;

(b). if the limitations are predictable, subject to change, stable or progressive;

(c). how the limitations impact the requestor's ability to perform the job, and for visitors, how the limitations impact the requestor's ability to fully participate in the activities and services to which the requestor is entitled;

iii. if the condition impairs a major life activity.

b. If questions remain, staff may contact the requestor's treating physician directly.

c. The unit ADA coordinator shall ensure that a formal request is submitted on a request for accommodation form and provide assistance as needed.

d. Once the initial information is gathered, a dialogue between the requestor and unit ADA coordinator regarding resolution of the problem shall begin.

e. The discussion may include the following matters.

i. If the problem is of a temporary nature, use of FMLA or sick leave, Workman's Compensation or a temporary halt of some job duties may resolve the problem.

ii. If a second medical opinion is needed, this is to be performed at the department's cost with a physician of the department's choosing.

iii. If the medical condition is deemed to be a qualified disability, this decision shall be documented.

NOTE: Due to the nature of a disability, the disability may progress and require additional modifications at a later date.

iv. The goal is to reach a mutually acceptable accommodation, if possible. The secretary or designee shall make the final decision on what the actual accommodation will be.

f. An exception to the need to make an accommodation includes, but is not limited to the following:

i. not a qualified disability;

ii. threat to one's self or others. Considerations are as follows:

(a). duration of the risk involved;

(b). nature and severity of the potential harm;

(c). likelihood that potential harm will occur;

(d). imminence of the potential harm;

(e). availability of any reasonable accommodation that might reduce or eliminate the risk;

iii. undue hardship. The decision to use this exception may be made by the headquarters ADA director only after consultation with the undersecretary. A written description of the problem with the requested accommodation and the difficulty anticipated by the unit should be sent to the headquarters ADA director. Considerations are as follows:

- (a). scope of the accommodation;
- (b). cost of the accommodation;
- (c). budget of the department;
- (d). longevity of the accommodation;

iv. alteration would fundamentally change the nature of the program, service or activity.

4. Decision

a. Consideration should be given on a case-by-case basis.

b. The granting of leave can be an accommodation.

c. Once the decision to accommodate or not is made, the requestor shall be informed in writing of the decision of whether or not an accommodation will be made, the reason for the decision and the accommodation to be made, if applicable, including any specific details concerning the accommodation. The requestor must also be informed of the right to appeal the decision to the headquarters ADA director.

i. For each decision, a copy of the packet of information containing the decision, all information used to reach the decision and all attempts to resolve the request shall be forwarded to the headquarters ADA director. The unit ADA coordinator shall ensure that all requests for accommodation are properly and timely entered into the department's ADA database within five days of receiving the request.

d. The original of the packet of information concerning the request with the decision shall be maintained in a confidential file for three years after the requestor has left the department's employ or notification has been received that a requestor no longer wishes to be afforded visitor status.

5. Appeal

a. The requestor has the right to appeal the unit's decision for the following reasons only:

- i. the finding that the medical condition is not a qualifying disability;
- ii. the denial of an accommodation; or
- iii. the nature of the accommodation.

b. The requestor shall forward the appeal of the unit's decision to the headquarters ADA director.

c. At the discretion of the headquarters ADA director, additional information or medical documentation may be requested.

d. After consultation with the undersecretary, the headquarters ADA director shall issue a written appeal decision to the requestor, a copy of which shall also be sent to the appropriate unit head and unit ADA coordinator.

e. No additional appeal will be accepted as the headquarters ADA director's decision shall be final.

6. Recordkeeping

a. The headquarters ADA director shall maintain records of all requests for accommodation made throughout the department.

b. To ensure uniform and consistent compliance with the provisions of this regulation, the headquarters ADA director shall maintain and track statistics concerning all requests for accommodation from employees, applicants, candidates for employment and visitors and the nature and outcome of the accommodations requested.

c. If a pattern becomes apparent following review of the statistics, the headquarters ADA director will seek to remedy and/or correct any problems noted and report same to the secretary.

7. Essential Job Functions

a. General Requirements

i. Employment candidates must complete an essential job functions statement at the time of interview for employment and/or return to employment. Employees may be required to complete an up-to-date essential functions form as appropriate and when deemed necessary by the unit head in order to ensure that the fundamental mission of the department is sustained.

ii. The index of essential job functions contains the essential functions form for each job category used by the department. The index is maintained in each unit human resources office.

b. Employee and Unit Specific Requirements. Employees may be required to complete an up-to-date essential job functions statement and medical inquiry form in the following or similar circumstances:

- i. exhaustion of sick leave and if applicable, exhaustion of FMLA entitlement;
- ii. expressed inability to participate in a mandatory work-related activity (i.e., training) and/or to perform essential job functions; and/or
- iii. appearance of the inability to perform essential job functions.

iv. The medical inquiry form must include a prognosis, whether the condition is temporary or permanent, when the condition began, the expected date of return to duty, whether the employee is able to perform the essential functions of the job with or without accommodation and a description of the accommodation needed.

NOTE: In certain situations, a second opinion by an independent third party may be appropriate. This opinion will be at the unit's expense.

8. Conciliation Options for EEO and ADA Concerns

a. Should a requestor feel that he has experienced discrimination in any manner or not be satisfied with the results of the request for accommodation, he may seek conciliation through Corrections Services' grievance process, through the EEOC for employment related complaints and/or the U.S. Department of Justice (USDOJ) for issues not related to employment.

b. Requestors are encouraged to use the internal procedures to address and resolve complaints to the extent possible. Use of these internal procedures does not restrict a requestor from filing with the appropriate federal agency prior to exhaustion of the department's internal process(es).

9. Departmental Conciliation of EEO and ADA Matters

a. The headquarters Human Resources Section shall coordinate the department's response(s) to complaints and charges of discrimination regarding equal employment

opportunity matters. Complaints/charges may be addressed through the internal grievance procedure when such a grievance has been filed and heard at the appropriate unit levels.

b. For formal charges generated by the EEOC or the USDOJ, the unit head and the applicable unit's attorney will develop the department's response and conciliation opinion (if applicable.) Any unit receiving a "notice of charge of discrimination" document from the EEOC or similar notice from the USDOJ shall forward the notice to the headquarters legal services upon receipt.

10. Employment Applications of Ex-Offenders

a. All applications for employment received from persons who are ex-offenders will be reviewed by a committee appointed by the secretary. The committee shall be composed of the chief of operations or designee, assistant secretary or designee and the headquarters human resources director or designee. Consideration will be given to the unit head's recommendation, the ex-offender's crime, sentence, institutional record and length of time free from other convictions. The committee's recommendations will then be submitted to the secretary or designee for review with the unit head.

b. Ex-offenders will not be eligible for employment in positions which require an employee to carry a firearm in the performance of duty. This restriction is based on applicable Civil Service job qualifications and state and federal law.

11. Employee Voluntary Self-Identification

a. All employees, at the time of employment and every five years thereafter, shall complete a voluntary self-identification of disability form for effective data collection and analysis of the percentage of individuals with disabilities employed by the department. This form only requests disclosure regarding whether an employee has a disability without reference to, or identification of, the actual impairment, disability, or medical condition.

12. Training

a. The department shall provide comprehensive annual training for all departmental personnel regarding this regulation.

b. All supervisor shall receive a minimum of one hour of education and training on the ADA within 90 days of hire or appointment to a supervisory position, and every three years thereafter.

c. ADA coordinators shall receive a minimum of one hour of education and training on the ADA within 90 days of hire or appointment to the role of ADA agency coordinator and every three years thereafter.

13. Additional information pertaining to EEO, ADA and ADEA is available in any human resources office.

AUTHORITY NOTE: Promulgated in accordance with R.S. 49:950.

HISTORICAL NOTE: Promulgated by the Department of Public Safety and Corrections, Corrections Services, LR 26:1308 (June 2000), amended LR 35:2194 (October 2009), LR 42:2191 (December 2016), LR 49:

§203. Request for Accommodation

REQUEST FOR ACCOMMODATION FORM

SECTION 1: REQUESTOR INFORMATION

Requestor's Name: _____

Requestor is (check only one): Employee Job Applicant Visitor / Public

Requestor's Email Address: _____

Requestor's Phone #: _____

If Requestor is an employee, also provide: Job Title: _____

Division/Unit: _____ Supervisor's Name: _____

CONFIDENTIALITY STATEMENT:
A request for accommodation, including medical and other relevant information, is privileged and may only be released as appropriate to individuals with a business need to know.

SECTION 2: REQUESTED ACCOMMODATION (Attach a separate sheet if additional space is needed)

A. Please describe the nature of your disability and the functional limitations resulting therefrom.

B. Check the type of accommodation requested. Use the blank space provided to the right to further explain reason for the requested accommodation.

Accommodation Type:		Reason for Accommodation Request:
1.	<input type="checkbox"/> Application/Testing Process Explain the specific application/testing requirement for which accommodation is requested: (→)	
2.	<input type="checkbox"/> Participating in a Job Interview Identify the Date/Time/Location of the job interview for which an accommodation is requested: (→)	
3.	<input type="checkbox"/> Performance of Essential Functions of Your Job Explain the job duties for which accommodation is requested: (→)	
4.	<input type="checkbox"/> Benefits/Privileges of Employment Explain the benefits or privileges of employment for which accommodation is requested: (→)	

5.	<input type="checkbox"/> Pregnancy, Childbirth or Related Condition Explain how pregnancy, childbirth or a related condition affects your ability to perform your job: (→)	
6.	<input type="checkbox"/> Effective Communication Identify the Date/Time/Location for which an auxiliary aid is requested: (→)	
7.	<input type="checkbox"/> Access to Programs, Services or Facilities Identify the specific program, service or facility for which access is needed: (→)	

C. Describe the accommodation(s) requested. *(Identify specific auxiliary aid requested, if applicable)*

Requestor's Signature: _____ Date: _____

SECTION 3: TO BE COMPLETED BY AGENCY ADA COORDINATOR

CONFIDENTIALITY STATEMENT:
 A request for accommodation, including medical and other relevant information, is privileged and may only be released as appropriate to individuals with a business need to know.

a. Process Tracking:

1. Date the Request for Accommodation was prepared/signed by Requestor: _____
2. Date the Request for Accommodation was received by ADA Coordinator: _____
3. Date of initial contact with Requestor *(initiate interactive process)*: _____
4. Date(s) of follow-up contact with Requestor: _____
5. Date the Request for Accommodation was discussed with Appointing Authority: _____
6. If applicable, date the alternative accommodation(s) was discussed with Requestor: _____
7. Date Requestor was notified of final accommodation determination: _____
8. Date Requestor was notified of internal grievance procedure: _____

b. Is there an equally effective accommodation(s), other than the one requested, that would satisfy the request? *(Consult with www.askjan.org or Louisiana Rehabilitation Services, if necessary)* Yes No

If Yes, please identify: _____

c. Was an accommodation granted? Yes *(Proceed to section d. below)* No *(Proceed to section e. below)*

d. Accommodation Granted:

Was the accommodation granted the same as the one requested? Yes No

If an alternative, equally effective accommodation was granted, explain the reason this option was selected rather than the one requested. *(Reason for alternative accommodation should be fully documented.)*

e. Denial of Accommodation:

Check reason for denial **and** provide further explanation below. *(Denials should be fully documented.)*

ADA Title I (for employees / applicants)

- Requestor is not a "qualified individual" *(See Definition in agency policy)*
- Accommodation would pose an undue hardship to the agency
- Accommodation would not eliminate direct threat of substantial harm to safety of individual or others

ADA Title II (for visitor / public)

- Requestor is not a "qualified individual" *(See Definition in agency policy)*
- Accommodation would fundamentally alter the nature of the agency's service, program or activity
- Accommodation would not eliminate direct threat of substantial harm to safety of individual or others

ADA Coordinator's Signature: _____ Date: _____

AUTHORITY NOTE: Promulgated in accordance with R.S. 46:225, et seq.

HISTORICAL NOTE: Promulgated by the Department of Public Safety and Corrections, Corrections Services, LR 26:1311 (June 2000), amended LR 49:

§205. Medical Inquiry Form

MEDICAL INQUIRY FORM
RESPONSIVE TO ACCOMMODATION REQUEST

FOR COMPLETION BY EMPLOYEE

Employee's Name: _____

CONFIDENTIALITY STATEMENT:
A request for accommodation, including medical and other relevant information, is privileged and may only be released as appropriate to individuals with a business need to know.

Authorization for Release of Medical Information
I authorize my Healthcare Provider to release medical information that is specifically related to and necessary for my employer to determine whether I have a disability for which an accommodation(s) may be needed. I authorize my Healthcare Provider to speak directly to my Agency ADA Coordinator in regards to my medical condition and its effects upon my ability to perform the essential functions of my job. I understand that I may refuse to sign this Authorization. However, I understand that my failure to permit these disclosures may impact my employer's ability to fully address my request for accommodation.
Employee's Signature: _____ Date: _____

FOR COMPLETION BY HEALTHCARE PROVIDER

SECTION 1: Questions to determine whether employee has a disability

For reasonable accommodation under the Americans with Disabilities Act (ADA), an employee has a disability if he/she has an impairment that substantially limits one or more major life activities or has a record of such an impairment. The following information may help to determine whether an employee has a disability:

Does the employee have a physical or mental impairment?

- Yes (proceed to section A. below) No (discontinue completion of form)

A. What is the impairment or the nature of the impairment? _____

B. Does the impairment substantially limit a major life activity as compared to the general population?

- Yes No

C. What major life activity(s) and/or major bodily function(s) is limited?

Major Life Activities:

- Bending Eating Lifting Seeing Standing
Breathing Hearing Performing Manual Tasks Sitting Thinking
Caring for Self Interacting with Others Reaching Sleeping Walking
Concentrating Learning Reading Speaking Working
Other:

Major Bodily Functions:

- Bladder Circulatory Hemic Neurological Respiratory
Bowel Digestive Immune Normal Cell Growth Special Sense
Brain Endocrine Lymphatic Operation of an Organ Organs & Skin
Cardiovascular Genitourinary Musculoskeletal Reproductive
Other:

D. Describe any functional limitations caused by the impairment: _____

SECTION 2: Questions to help determine whether an accommodation is needed.

An employee with a disability is entitled to an accommodation only when the accommodation is needed because of the disability. The following information may help determine whether the requested accommodation is needed because of the disability:

A. What job duties is the employee unable to perform or having difficulty performing?

B. How does the employee's functional limitation(s) interfere with his/her ability to perform required job duties?

Health Care Provider's Signature: _____

Date: _____

Health Care Provider's Name (Printed): _____

Practice Specialty: _____

Clinic Name: _____

Address: _____

Telephone #: _____ Fax #: _____

RETURN COMPLETED FORM DIRECTLY TO [INSERT NAME], AGENCY ADA COORDINATOR

By Fax to: (225) 342-XXXX; or, email to: firstname.lastname@la.gov

AUTHORITY NOTE: Promulgated in accordance with R.S. 16:225, et seq.

HISTORICAL NOTE: Promulgated by the Department of Public Safety and Corrections, Corrections Services, LR 26:1312 (June 2000), amended LR 49:

Family Impact Statement

Amendment to the current Rule should not have any known or foreseeable impact on family formation, stability or autonomy, as described in R.S. 49:972.

Poverty Impact Statement

The proposed Rule should not have any know or foreseeable impact on poverty as described in R.S. 49:973.

Small Business Analysis

The proposed Rule should not have any known or foreseeable costs and/or benefits to directly affected persons, small business, or non-governmental groups.

Provider Impact Statement

The proposed Rule should not have any known or foreseeable impact on providers as defined by HCR 170 of the 2014 Regular Legislative Session.

Public Comments

Written comments may be addressed to Natalie LaBorde, Executive Counsel, Department of Public Safety and Corrections, P.O. Box 94304, Baton Rouge, LA 70804 until 4:30 p.m. on January 9, 2023.

James M. Le Blanc
Secretary

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES

RULE TITLE: Equal Employment Opportunity

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

The proposed revisions will not result in costs or savings to state or local governmental units.

The proposed changes implement provisions of Act 103 of the 2022 Regular Session with respect to employee disability and equal employment opportunity.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

There will be no effect on revenue collections of state or local governmental units as a result of the proposed rule changes.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

There will be no effect on costs or benefits to directly affected person, small businesses, or non-governmental groups.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

There will be an effect on employment for those persons with disabilities in regard to the Equal Employment Opportunity policy of the Department of Public Safety & Corrections. This policy will ensure compliance with the requirements of the Americans with Disabilities Act as amended.

Thomas Bickham III
Undersecretary
2212#032

Alan M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

NOTICE OF INTENT

**Department of Public Safety and Corrections
Corrections Services**

Offender Mail and Publications
(LAC 22:I.313)

In accordance with the provisions of the Administrative Procedure Act (R.S. 49:950), the Department of Public Safety and Corrections, Corrections Services, hereby gives notice of its intent to amend the contents of §313, Offender Mail and Publications.

The Department of Public Safety and Corrections, Corrections Services, proposes that facility staff shall verify the sender of all privileged mail in order to ensure that the mail was sent by the identified sender's office and is not fraudulently labeled as privileged mail, as well as, minor technical revisions.

Title 22

CORRECTIONS, CRIMINAL JUSTICE AND LAW ENFORCEMENT

Part I. Corrections

Chapter 3. Adult Services

§313. Offender Mail and Publications

A. Purpose. To state the secretary's policy regarding offender mail privileges, including publications, at all adult institutions.

B. Applicability. Deputy secretary, undersecretary, chief of operations, regional wardens, and wardens. Each warden is responsible for ensuring that appropriate unit written policy and procedures are in place to comply with the provisions of this regulation and for conveying its content to all offenders and affected employees.

C. Notice. Staff at each reception and diagnostic center or unit handling initial reception and diagnostic functions shall inform each offender in writing promptly after arrival

of the department's rules for handling of offender mail, utilizing the notification of mail handling form. This form shall be filed in the offender's master record.

1. The current offender population in DPS and C facilities is required to complete the notification of mail handling form upon the issuance of this revision to Section 313 of this Part.

D. Policy. It is the secretary's policy that offenders may communicate with persons or organizations subject to the limitations necessary to protect legitimate penological objectives (including but not limited to deterrence of crime, rehabilitation of offenders, maintenance of internal/external security of an institution or maintenance of an environment free of sexual harassment), to prevent the commission of a crime, and to protect the interests of crime victims.

E. Definitions

DPS and C Facility—includes, for the purpose of this regulation, state operated prison facilities, and state privately operated prison facilities.

E-mail—a document created or received on an electronic mail system, including any attachments, such as word processing and other electronic documents, which may be transmitted with the message. *E-mail* is correspondence to or from an offender in an electronic format that is provided through the department's contractor for offender services.

Farm Mail Correspondence—offender to offender mail when housed at the same institution.

Indigent Offenders—those who do not have sufficient funds in the appropriate account(s) at the time of their request for indigent services and/or supplies to fully cover the cost of the requested services or supplies.

Nudity—pictorial depiction of genitalia or female breasts (with the nipple or areola exposed).

Privileged Correspondence (includes mail to or from)—

- a. identifiable courts;
- b. identifiable prosecuting attorneys;
- c. identifiable probation and parole officers, parole board and pardon board;
- d. state and local executive officers;
- e. identifiable attorneys;
- f. secretary, deputy secretary, undersecretary, assistant secretary, chief of operations and other officials and administrators of grievance systems of the department;
- g. local, state or federal law enforcement agencies and officials.

Publication—book, booklet, pamphlet, or similar document, or a single issue of a magazine, periodical, newsletter, newspaper, magazine/newspaper clipping, article printed from the internet, plus other materials addressed to a specific offender such as advertising brochures, flyers and catalogs.

Sexually Explicit Material—any book, pamphlet, magazine, or printed matter however reproduced, which contains any picture, photograph, drawing or similar visual representation or image of a person or portion of the human body which depicts nudity, sexual conduct, sadomasochistic abuse, bestiality and homosexuality. Explicit sexual material also includes that which contains detailed verbal descriptions or narrative accounts of sexually explicit conduct. A

publication will not be prohibited solely because it contains pictorial nudity where such publication has a medical, educational or anthropological purpose.

F. Offender Correspondence. Offenders may write and receive letters and e-mails subject to the following provisions.

1. Frequency. There shall be no limit placed on the number of letters or e-mails an offender may write or receive at personal expense and no limit placed on the length, language or content except when there is reasonable belief that limitation is necessary to protect public safety or institutional order, including restrictions relative to what may be reasonably stored in space provided and security. Offenders in segregation can write and receive letters on the same basis as offenders in general population.

2. Timely handling. All mail, incoming and outgoing, shall be handled without unjustified delay. Letters should generally not be held more than 48 hours and packages shall not be held more than 72 hours. This does not prohibit the holding of mail for offenders who are temporarily absent from the institution and does not include weekends and holidays or emergency situations. When mail is received for an offender who has been transferred to another institution or released, the institution where the mail is received should attempt to forward the mail to him. The collection and distribution of mail is never to be delegated to an offender. Mail will be given directly to the receiving offender by an employee.

3. Correspondence. An offender may write to anyone except:

- a. a victim of any criminal offense for which the offender has been convicted or for which disposition is pending, or an immediate family member of the victim, except in accordance with specific procedures established by department regulations or as established by the warden in conjunction with the Crime Victims Services Bureau;
- b. any person under the age of 18 when the person's parent or guardian objects verbally or in writing to such correspondence;
- c. any person whom the offender is restrained from writing to by court order;
- d. any person who has provided a verbal or written request to not receive correspondence from an offender;
- e. any other person, when prohibiting such correspondence is generally necessary to further the substantial interests of security, order or rehabilitation.

4. Costs of Correspondence

a. Each offender shall pay personal mailing expenses, except an indigent offender. An indigent offender shall have access to postage necessary to send two personal letters per week, postage necessary to send out approved legal mail on a reasonable basis and basic supplies necessary to prepare legal documents. A record of such access shall be kept and the indigent offender's account shall reflect the cost of the postage and supplies as a debt owed in accordance with department regulations. Stationery, envelopes and stamps shall be available for purchase in the canteen.

b. E-mail shall only be available to offenders who have electronic postage capabilities through the department's contractor for offender services.

5. Outgoing General Correspondence and Farm Mail

a. Review, Inspection and Rejection. Outgoing general correspondence and farm mail shall not be sealed by the offender and may be read and inspected by staff. Outgoing e-mail may also be read by staff. The objectives to be accomplished in reading outgoing mail differ from the objectives of inspection. In the case of inspection, the objective is primarily to detect contraband. The reading of mail and e-mail is intended to reveal, for example, escape plots, plans to commit illegal acts, or plans to violate institutional rules or other security concerns. Outgoing general correspondence and farm mail may be restricted, confiscated, returned to the offender, retained for further investigation, referred for disciplinary proceeding or forwarded to law enforcement officials, if review discloses correspondence or materials which contain or concern:

- i. the transport of contraband in or out of the facility;
- ii. plans to escape;
- iii. plans for activities in violation of facility or department rules;
- iv. information which, if communicated, would create a clear and present danger of violence and physical harm to a human being;
- v. letters or materials written in code or a foreign language when the offender understands English (unless the warden or designee determines that the recipient is not fluent in English);
- vi. mail which attempts to forward unauthorized correspondence to a third party;
- vii. threats to the safety and security of staff, other offenders, the public, facility order, discipline, or rehabilitation (including racially inflammatory material);
- viii. sexually explicit material;
- ix. other general correspondence for which rejection is reasonably related to a legitimate penological interest.

b. Notice of Rejection. The offender sender shall be notified within three working days, in writing, of the correspondence rejection and the reason therefore on the incoming/outgoing general correspondence, farm mail and e-mail notice of rejection. Any further delay in notification shall be based on ongoing investigation which would be compromised by notification. Rejections are appealable through the administrative remedy procedure.

c. Limitations on Restrictions. Any restrictions imposed on outgoing general correspondence and farm mail shall be unrelated to the suppression of expression and may not be restricted solely based on unwelcome or unflattering opinions. Communication of malicious, frivolous, false, and/or inflammatory statements or information, the purpose of which is reasonably intended to harm, embarrass, or intimidate an employee, visitor, guest or offender shall be rejected. This shall not apply to information and/or statements communicated for the express purpose of obtaining legal assistance.

d. Procedures for Mailing. Outgoing general correspondence and farm mail shall be inserted into the envelope and left unsealed by the offender. All outgoing correspondence shall include:

i. a complete legible name and address of the party the correspondence is being sent to;

ii. the offender's name, DOC number, housing unit, and the name and mailing address of the institution which shall be written or typed on the upper left hand corner of the envelope. Drawings, writing, and marking on envelopes, other than return and sending address, are not permitted. All outgoing general correspondence shall be stamped in the mailroom to indicate it originates in a correctional institution;

iii. outgoing e-mails shall be processed electronically and scanned for contents and phrases.

6. Incoming General Correspondence

a. Review, Inspection, and Rejection. All incoming general correspondence and e-mails must contain the return address of the sender, the name and DOC number of the offender and the name and mailing address of the facility. All incoming general correspondence shall be opened and inspected for contraband, cash, checks, and money orders and is subject to being read. Any stick on label or stamp may be removed if it appears to contain contraband. All incoming general correspondence may be rejected if such review discloses correspondence or material(s) which would reasonably jeopardize legitimate penological interests, including, but not limited to, material(s) which contain or concern:

- i. the transport of contraband in or out of the facility;
- ii. plans to escape;
- iii. plans for activities in violation of facility or department rules;
- iv. plans for criminal activity;
- v. violations of this regulation or unit rules;
- vi. letters or materials written in code;
- vii. threats to the safety and security of staff, other offenders, or the public, facility order, or discipline, or rehabilitation, (including racially inflammatory material);
- viii. sexually explicit material;
- ix. greeting cards and post cards;
- x. decorative stationary or stationary with stickers;
- xi. other general correspondence for which rejection is reasonably related to a legitimate penological interest.

b. Incoming general correspondence containing any of the foregoing may be restricted, confiscated, returned to the sender, retained for further investigation, referred for disciplinary proceedings or forwarded to law enforcement officials.

c. Notice of Rejection. The offender shall be notified within three working days, in writing, of the correspondence or e-mail rejection and the reason therefore on the incoming/outgoing general correspondence, farm mail and e-mail notice of rejection. Any further delay in notification shall be based on ongoing investigation which would be compromised by notification. Rejections are appealable through the administrative remedy procedure.

7. Monetary Remittances

a. Incoming. Funds may only be sent to the facility and processed for hobbycraft purchases properly supported

by a hobbycraft agreement in accordance with established policy and procedures.

b. For hobbycraft purchases, money from permissible sources may be accepted in the following forms:

- i. postal, bank or commercially issued money orders;
- ii. bank cashier checks;
- iii. cash;
- iv. personal checks.

c. All other offender funds shall be processed through the department's contractor for offender services in accordance with established policy and procedures.

d. Upon discovery of cash, multiple party checks, personal checks not for hobbycraft purchases or any other funds received in the mail for an offender, the offender shall be sent a monetary remittances notice of rejection within three working days describing the contents of the mail, the date of its receipt and advising that he has seven working days to provide return postage. If return postage is not provided within seven working days, the postage will be provided by the unit. The offender's banking account will be charged if funds are available. If funds are not available, a debt owed will be established pursuant to department regulations.

8. Identification of Privileged Correspondence. It is the responsibility and duty of institutional staff to verify the legitimacy of the official listed on the envelope. For purposes of this regulation, "identifiable" means that the official or legal capacity of the addressee is listed on the envelope and is verifiable. If not, then the letter is to be treated as general correspondence and an appropriate inquiry made into the offender's intent in addressing the envelope as privileged mail.

a. Facility staff shall verify the sender of all privileged mail in order to ensure that the mail was sent by the identified sender's office and is not fraudulently labeled as privileged mail.

9. All outgoing privileged correspondence shall include:

a. a complete legible name and address of the party the correspondence is being sent to;

b. the offender's name, DOC number, housing unit, and the address of the institution on the upper left hand corner of the envelope. Drawings, writing, and marking on envelopes, other than return and sending address, are not permitted. All outgoing privileged correspondence shall be stamped in the mailroom to indicate it originates in a correctional institution;

c. outgoing privileged correspondence may be posted sealed, and will not be opened and inspected without express authorization from the warden or deputy warden as specified in Paragraph F.11 of this Section.

10. Incoming Privileged Correspondence

a. All incoming privileged correspondence must contain the return address of the sender and the name and DOC number of the offender and the name and mailing address of the facility. All incoming privileged correspondence shall be opened in the presence of the offender to whom it is addressed and inspected for the presence of cash, checks, money orders and contraband and to verify as unobtrusively as possible, that the correspondence does not contain material that is not entitled

to the privilege. When the material is inspected and it is found to be bound or secured in any manner that would prevent the thorough inspection of the document, the offender shall have the option of allowing staff to take the document apart for adequate inspection or returning the material to the sender to require that the material be returned in a loose manner to allow for proper inspection. Additionally, offenders receiving legal material in the form of a compact disc shall have the option of paying for copies to be made by the facility or returning the disc to the sender in order to require that the material be converted to paper copies. Payment for paper copies of legal material from a compact disc shall be in accordance with established policy and procedures.

b. Incoming privileged mail may be opened and inspected outside the offender's presence in the circumstances outlined in Paragraph F.11 of this Section.

i. Inspection and Rejection. When, in the course of inspection, cash, checks, or money orders are found, they shall be removed and forwarded to the business office who will verify the legitimacy of the transaction in accordance with established policy and procedures.

ii. If material is found that does not appear to be entitled to the privilege or if any of the circumstances outlined in Paragraph F.11 of this Section exist, the mail may be restricted, confiscated, returned to sender, retained for further investigation, referred for disciplinary proceedings or forwarded to law enforcement officials.

iii. Notice of Rejection. The offender shall be notified within three working days, in writing, of the correspondence rejection and the reason therefore on the privileged correspondence notice of rejection describing the reason for the rejection and advising that he has seven working days to determine the disposition of the correspondence. Rejections are appealable through the administrative remedy procedure.

iv. Accidental Opening. If privileged correspondence is opened accidentally, outside the presence of the offender, the envelope shall be immediately stapled or taped closed and the envelope marked "accidentally opened" along with the date and employee's initials. An unusual occurrence report shall be completed.

11. Mail Precautions

a. The wardens and deputy wardens are authorized to open and inspect incoming and outgoing privileged mail outside the offender's presence in the following circumstances:

i. letters that are unusual in appearance or appear different from mail normally received or sent by the individual or public entity;

ii. letters that are of a size or shape not customarily received or sent by the individual or public entity;

iii. letters that have a city and/or state postmark that is different from the return address;

iv. letters that are leaking, stained, or emitting a strange or unusual odor or have a powdery residue;

v. when reasonable suspicion of illicit activity has resulted in a formal investigation and such inspection has been authorized by the secretary or designee.

12. Offender Organizations. Offender organizations must pay the postage costs for all of their outgoing mail. All

outgoing mail must be approved by the offender organization sponsor.

G. Procedures for Publications

1. Publications (see definition in Subsection E) may be read and inspected to discover contraband and unacceptable depictions and literature. Unless otherwise provided by the rules of the institution, all printed matter must be received directly from the publisher. Multiple copies of publications for any one individual offender are not allowed. Samples inserted in publications will be removed prior to delivery.

2. Newspaper and magazine clippings (xerox copies allowed) as well as articles printed from the internet are considered publications for the purpose of review pursuant to this regulation. However, they are not required to originate from the publisher. A limit of five clippings/articles may be received within a piece of regular correspondence and the quantity received may be further limited by what can be reasonably reviewed for security reasons in a timely manner. Multiple copies of the same clippings/articles for any one individual offender are not allowed. Inclusion of clippings/articles in regular correspondence may delay the delivery.

3. Refusal of Publications. Printed material shall only be refused if it interferes with legitimate penological objectives (including but not limited to deterrence of crime, rehabilitation of offenders, maintenance of internal/external security of an institution or maintenance of an environment free of sexual harassment), or if the refusal is necessary to prevent the commission of a crime or to protect the interests of crime victims. This would include but not be limited to the following described categories:

- a. security issues:
 - i. maps, road atlas, etc. that depict a geographic region that could reasonably be construed to be a threat to security;
 - ii. writings that advocate, assist or are evidence of criminal activity or facility misconduct;
 - iii. instructions regarding the ingredients or manufacturing of intoxicating beverages or drugs;
 - iv. information regarding the introduction of, or instructions in the use, manufacture, storage, or replication of weapons, explosives, incendiaries, escape devices or other contraband;
 - v. instructs in the use of martial arts;
 - vi. racially inflammatory material or material that could cause a threat to the offender population, staff, and security of the facility;
 - vii. writings which advocate violence or which create a danger within the context of a correctional facility;
- b. sexually explicit material:
 - i. it is well established in corrections that sexually explicit material causes operational concerns. It poses a threat to the security, good order and discipline of the institution and can facilitate criminal activity. Examples of the types of behavior that result from sexually explicit material include non-consensual sex, sexual molestation of other offenders or staff, masturbation or exposing themselves in front of staff and inappropriate touching or writing to staff or other forms of sexual harassment of staff and/or offenders;

- ii. sexually explicit material can portray women (or men) in dehumanizing, demeaning and submissive roles, which, within an institutional setting, can lead to disrespect and the sexual harassment of female (or male) correctional staff. Lack of respect and control in dealing with offenders can endanger the lives and safety of staff and offenders;

- iii. the viewing of sexually explicit material undermines the rehabilitation of offenders as it can encourage deviant, criminal sexual behavior. Additionally, once sexually explicit material enters an institution, it is impossible to control who may view it. When viewed by an incarcerated sex offender, it can undermine or interrupt rehabilitation efforts;

- iv. publications that depict nudity or sexually explicit conduct on a routine or regular basis or promotes itself based upon such depictions in the case of individual one time issues will not be allowed;

- c. when screening publications for acceptability, the following categories shall be utilized:

- i. category 1—presumption of non-acceptability;
- ii. category 2—those that need to be reviewed on a case-by-case basis prior to allowing them to be delivered to the recipient and subject to review by the regional warden;

- iii. category 3—presumption of acceptability;

- d. publications can be added, deleted or moved from one category to another at the discretion of the secretary at any time;

- e. when an institution receives a Category 2 publication which has not already been ruled on by the regional wardens, the mailroom shall send the offender a notice of pending review of publication and forward the publication to the regional warden who shall determine acceptability. When an institution suspends delivery of an issue of a Category 3 publication, the regional warden is notified. The mailroom will send the offender a notice of pending review of publication. The regional wardens shall determine if the publication should be moved to Category 2. When magazines are received that are not currently listed, the regional warden shall be notified;

- f. procedures when publication is refused. The offender shall be notified within three working days of the refusal and the reason therefore on the publications notice of rejection describing the reason for the rejection and advising that he has seven working days to determine the publication's disposition. Rejections are appealable through the administrative remedy procedure. The institution should retain possession of the disputed item(s) until the exhaustion of administrative and judicial review.

H. Procedures for Photographs, Digital or Other Images

1. Offenders shall not be allowed to receive or possess photographs or digital or other images that interfere with legitimate penological objectives (including but not limited to deterrence of crime, rehabilitation of offenders, maintenance of internal/external security of an institution, or maintenance of an environment free of sexual harassment), or to prevent the commission of a crime or to protect the interests of crime victims. This includes photographs, digital or other images which expose the genitals, genital area (including pubic hair), anal area or female breasts (or breasts

which are designed to imitate female breasts). These areas must be covered with garments which cannot be seen through.

2. Lingerie will not normally be acceptable whether transparent or not. Swimwear will only be acceptable if the overall context of the picture is reasonably related to activities during which swimwear is normally worn. Suggestive poses alone may be sufficient cause of rejection regardless of the type of clothing worn.

3. Each institution shall develop a procedure that serves to reasonably restrict an offender's possession of multiple copies of the same photograph or digital or other image.

4. Hard backed and laminated photographs or digital or other images that are subject to alteration or modification may be rejected.

5. The term "photograph" includes other images such as those created by a digital imaging device or e-mails.

6. The offender shall be notified within three working days, in writing, of the photograph rejection and the reason therefore on the photographs notice of rejection describing the reason for the rejection and advising that he has seven working days to determine the photograph's disposition. Rejections are appealable through the administrative remedy procedure.

I. Procedures for Death Row Offenders Correspondence

1. Pursuant to the provisions of Act No. 799 of the 2012 Regular Session, the following procedures provide for the review and inspection of incoming and outgoing correspondence of death row offenders to ensure no contractual arrangements are being contemplated or in effect that would allow the offender to profit from his crimes of notoriety.

a. All incoming and outgoing general correspondence, including packages, shall be inspected.

b. Incoming and outgoing privileged mail shall be inspected outside the offender's presence when there is reasonable suspicion that contraband is being sent to the offender or from the offender, or the offender is contemplating a contractual arrangement that would result in his receiving any type of profits or proceeds relative to his criminal acts. The warden or deputy warden shall authorize such inspection.

c. In the event it is determined that the offender is contemplating or has established a contractual arrangement, the information shall be immediately reported by the warden to the secretary who shall notify the attorney general's office pursuant to established procedures.

AUTHORITY NOTE: Promulgated in accordance with R.S. 15:833(A), *Guajardo v. Esteile*, 580 F.2d 748 (5th Cir.1978).

HISTORICAL NOTE: Promulgated by the Department of Corrections, Office of Adult Services, LR 5:4 (January 1979), amended LR 10:803 (October 1984), LR 11:360 (April 1985), amended by the Department of Public Safety and Corrections, Corrections Services, LR 33:851 (May 2007), LR 38:830 (March 2012), LR 39:2281 (August 2013), LR 41:2665 (December 2015), LR 43:1187 (June 2017), LR 49:

Family Impact Statement

Amendment to the current Rule should not have any known or foreseeable impact on family formation, stability or autonomy, as described in R.S. 49:972.

Poverty Impact Statement

The proposed Rule should not have any known or foreseeable impact on poverty as described in R.S. 49:973.

Small Business Analysis

The proposed Rule should not have any known or foreseeable costs and/or benefits to directly affected persons, small business, or non-governmental groups.

Provider Impact Statement

The proposed Rule should not have any known or foreseeable impact on providers as defined by HCR 170 of the 2014 Regular Legislative Session.

Public Comments

Written comments may be addressed to Natalie LaBorde, Executive Counsel, Department of Public Safety and Corrections, P.O. Box 94304, Baton Rouge, LA 70804 until 4:30 p.m. on January 9, 2023.

James M. Le Blanc
Secretary

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES RULE TITLE: Offender Mail and Publications

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

There will be no costs or savings to state or local governmental units as a result of the proposed rule change.

In accordance with the provisions of the Administrative Procedure Act (R.S. 49:950), the Department of Public Safety and Corrections, Corrections Services, hereby gives notice of its intent to amend the contents of §313, Offender Mail and Publications.

The Department of Public Safety and Corrections, Corrections Services, proposes to clarify language, update forms, and make technical revisions to Offender Mail and Publications.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

There will be no effect on revenue collections of state or local governmental units as a result of the proposed rule change.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

There is no estimated cost and/or economic benefit to directly affected persons or non-governmental groups.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

There is no estimated effect on competition and employment as a result of the proposed rule change.

Thomas Bickham III
Undersecretary
2212#033

Alan M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

NOTICE OF INTENT

Department of Wildlife and Fisheries Louisiana Outdoors Forever Program Project Selection Board and Technical Advisory Board

Louisiana Outdoors Forever Program
(LAC 76:I.Chapter 9)

The Department of Wildlife and Fisheries does hereby give notice of intent to adopt rules governing implementation of the Louisiana Outdoors Forever Program. This proposed Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950, et seq.

Act No. 714 of the 2022 Regular Session of the Louisiana Legislature established the Louisiana Outdoors Forever Program within the Department of Wildlife and Fisheries to provide funding for outdoor conservation projects. The law established a Project Selection Board to make final determinations regarding selection of projects and a Technical Advisory Board to evaluate and assess project applications in accordance with program criteria. This proposed Rule establishes application procedures, project selection criteria, and other administrative regulations governing the program.

Title 76

WILDLIFE AND FISHERIES

Part I. Wildlife and Fisheries Commission and Agencies Thereunder

Chapter 9. Louisiana Outdoors Forever Program

§901. Program Overview

A. The purpose of this program is to provide funding for outdoor conservation projects in the state of Louisiana. The Louisiana Outdoors Forever Program (“Program”) is established within the Department of Wildlife and Fisheries (“LDWF”).

B. The program’s Project Selection Board shall govern the program and make all final determinations regarding the selection of projects for funding under the Program.

C. The program’s Technical Advisory Board shall review and evaluate applications in accordance with the criteria established herein and provide their assessments to the Project Selection Board for consideration and funding.

D. The Louisiana Outdoors Forever Fund shall fund administration of the program and the conservation projects selected for funding under the program. Once projects are selected, all correspondence, reimbursements, and reporting will be coordinated through LDWF. The Department of Wildlife and Fisheries shall be responsible for administrative implementation of the program, including correspondence with prospective and selected applicants, disbursement of funds, and performance monitoring, and may charge direct administrative costs incurred associated with the program to the Louisiana Outdoors Forever Fund.

AUTHORITY NOTE: Promulgated in accordance with R.S. 56:1934.

HISTORICAL NOTE: Promulgated by the Department of Wildlife and Fisheries, Louisiana Outdoors Forever Program Project Selection Board and Technical Advisory Board, LR 49:

§903. Applicant and Program Eligibility

A. State agencies, political subdivisions of the state, including local government authorities, and nongovernmental organizations working in coordination with public agencies are eligible to apply to the program for funding.

B. The following types of projects are eligible for funding:

1. land conservation of important natural areas, including fish and wildlife habitat;
2. water quality projects related to land conservation or land management, including those lands that protect drinking water supplies;
3. working land, farms, and forested land;
4. recreational properties related to important natural areas and public use;
5. historic properties adjacent to or integral to habitat restoration or enhancement.

AUTHORITY NOTE: Promulgated in accordance with R.S. 56:1934.

HISTORICAL NOTE: Promulgated by the Department of Wildlife and Fisheries, Louisiana Outdoors Forever Program Project Selection Board and Technical Advisory Board, LR 49:

§905. Application Process

A. The Project Selection Board will solicit grant submission cycles each year, contingent upon availability of funding. The program has a two-phase approach to the grant process; a pre-application and a full application.

B. Pre-Application Process

1. Pre-application serves as the basis for determining project eligibility. All eligible projects will be invited to submit a full application. Full applications are fundamentally comprised of weighted grading criteria, which shall accumulate a total score reviewable by Technical Advisory Board. Scored and ranked full applications will be submitted to the Project Selection Board.

2. Upon the direction of the Project Selection Board, LDWF shall publish a request for proposals on its website www.wlf.louisiana.gov/page/louisiana-outdoors-forever for a period of 60 days.

3. Pre-application submissions shall be submitted via online application forms prescribed by LDWF and available at www.wlf.louisiana.gov/page/louisiana-outdoors-forever. Pre-applications can be a maximum of seven pages. All pre-applications must include the following:

a. Cover Letter—This official letter is the instrument demonstrating support and authority to submit a pre-application, signed by a ranking authorizing representative of the entity (board chairperson, parish president, commissioner, mayor, etc.). It must be on official letterhead.

- b. project title;
- c. project category/categories;
- d. project location;
- e. project map;
- f. project description including benefits related to project category and surrounding community/state;
- g. generalized project budget worksheet;
- h. responses to each of the evaluation criteria:
 - i. total project cost;
 - ii. total funding requested;

- iii. match commitment(s)—including type, status—committed or potential, and source;
- iv. accordance/non-conflict with existing state, local, and federal plans (list which plan(s));
- v. timeline—time to complete, time to realization of conservations benefits, and whether the project could be completed by the close of this funding cycle;
- i. estimated or actual appraisal (if applicable, in addition to the seven-page limit on letters of maximum);
- j. optional documentation (not counted towards the seven page limit on pre-applications);
 - i. letter of support;
 - ii. letter of financial commitment from sponsors and partners;

4. Pre-Application Evaluation Criteria

a. Pre-applications will be reviewed by the Technical Advisory Board on the below evaluation criteria. Applicants that meet the criteria will be invited to complete a full application. Applicants should be sure their pre-application contains enough information for reviewers to consider all criteria.

of the program. If an item must be revised, the Technical Advisory Board will determine if a Project Agreement Amendment or a resubmission of a new pre-application would be required.

4. All applications shall contain the following items:

- a. responses to each of the evaluation criteria: applicants should provide further details on how the proposed project meets the evaluation criteria;
- b. application cover letter: this official letter is the instrument denoting support and authority to submit an application, signed by a ranking authorizing representative of the entity (board chairperson, commissioner, mayor, etc.). It must be on official letterhead;
- c. detailed project budget worksheet: this budget shall include all items depicted in the pre-application stage, although a higher level of detail is required. It should show units of measure/piece count estimates, cost per unit, proper names of materials, etc.;
- d. project description: this is a detailed narrative describing the entire scope of the project, including location vicinity map, acreage, purpose, need, and all Louisiana Outdoors Forever funded project elements. Applicants should focus on describing the elements and activities receiving funding, rather than convincing narrative content. Applicants should also describe the ability of the project to be scaled up or down;
- e. project implementation schedule: a schedule outlining the timeline and occurrence of each major project milestone and limited to a project period;
- f. landowner letter of support: a letter by willing seller or contract of sale will be accepted in lieu of the landowner letter of support.

5. Applications shall contain the following items if applicable:

- a. photos and photo key map: applicants should submit various photos of the key components of the project receiving funding. If photos supplied were taken on the project site, a map of the project site must be included showing the relative location of each photograph taken. Each location is to be numbered corresponding to the photograph's number, and an arrow pointing in the direction of viewing from the photographer's perspective. No more than two photos per page are to be uploaded to the online application;
- b. project plans: proposed project plans should be included when relevant;

6. project specific items: These items are not required for a project to be considered by the Technical Advisory Board for the scoring and ranking phase of the application process. If a project is approved by the project by the Project Selection Board, the applicant will receive a pre-approval and is given 12 months to submit needed or requested documents to LDWF. These documents must be in line with the pre and full application in order to receive a final approval;

a. environmental review documents: the environmental review ensures that any impact upon any assisted site is in accordance with State and Federal regulations;

b. site engineering plans (if engineering is a part of the proposed project): site engineering plans depicting locations of elements within the site and distances to scale,

Applicant Partner (mark affiliation):	
Local governing authority	
Political subdivision of the state	
State agency	
Non-government organization working with public agency	
Local governing authority	
Project Category (mark all that apply):	
Land conservation of important natural areas, including fish and wildlife habitat	
Water quality projects related to land conservation or land management, including those lands that protect drinking water supplies	
Conservation project on working land, farms, and forested land	
Conservation project on recreational properties related to important natural areas and public use	
Conservation project on historic properties adjacent to or integral to habitat restoration or enhancement	
Considerations	
Is the total cost outlined in the pre-application? (Y/N)	
Does the pre-application describe funding or other type of match? (Y/N)	
Does the pre-application describe how the project will provide benefits into the future? (Y/N)	
Does the project align with any state plan? (Y/N)	
Is the project contiguous with other conservation properties? (Y/N)	
Is the project in an underserved area or an area of designated need? (Y/N)	
Does the proposal contain a schedule for timely completion? (Y/N)	
Is there a plan for maintenance and management of the project (sustainability through time)? (Y/N)	

C. Full Application Process

1. Applicants who submit a complete and accurate pre-application that clearly meets the expectations set forth in the evaluation criteria will receive an invitation to complete a full application.

2. The application serves as a mechanism in gathering more detailed project elements, detailed surveys and reviews, and items that only apply to applicants who are invited to submit a full application.

3. Items submitted in the pre-application may not be revised, updated or amended, due to the competitive nature

and uploaded to the application where requested, will be required for building or site development projects;

c. evidence of property ownership: the acquisitive deed whereby the landowner acquired ownership of the property on which the project will take place, and evidence of payment of ad valorem taxes for the past three years. Legal title opinion preferred;

d. full narrative appraisal: a full narrative appraisal prepared by a licensed MAI appraiser (if applicable, i.e. projects which include an acquisition of real property interests);

e. partnership commitment: any application that is part of another grant award that has not been received at the time of application submission will receive a pre-approval letter if their projected is approved by the Project Selection Board until they produce the approved grant agreement.

7. The Technical Advisory Board can mandate an applicant include any project specific item they deem necessary to ensure a project meets the claimed benefits of the pre and full application.

8. Applications must be submitted by midnight on the prescribed deadline date. All applications are reviewed by the Technical Advisory Board to verify application completeness. Applicants who are unable to meet all requirements for a complete application by the deadline may be granted an extension by the Technical Advisory Board.

9. All complete applications approved by the Project Selection board will be contacted by LDWF to schedule a mandatory Financial Workshop to explain and review the reimbursement process and documentation required for reporting, monitoring and reimbursements. Upon attending the financial workshop, both parties will sign a project agreement and a notice to proceed will be issued by the department.

10. Any application containing a Project Specific Item that was part of the full application package but received a pre-approval letter will have 12 months to submit those items to the department. Upon receipt and approval by the department, LDWF will schedule a mandatory Financial Workshop with grantees to explain and review the reimbursement process and documentation required for reporting, monitoring and reimbursements. Upon attending the financial workshop, both parties will sign a project agreement and a notice to proceed will be issued by the department.

AUTHORITY NOTE: Promulgated in accordance with R.S. 56:1934.

HISTORICAL NOTE: Promulgated by the Department of Wildlife and Fisheries, Louisiana Outdoors Forever Program Project Selection Board and Technical Advisory Board, LR 49:

§907. Evaluation Criteria Scoring

A. All applications will be reviewed in light of the questions below.

1. Question 1—Project Needs and Benefits (max 50 points). Does this project provide specific and clearly identified needs and benefits? Project benefits considered can include the following:

a. Outdoor Recreational Opportunity

i. Criteria Question: Does this project provide new or enhanced recreational access to parks/green space/natural environment (for fishing, hiking, hunting, canoeing, or other)?

ii. Criteria Details: Applicant should list any new or enhanced recreational access provided by this project.

iii. Criteria Question: Will this project provide outdoor nature-based recreational opportunities?

iv. Criteria Details: Applicant must list all nature-based outdoor recreation opportunities provided by the acquisition or development of this property.

b. Cultural and Historical Value

i. Criteria Question: Does this project provide conservation on or adjacent to a historical site or site of cultural significance?

ii. Criteria Details: Applicant must describe how the project provides conservation on or near the historical site or site of cultural significance.

iii. Criteria Question: Does this project include the acquisition or stewardship of land with a cultural or historical value?

iv. Criteria Details: Applicant must demonstrate how the property has local, regional or state-wide cultural and/or historical value and describe how this project adds to or enriches that value.

c. Water Quality

i. Criteria Question: Does this project provide improvement of impaired water quality or protection of water quality in healthy waters that meet or exceed water quality standards, including drinking water supplies?

ii. Criteria Details: Applicant should describe how the project provides improvement of water quality or protection.

d. Ecological Value

i. Criteria Question: Does this project provide enhancement or conservation of important natural areas, including fish and wildlife habitat and corridors?

ii. Criteria Details: Applicant must describe how the project provides enhancement or conservation of important natural areas.

iii. Criteria Question: Does the project provide conservation of soil, water, or other natural resources on working lands?

iv. Criteria Details: Applicant must demonstrate how the project provides conservation of soil, water, or other natural resources related to working lands.

v. Criteria Question: Does this project include the acquisition or stewardship of land with a significant ecological, conservation, restoration, or natural resource sustainability value?

vi. Criteria Details: Applicant must demonstrate the significant ecological value of the project including, but not limited to, native plant and animal species of a conservation concern; and/or the critical importance of the habitat, particularly those that include a stream buffer.

e. Contiguous

i. Criteria Question: Is the proposed project contiguous with other conservation properties (including but not limited to local, state or federal parks and forests, conservation easements, scenic rivers or other important properties)?

ii. Criteria Details: Applicants project should demonstrate that the project is contiguous with other conservation properties.

f. Future Benefits
 i. Criteria Question: Does this project satisfy specific and clearly identified benefits into the future and how they meet the desired project category?

ii. Criteria Details: Describe how elements within your proposal meet a project category from the program. Clearly identify your project’s anticipated lifespan and how it will yield benefits for Louisiana into the future.

g. Stewardship

i. Criteria Question: Will this project promote the stewardship of natural resources?

ii. Criteria Details: Applicant must demonstrate how this project will promote effective conservation and sustainable practices, protect the scenic or unique natural features present and visibility of such, assist the property in remaining relevant to the community, and encourage visitation and participation by providing a safe recreational experience for future generations.

2. Question 2—Partnerships (max 10 points)

a. Criteria Question: Is there a measurable value added to this project through cooperation with external partners?

b. Criteria Details: Applicant must describe the contribution of all partnerships and provide documentation of close participation of all entities. Applicant must identify the scope and participation level of each entity, including donations, cash or materials, volunteer/staff hours or professional services provided.

c. Required Documents: Letters of commitment must be uploaded for each partnership. Letters of commitment must specify the value of each partnership.

d. Note: Any cash, donations, etc. detailed in commitment letters must be included in the Project Budget Worksheet.

3. Question 3—Underserved Area or Area of Designated Need (max 10 points)

a. Criteria Question: Does this project satisfy specific and clearly identified needs within an underserved area or area of designated need?

b. Criteria Details: The pre-application should describe if and how the project will benefit an underserved area or area of designated need.

4. Question 4—Funding or Matching Funds (max 10 points)

a. Criteria Question: What amount or percentage of matching funds or in-kind match will be provided?

b. Question Details: Applicant must identify the amount or percentage of matching funds or in-kind match that they will provide, including the source of funds.

c. All matching funds or in-kind match must be included and highlighted as such in the Project Budget Worksheet. Written documentation of monetary investments or in-kind match must be provided in the form of letters of contribution.

5. Question 5—Local, State, Regional, or Federal Plans (max 5 points)

a. Criteria Question: Does this project coincide with, build upon or add value to any existing local, state, regional, or federal plan?

b. Criteria Details: Applicant must cite the relevant local, state, regional, or federal plan and the project’s alignment to the plan.

6. Question 6—Timely Completion (max 5 points)

a. Criteria Question: What is the estimated schedule for completion?

b. Criteria Details: Any application that is postured to be ready to begin may be assigned points for having a high likelihood of timely completion.

7. Question 7—Economic Development/Benefits (max 5 points)

a. Criteria Question: Will this project create opportunities to enhance the local, regional and/or statewide economy?

b. Criteria Details: Applicant must demonstrate how the project will benefit the local, regional, and/or statewide economy. The applicant may provide the following to show the positive impact of this project beyond the local or host community: current comprehensive plan; parish or local stakeholder work plans; resource inventory; NRI data; current recreation master plan; current county or regional master plan; current trail system plan; State Comprehensive Outdoor Recreation Plan; current capital improvements plan, current regional water plan and/or land use management plan; recorded public hearing minutes; supporting documentation from the Chamber of Commerce; letters from local business(es) or economic development organizations; etc.

c. The information provided should describe job creation, ecosystem services, recreational use income, enhancements to rural economies as quantified by agricultural economics, and other related economic benefits expected to result from this project, if applicable.

d. Note: The purpose of this question is to advance local, regional, or statewide significant economic impacts, in order to continue to sustain the local, regional, or statewide economic base, as well as diversify those respective drivers. Applicants may submit local, regional, or statewide planning documents as proof.

8. Question 8—Maintenance (max 5 points)

a. Criteria Question: What is the maintenance and management plan for the project?

b. Criteria Details: Describe the maintenance and management plan in place for the project, or how a plan will be developed before project completion. The information provided should showcase sustainability through time. Maintenance plans may include but are not limited to RMS level or other site specific conservation plans.

c. Criteria Question: Do you have a plan and budget to maintain, manage, and secure this property for multiple years of commitment beyond the project completion date?

d. Criteria Details: Applicant must provide an approved applicable maintenance, management, and security plan that shows multi-year of commitment beyond the project completion date. These commitments must address monetary support as well as address a credible timeline.

Scoring Criteria	Points
Project Needs and Benefits	50
Partnerships	10
Underserved Areas or Areas of Designated Need	10
Funding or Matching Funds	10
Local, State, Regional, or Federal Plans	5
Timely Completion	5
Economic Development/Benefits	5
Maintenance	5
Total	100

AUTHORITY NOTE: Promulgated in accordance with R.S. 56:1934.

HISTORICAL NOTE: Promulgated by the Department of Wildlife and Fisheries, Louisiana Outdoors Forever Program Project Selection Board and Technical Advisory Board, LR 49:

§909. Grant Recipient Requirements

A. Term

1. Grant recipients will have up to 24 months to complete the approved project from the date of the mutually signed project agreement and the issuance of a notice to proceed. Any variance or extensions must be formally requested via a project agreement amendment, extension request, or change of scope request. All formal requests will be reviewed by the Technical Advisory Board and approved by the Chairperson of the Project Selection Board. No reimbursable costs shall be incurred beyond 24 months after the notice to proceed has been issued, or the period for which an amendment or extension has been granted, whichever is later.

B. Reporting Requirements

1. Quarterly Progress Reports

a. Once a project agreement is signed, the grantee shall report on the progress of the project, on a quarterly basis as follows:

i. period beginning January 1, ending March 31: report is due April 30;

ii. period beginning April 1, ending June 30: report is due July 31;

iii. period beginning July 1, ending September 30: report is due October 31;

iv. period beginning October 1, ending December 31: report is due January 31.

b. Grantees are required to submit quarterly progress reports to LDWF to ensure that LDWF is aware of the project's progress. Quarterly progress reports can be accessed and filled out on www.wlf.louisiana.gov/page/louisiana-outdoors-forever. The progress report shall summarize the work accomplished to date, any issues arising with the project, an estimated percentage of project completion, and an estimate of funds to be expended over the next quarter. Photos or other documents are required in communicating the status of the project.

2. Final Reports

a. Grantees must inform LDWF that their project is complete by submitting a final report and mark it as "final" prior to the expiration of the project period. The final report serves as notice that the grantee has completed the project in compliance with applicable regulations and must include:

i. digital images of all completed project elements which received funding;

ii. indication that the project is complete, accessible, and open to the public, if applicable;

iii. documentation that all corrective items identified during the final on-site inspection have been completed. This may require an additional final inspection prior to close out;

iv. official As-built drawings in .pdf format;

v. for acquisitions only—An updated property deed with required protective language and recording stamp from the local jurisdiction's parish clerk's office;

vi. final reimbursement request marked as "Final";

vii. authorizing officer's signature.

b. LDWF staff will inspect all completed projects. Final payments shall not be made until final documentation is received and approved, and the project has been inspected and verified as complete.

C. Reimbursement Requests

1. Payment of grant funds is on a reimbursement basis. Accurate and comprehensive documentation of project costs is critical. Applicants will be required to submit to LDWF a reimbursement request as well as detailed documentation (e.g. proof-of-purchase, proof-of-payment, force account details, etc.) prior to reimbursement. All reporting responsibilities in addition to reimbursement requests shall be adhered to throughout the entirety of the project.

2. Grantees may request reimbursements at any time, although it is recommended that requests are submitted at least quarterly. LDWF will generally make payment in less than 30 days after a reimbursement request has been approved. Reimbursement requests are based on actual project expenditures that align with the grantee's project agreement, including the approved project application scope and budget.

3. Adequate supporting documentation for all expenses is required with each request, including but not limited to:

a. proof of payment, including payment for match items;

b. invoices;

c. donation and in-kind documentation;

d. documentation of procurement/bidding process;

e. photos (optional);

f. additional supporting documentation to process a reimbursement as needed.

4. **Partial Billings.** A partial billing is considered to be a request made before the project is completed. Total partial billings may not exceed 90 percent of the total grant amount. 10 percent of the total approved grant amount held as a retainer.

5. **Final Billing.** Final billing shall be made when the project's scope of work is complete, all required documentation has been submitted and approved, and the project is open to the public, if applicable. Grantees must submit a final reimbursement request and identify any remaining unneeded surplus balance via an attached memo. project agreement amendment requests submitted to LDWF in an effort to utilize surplus funds shall not be considered for approval. Only those items as submitted in the original budget and scope are eligible for reimbursement, per the project agreement. Once a project has been closed, remaining funds are no longer obligated and LDWF cannot make additional payments.

AUTHORITY NOTE: Promulgated in accordance with R.S. 1934.

HISTORICAL NOTE: Promulgated by the Department of Wildlife and Fisheries, Louisiana Outdoors Forever Program Project Selection Board and Technical Advisory Board, LR 49:

Family Impact Statement

In accordance with Act 1183 of 1999, the Department of Wildlife and Fisheries/Wildlife and Fisheries Commission hereby issue its Family Impact Statement in connection with the preceding Notice of Intent. This Notice of Intent will have no impact on the six criteria set out at R.S. 49:972(B).

Poverty Impact Statement

The proposed rulemaking will have no impact on poverty as described in R.S. 49:973.

Small Business Analysis

This proposed Rule has no known impact on small businesses as described in R.S. 49:965.2 through R.S. 49:965.8.

Provider Impact Statement

This proposed Rule has no known impact on providers as described in HCR 170 of 2014.

Public Comments

Interested persons may submit comments relative to the proposed Rule to Angela Morejon, Department of Wildlife and Fisheries, Box 98000, Baton Rouge, LA 70898-9000, or via e-mail to amorejon@wlf.la.gov prior to Thursday, February 3, 2023.

Jack Montoucet
Secretary

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES

RULE TITLE: Louisiana Outdoors Forever Program

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

The proposed rule change adopts rules for the implementation of the Louisiana Outdoors Forever Program (Program). Established by Act 714 of the 2022 Regular Session of the Louisiana Legislature, the Program distributes funds allocated by the Louisiana Legislature to eligible state agencies, political subdivisions of the state, and nongovernmental organizations working in coordination with public agencies for projects related to land conservation, water quality enhancement, working land, farms, and forested land, recreational properties, and historic properties. Act 714 established an eight-member project selection board to govern the Program and a nine- to eleven-member technical advisory board to review and evaluate applications in accordance with program criteria.

The proposed rule change establishes application procedures, project selection criteria, and other administrative regulations for the program. Under the proposed rule change, the application process would consist of two stages. In the first stage, the pre-application process, eligible entities will submit brief descriptions of potential projects for review and eligibility assessment to the Technical Advisory Board (TAB). In the second stage, applicants determined to meet the most criteria by the TAB will be invited to submit a full application. The TAB will rank and score the projects and submit their assessments to the Project Selection Board, which will award project grants using funds allocated by the legislature for the Program.

State and local governmental units that choose to submit applications for the Program may incur costs as part of the application process for photographs, maps, site engineering plans, land surveys, and other required documentation.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

Funding for the Program in FY 22-23 provided by Act 167 of the 2022 Regular Session of the Louisiana Legislature is \$10 M. Funding in subsequent years will be decided by the legislature.

State agencies and local governments that administer projects that are rewarded grants by the Project Selection Board

will experience increases in revenue under the Program set up by the proposed rule change.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

Non-governmental groups working in coordination with public agencies on projects that are rewarded grants by the Project Selection Board may benefit from the Program set up by the proposed rule change.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

The proposed rule change is not expected to have an effect on competition and employment.

Bryan McClinton
Undersecretary
2212#038

Alan M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

NOTICE OF INTENT

Department of Wildlife and Fisheries Wildlife and Fisheries Commission

Statewide Online Special Certificate Agent for Motorboat
Registration and Titling
(LAC 76:L.328)

The Department of Wildlife and Fisheries and the Wildlife and Fisheries Commission does hereby give notice of intent to adopt rules providing for electronic vessel and motor registration and titling. This proposed Rule is promulgated in accordance with R.S. 34:851.37, R.S. 56:6(21), and the provisions of the Administrative Procedure Act, R.S. 49:950, et seq.

The commission, through its secretary, has authority to designate and consign to special licensing or certificate agents, the issuance of recreational licenses, permits, motorboat registration certificates, and the collection of fees therefor. R.S. 34:851.37 specifically authorizes the Department of Wildlife and Fisheries to establish a system of special certificate agents to receive and process applications related to registration and titling of vessels and outboard motors, collect associated fees and taxes, and issue registration certificates and decals. The law also provides for special certificate agents to contract with the department for the administration of an electronic system to permit the recording of vessel and outboard motor registration information.

This proposed Rule authorizes the department to enter into contracts with an electronic special certificate agent to perform online motorboat registration and titling functions and authorizes the special certificate agent to collect and retain convenience fees on a transactional basis.

The secretary of the department of Wildlife and Fisheries is authorized to take any and all necessary steps on behalf of the commission to promulgate and effectuate this Notice of Intent, including but not limited to, the filing of the Fiscal and Economic Impact Statement, the filing of the Notice of Intent, and compiling public comments and submissions for the commission's review and consideration. In the absence of any further action by the commission following an opportunity to consider all public comments regarding the proposed Rule, the secretary is authorized and directed to

prepare and transmit a summary report to the legislative oversight committees and file the final Rule.

Title 76

WILDLIFE AND FISHERIES

Part I. Wildlife and Fisheries Commission and Agencies Thereunder

Chapter 3. Special Powers and Duties

Subchapter H. Electronic Licenses Issuance

§328. Electronic Vessel and Motor Registration and Titling

A. The secretary shall have authority to enter into contracts to acquire electronic methods to register and title vessels and outboard motors within the state purchasing regulations.

B. Such functions may be included as a component of the recreational hunting and fishing license point of sale system and performed by the same vendor, or may be contracted as an electronic certificate system specific for vessels and outboard motors separate from the recreational licensing platform.

C. The electronic collection of vessel or outboard motor certificate applications and fees collected pursuant thereto shall be in addition to the ability to apply for such certificates in person at the Baton Rouge headquarters, or via U.S. mail. In addition to any electronic special certificate agent contract, the secretary may contract with other special certificate agent brick-and-mortar facilities throughout the state, as he deems necessary to perform registration and titling for vessels and outboard motors.

D. The secretary may authorize, by contract, a transactional convenience fee for each online certificate transaction conducted by the electronic special certificate agent to be retained by the electronic special certificate agent. Such fee shall not exceed \$12 per certificate. The convenience fee shall be in addition to any registration or title certificate fees collected and shall be retained by the electronic special certificate agent.

E. Prior to collection of any applications for registration or title and any associated fees, the electronic special certificate agent shall execute and furnish to the department a good and sufficient surety bond with a surety company qualified to do business as a surety in Louisiana. The sum of the bond shall be determined by the secretary, but shall be not less than \$10,000, but shall not exceed \$100,000. The bond shall be in the name of the Department of Wildlife and Fisheries as obligee and remain in full force and effect for the entire term of the contract. If the electronic special certificate agent timely files all applications delivered to such certificate agent for filing and remits all fees and taxes collected, then the obligation of the surety shall be void. Should the electronic special certificate agent fail to timely file certificate applications, remit fees or taxes collected, or otherwise fail to meet the conditions of the contract, the department may file a claim against the bond for all costs associated with the claim, including any actual investigatory costs or attorney fees incurred.

AUTHORITY NOTE: Promulgated in accordance with R.S. 34:851.37 and R.S. 56:6(21).

HISTORICAL NOTE: Promulgated by the Department of Wildlife and Fisheries, Wildlife and Fisheries Commission, LR 49:

Family Impact Statement

In accordance with Act 1183 of 1999, the Department of Wildlife and Fisheries/Wildlife and Fisheries Commission hereby issues its Family Impact Statement in connection with the preceding Notice of Intent. This Notice of Intent will have no impact on the six criteria set out at R.S. 49:972(B).

Poverty Impact Statement

The proposed rulemaking will have no impact on poverty as described in R.S. 49:973.

Small Business Analysis

This proposed Rule has no known impact on small businesses as described in R.S. 49:965.2 through R.S. 49:965.8.

Provider Impact Statement

This proposed Rule has no known impact on providers as described in HCR 170 of 2014.

Public Comments

Interested persons may submit comments relative to the proposed Rule to Angela Morejon, Department of Wildlife and Fisheries, Box 98000, Baton Rouge, LA 70898-9000, or via e-mail to amorejon@wlf.la.gov prior to Thursday, February 2, 2023.

Joe McPherson
Chairman

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES

RULE TITLE: Statewide Online Special Certificate Agent for Motorboat Registration and Titling

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

The proposed rule change will have no impact on state or local governmental unit expenditures.

The proposed rule change authorizes the Louisiana Department of Wildlife and Fisheries (LDWF) to enter into contracts with an electronic special certificate agent (agent) to perform online motorboat registration and titling functions. The proposed rule change permits the agent to collect statutorily-authorized convenience fees of up to \$12 per certificate in addition to registration or title certificate fees.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

The proposed rule change is not expected to have an effect on revenue collections of the LDWF or other government agencies.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

The proposed rule change is expected to benefit motorboat registrants by providing more convenient alternatives for new registrations, title transfers, and decal and certificate replacements than the systems currently in place.

The proposed rule change may increase the convenience fee of on-line motorboat registration renewals from \$5 to \$12 if the agent chooses to raise the fee to the maximum allowed under the proposed rule change. Revenues for the agent performing the registration services may increase by an undetermined amount, up to \$750,000 per year.

Persons seeking motorboat renewals will retain the ability to renew their registrations at no charge by mail or in person at LDWF sites.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT
(Summary)

The proposed rule change may have a positive impact on employment at the electronic special certificate agent that facilitates the registration services.

Bryan McClinton
Undersecretary
2212#037

Alan M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

NOTICE OF INTENT

**Workforce Commission
Office of Workers' Compensation**

Medical Treatment Guidelines
(LAC 40:I.2001-2011, 2019-2021, 2111, 2311, 2315-2325)

The Workforce Commission does hereby give notice of its intent to amend certain portions of the *Louisiana Administrative Code, Title 40, Labor and Employment, Part I, Workers' Compensation Administration, Subpart 2, Medical Guidelines, Chapter 20, Chapter 21, Subchapter A, Section 2111, and Chapter 23* regarding medical treatment guidelines. The purpose of this amendment is to update the medical treatment guidelines in accordance to a reoccurring maintenance schedule and add consistency throughout the guidelines. This proposed Rule is promulgated by the authority delegated to the deputy assistant secretary by R.S. 36:304(B) and vested in the assistant secretary of the Office of Workers' Compensation found in R.S. 23:1291 and R.S. 23:1310.7.

Title 40

LABOR AND EMPLOYMENT

Part I. Workers' Compensation Administration

Subpart 2. Medical Guidelines

Chapter 20. Spine Medical Treatment Guidelines

Subchapter A. Cervical Spine Injury

Editor's Note: Form LWC-WC 1009. Disputed Claim for Medical Treatment has been moved to §2328 of this Part.

§2001. Introduction

A. This document has been prepared by the Louisiana Workforce Commission, Office of Workers' Compensation (OWCA) and should be interpreted within the context of guidelines for physicians/providers treating individuals qualifying under Louisiana's Workers' Compensation Act as injured workers with cervical spine injuries. Although the primary purpose of this document is advisory and educational, these guidelines are enforceable under the Louisiana Workers Compensation Act. All medical care, services, and treatment owed by the employer to the employee in accordance with the Louisiana Workers' Compensation Act shall mean care, services, and treatment in accordance with these guidelines. Medical care, services, and treatment that varies from these guidelines shall also be due by the employer when it is demonstrated to the medical director of the office by a preponderance of the scientific medical evidence, that a variance from these guidelines is reasonably required to cure or relieve the injured worker from the effects of the injury or occupational disease given the circumstances. Therefore, these guidelines are not relevant as evidence of a provider's legal standard of professional care. To properly utilize this document, the reader should not skip nor overlook any sections.

AUTHORITY NOTE: Promulgated in accordance with R.S. 23:1203.1.

HISTORICAL NOTE: Promulgated by the Louisiana Workforce Commission, Office of Workers Compensation Administration, LR 37:1631 (June 2011), amended by the Louisiana Workforce Commission, Office of Workers Compensation, LR 40:1119 (June 2014), LR 49:

§2003. General Guideline Principles

A. The principles summarized in this section are key to the intended implementation of all Office of Workers' Compensation medical treatment guidelines and critical to the reader's application of the guidelines in this document.

1. Application of Guidelines. The OWCA provides procedures to implement medical treatment guidelines and to foster communication to resolve disputes among the provider, payer, and patient through the Workers' Compensation Act.

2. Education. Education of the patient and family, as well as the employer, insurer, policy makers and the community should be the primary emphasis in the treatment of workers' compensation injuries. Currently, practitioners often think of education last, after medications, manual therapy, and surgery. Practitioners must develop and implement strategies to educate patients, employers, insurance systems, policy makers, and the community as a whole. An education-based paradigm should always start with inexpensive communication providing reassuring and evidence-based information to the patient. More in-depth education is currently a component of treatment regimens which employ functional, restorative, preventive and rehabilitative programs. No treatment plan is complete without addressing issues of individual and/or group patient education as a means of facilitating self-management of symptoms and prevention. Facilitation through language interpretation, when necessary, is a priority and part of the medical care treatment protocol.

3. Informed Decision Making. Providers should implement informed decision making as a crucial element of a successful treatment plan. Patients, with the assistance of their health care practitioner, should identify their personal and professional functional goals of treatment at the first visit. Progress towards the individual's identified functional goals should be addressed by all members of the health care team at subsequent visits and throughout the established treatment plan. Nurse case managers, physical therapists, and other members of the health care team play an integral role in informed decision-making and achievement of functional goals. Patient education and informed decision-making should facilitate self-management of symptoms and prevention of further injury.

4. Treatment Parameter Duration. Time frames for specific interventions commence once treatments have been initiated, not on the date of injury. Obviously, duration will be impacted by patient adherence, as well as availability of services. Clinical judgment may substantiate the need to accelerate or decelerate the time frames discussed in this document. Such deviation shall be in accordance with La. R.S. 23:1203.1.

5. Active Interventions. Emphasizing patient responsibility, such as therapeutic exercise and/or functional treatment, are generally emphasized over passive modalities, especially as treatment progresses. Generally, passive interventions are viewed as a means to facilitate progress in

an active rehabilitation program with concomitant attainment of objective functional gains.

6. Active Therapeutic Exercise Program. Exercise program goals should incorporate patient strength, endurance, flexibility, coordination, and education. This includes functional application in vocational or community settings.

7. Positive Patient Response. Positive results are defined primarily as functional gains that can be objectively measured.

a. Objective functional gains include, but are not limited to, positional tolerances, range-of-motion (ROM), strength, and endurance, activities of daily living, ability to function at work, cognition, psychological behavior, and efficiency/velocity measures that can be quantified. Subjective reports of pain and function should be considered and given relative weight when the pain has anatomic and physiologic correlation. Anatomic correlation must be based on objective findings.

8. Re-Evaluation of Treatment within Four Weeks. If a given treatment or modality is not producing positive results within four weeks, treatment should be either modified or discontinued. Reconsideration of diagnosis should also occur in the event of poor response to a seemingly rational intervention.

9. Surgical Interventions. Surgery should be contemplated within the context of expected improvement of functional outcome and not purely for the purpose of pain relief. The concept of "cure" with respect to surgical treatment by itself is generally a misnomer. All operative interventions must be based upon positive correlation of clinical findings, clinical course, and diagnostic tests. A comprehensive assimilation of these factors must lead to a specific diagnosis with positive identification of pathologic conditions. The decision and recommendation for operative treatment, and the appropriate informed consent should be made by the operating surgeon. Prior to surgical intervention, the patient and treating physician should identify functional operative goals and the likelihood of achieving improved ability to perform activities of daily living or work activities and the patient should agree to comply with the pre- and post-operative treatment plan and home exercise requirements. The patient should understand the length of partial and full disability expected post-operatively.

10. Pharmacy-Louisiana Law and Regulation. All prescribing will be done in accordance with the laws of the state of Louisiana as they pertain respectively to each individual licensee, including, but not limited to: Louisiana State Board of Medical Examiners regulations governing medications used in the treatment of non-cancer-related chronic or intractable pain; Louisiana Board of Pharmacy Prescription Monitoring Program; Louisiana Department of Health and Hospitals licensing and certification standards for pain management clinics; other laws and regulations affecting the prescribing and dispensing of medications in the state of Louisiana.

11. Six Month Time Frame. Injuries resulting in temporary total disability may require maintenance treatment and may not attain return to work in six months.

12. Return to Work. Return to work is therapeutic, assuming the work is not likely to aggravate the basic

problem or increase long-term pain. An injured worker's return-to-work status shall not be the sole cause to deny reasonable and medically necessary treatment under these guidelines. Two good practices are: early contact with injured workers and provide modified work positions for short-term injuries. The practitioner must provide specific physical limitations and the patient should never be released to non-specific and vague descriptions such as "sedentary" or "light duty." The following physical limitations should be considered and modified as recommended: lifting, pushing, pulling, crouching, walking, using stairs, bending at the waist, awkward and/or sustained postures, tolerance for sitting or standing, hot and cold environments, data entry and other repetitive motion tasks, sustained grip, tool usage and vibration factors. Even if there is residual chronic pain, return-to-work is not necessarily contraindicated. The practitioner should understand all of the physical demands of the patient's job position before returning the patient to full duty and should request clarification of the patient's job duties. Clarification should be obtained from the employer or, if necessary, from including, but not limited to, occupational health nurse, physical therapist, occupational therapist, vocational rehabilitation specialist, chiropractor or another professional. American Medical Association clarifies "disability" as "activity limitations and/or participation restrictions in an individual with a health condition, disorder or disease" versus "impairment" as "a significant deviation, loss, or loss of use of any body structure or body function in an individual with a health condition, disorder or disease".

13. Delayed Recovery. Within the discretion of the treating physician, strongly consider a psychological evaluation, if not previously provided, as well as initiating interdisciplinary rehabilitation treatment and vocational goal setting, for those patients who are failing to make expected progress 6 to 12 weeks after initiation of treatment of an injury. The OWCA recognizes that 3 to 10 percent of all industrially injured patients will not recover within the timelines outlined in this document despite optimal care. Such individuals may require treatments beyond the limits discussed within this document, but such treatment requires clear documentation by the authorized treating practitioner focusing on objective functional gains afforded by further treatment and impact upon prognosis.

14. Guideline Recommendations and Inclusion of Medical Evidence. All recommendations are based on available evidence and/or consensus judgment. It is generally recognized that early reports of a positive treatment effect are frequently weakened or overturned by subsequent research. Per R.S. 1203.1, when interpreting medical evidence statements in the guideline, the following apply to the strength of recommendation.

Strong	Level 1 Evidence	We Recommend
Moderate	Level 2 and Level 3 Evidence	We Suggest
Weak	Level 4 Evidence	Treatment is an Option
Inconclusive	Evidence is Either Insufficient or Conflicting	

a. Consensus guidelines are generated by a professional organization that the guidelines are intended to serve. A committee of specialists and experts are selected by the organization to create an unbiased, vetted recommendation for the treatment of specific issues within

the realm of their expertise. All recommendations in the guideline are considered to represent reasonable care in appropriately selected cases, regardless of the level of evidence or consensus statement attached to it. Those procedures considered inappropriate, unreasonable, or unnecessary are designated in the guideline as “not recommended.”

15. Treatment of Pre-Existing Conditions The conditions that preexisted the work injury/disease will need to be managed under two circumstances: (a) A pre-existing condition exacerbated by a work injury/disease should be treated until the patient has returned to their objectively verified prior level of functioning or Maximum Medical Improvement (MMI); and (b) A pre-existing condition not directly caused by a work injury/disease but which may prevent recovery from that injury should be treated until its objectively verified negative impact has been controlled. The focus of treatment should remain on the work injury/disease.

B. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 23:1203.1.

HISTORICAL NOTE: Promulgated by the Louisiana Workforce Commission, Office of Workers Compensation Administration, LR 37:1631 (June 2011), amended by the Louisiana Workforce Commission, Office of Workers Compensation, LR 40:1119 (June 2014), LR 49:

§2005. Initial Diagnostic Procedures

A. ...

1. History-taking and physical examination (Hx and PE). These are generally accepted, well-established and widely used procedures that establish the foundation/basis for and dictate subsequent stages of diagnostic and therapeutic procedures. List of medications patient is taking should be included in every history, including over the counter medicines as well as supplements. When findings of clinical evaluations and those of other diagnostic procedures are not complementing each other, the objective clinical findings should have preference. The medical records should reasonably document the following.

a. - a.i. ...

ii. Location of pain, nature of symptoms, and alleviating/exacerbating factors (e.g. sleep positions). Of particular importance, is whether raising the arm over the head alleviates radicular-type symptoms. The history should include both the primary and secondary complaints (e.g., primary neck pain, secondary arm pain, headaches, and shoulder girdle complaints). The use of a patient completed pain drawing, such as Visual Analog Scale (VAS) is highly recommended, especially during the first two weeks following injury to assure that all work related symptoms are being addressed;

a.iii. - b.vii. ...

c. Physical Examination should include accepted tests and exam techniques applicable to the area being examined, including:

i. general and visual inspection, including posture, stance, balance and gait;

1.c.ii. - 3.d. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 23:1203.1.

HISTORICAL NOTE: Promulgated by the Louisiana Workforce Commission, Office of Workers Compensation Administration, LR 37:1632 (June 2011), amended by the

Louisiana Workforce Commission, Office of Workers Compensation, LR 40:1120 (June 2014), LR 49:

§2007. Follow-Up Diagnostic Imaging and Testing Procedures

A. - C. ...

1. Imaging studies are generally accepted, well-established and widely used diagnostic procedures. In the absence of myelopathy, progressive neurological changes or incapacitating pain, imaging usually is not appropriate until conservative therapy has been tried and failed. Six to eight weeks of treatment are usually an adequate period of time before an imaging procedure is in order, but the clinician should use judgment in this regard. Early testing may be indicated for patients who demonstrate they cannot tolerate a trial of conservative therapy or who have a significant acute objective neurologic deficit that requires immediate imaging. When the findings of the diagnostic imaging and testing procedures are not consistent with the clinical examination, clinical findings should have preference. There is good evidence that in the over 40 asymptomatic population, the prevalence of disc degeneration is greater than 50 percent. Disc degeneration, seen as loss of signal intensity on MRI, may be due to age-related biochemical changes rather than structural deterioration, and may not have pathological significance. Disc bulging and posterior disc protrusion, while not rare, is more commonly symptomatic in the cervical spine than in the lumbar spine due to the smaller cervical spinal canal. Mild reduction in the cross-sectional area of the spinal cord may be seen without myelopathy in patients older than 40, therefore, clinical correlation is required. The studies below are listed in frequency of use, not importance.

a. ...

i. In general, the high field, conventional, MRI provides better resolution. A lower field scan may be indicated when a patient cannot fit into a high field scanner or is too claustrophobic despite sedation. Inadequate resolution on the first scan may require a second MRI using a different technique. All questions in this regard should be discussed with the MRI center and/or radiologist. Repeat MRI testing may be needed in cases that involve a change in exam or symptoms or for contemplated surgical intervention.

a.ii. - b. ...

c. Post-Fusion Patients—monitoring of fusion can be done with initial x-rays within the first few weeks after surgery. Then, x-rays every three months up to a year. CT scan or X-rays can be done at one year to assess for fusion.

d. Myelography is the injection of radiopaque material into the spinal subarachnoid space, with x-rays then taken to define anatomy. It may be used as a diagnostic procedure to obtain accurate information of characteristics, location, and spatial relationships among soft tissue and bony structures. Myelography is an invasive procedure with complications including nausea, vomiting, headache, convulsion, arachnoiditis, CSF leakage, allergic reactions, bleeding, and infection. Therefore, myelography should only be considered when CT and MRI are unavailable, for morbidly obese patients or those who have undergone multiple operations, and when other tests prove non-diagnostic or fail to delineate pathology suspected by clinical presentation. The use of small needles and a less toxic, water-soluble, nonionic contrast is recommended.

e. CT myelogram provides more detailed information about relationships between neural elements and surrounding anatomy and is appropriate in patients with multiple prior operations or tumorous conditions.

f. Single Photon Emission Computerized Tomography (SPECT). A scanning technique which may be helpful to localize facet joint pathology and is useful in determining which patients are likely to have a response to facet injection. SPECT combines bone scans and CT scans in looking for facet joint pathology.

g. Bone scan (radioisotope bone scanning) is generally accepted, well-established and widely used. Bone scanning is more sensitive but less specific than MRI. 99MTechnetium diphosphonate uptake reflects osteoblastic activity and may be useful in diagnosing metastatic/primary bone tumors, stress fractures, osteomyelitis, and inflammatory lesions, but cannot distinguish between these entities. In the cervical spine, the usual indication is to evaluate for neoplastic conditions. Other indications include occult fracture or infection.

h. Other radioisotope scanning indium and gallium scans are generally accepted, well-established, and widely used procedures, usually to help diagnose lesions seen on other diagnostic imaging studies. 67Gallium citrate scans are used to localize tumor, infection, and abscesses. 111Indium-labeled leukocyte scanning is utilized for localizing infection or inflammation and is usually not used for the cervical spine.

i. Dynamic [digital] fluoroscopy dynamic [digital] fluoroscopy of the cervical spine measures the motion of intervertebral segments using a videofluoroscopy unit to capture images as the subject performs cervical flexion and extension, storing the anatomic motion of the spine in a computer. Dynamic Fluoroscopy may be used in state-designated trauma centers to evaluate the cervical spine. Its superiority over MRI has not been established. If performed, full visualization of the cervical spine (C1 - T1), in accordance with §2005.A.2. (Initial Diagnostic Procedures-Imaging), should be accomplished prior to the procedure. In the post-acute setting in some rare cases, Dynamic [Digital] Fluoroscopy may be used but is primarily an investigational tool and therefore, requires prior authorization in the post-acute setting. No studies have yet demonstrated predictive value in terms of standard operative and non-operative therapeutic outcomes.

2. - 2.a.i. ...

ii. In general, EMG and NCS are complementary to imaging procedures such as CT, MRI, and/or myelography or diagnostic injection procedures. Electrodiagnostic studies may provide useful, correlative neuropathophysiological information that would be otherwise unobtainable from the radiologic studies discussed above. Repeat testing may be necessary in cases where follow-up of an initial abnormal test is required to determine efficacy of a treatment or evaluate changes in a patient.

a.iii. - b.vi.(c). ...

vii. Specific Diagnostic Injections. In general, relief should last for at least the duration of the local anesthetic used and should significantly relieve pain and result in functional improvement. Refer to "Injections-Therapeutic" for information on specific therapeutic injections.

(a). Medial Branch Facet Blocks and Sacral Lateral Branch Blocks – If the block provides 80 percent or more pain reduction as measured by a numerical pain index scale within one hour of the medial branch blocks up to three levels per side, then rhizotomy of the medial branch nerves, up to four nerves per side, may be done without confirmation block. If the initial set of medial branch blocks provides less than 80 percent but at least 50 percent pain reduction as measured by a numerical pain index scale or documented functional improvement, the medial branch block should be repeated for confirmation before a rhizotomy is performed. If 50 percent or greater pain reduction is achieved as measured by the NPIS with two sets of medial branch blocks for facet joint pain, then rhizotomy may be performed.

(i). Frequency and maximum duration may be repeated once for comparative blocks. Limited to four levels.

2.b.vii.(b). - 3.e.i. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 23:1203.1.

HISTORICAL NOTE: Promulgated by the Louisiana Workforce Commission, Office of Workers Compensation Administration, LR 37:1634 (June 2011), amended by the Louisiana Workforce Commission, Office of Workers Compensation, LR 40:1121 (June 2014), LR 49:

§2009. Therapeutic Procedures—Non-Operative

A. - G.3.e.iii. ...

iv. Individuals should have met the following indications: pain of well-documented facet origin, unresponsive to active and/or passive therapy. It is generally recommended that this procedure not be performed until three months of active therapy and manual therapy have been completed unless severe pain or limitation of ROM preclude patient participation. All patients should continue appropriate exercise with functionally directed rehabilitation. Active treatment, which patients will have had prior to the procedure, will frequently require a repeat of the sessions previously ordered (Refer to Active Therapy).

v. Complications. Appropriate medical disclosures should be provided to the patient as deemed necessary by the treating physician.

vi. Post-Procedure Therapy. Active therapy. Implementation of a gentle reconditioning program within the first post-procedure week is recommended, barring complications. Instruction and participation in a long-term home-based program of ROM, cervical, scapular, and thoracic strengthening, postural or neuromuscular re-education, endurance, and stability exercises should be accomplished over a period of four to ten visits post-procedure.

vii. Requirements for repeat RF neurotomy (or additional level RF neurotomies). In some cases pain may recur [ISIS]. Successful rhizotomy usually provides from six to eighteen months of relief.

(a). Before a repeat RF neurotomy is done, a confirmatory medial branch injection should be performed if the patient's pain pattern presents differently than in the initial evaluation. In occasional patients, additional levels of RF neurotomy may be necessary. The same indications and limitations apply.

3.f. - 13.a.i.(c). ...

(i). High velocity, low amplitude (HVLA) technique, chiropractic manipulation, osteopathic manipulation, muscle energy techniques, counter strain, and non-force techniques are all types of manipulative treatment. This may be applied by osteopathic physicians (D.O.), chiropractors (D.C.), physical therapists (P.T.), occupational therapists (O.T.), or physicians. Under these different types of manipulation exist many subsets of different techniques that can be described as a) direct- a forceful engagement of a restrictive/pathologic barrier, b) indirect- a gentle/non-forceful dis-engagement of a restrictive/pathologic barrier, c) the patient actively assisting in the treatment and d) the patient relaxing, allowing the practitioner to move the body tissues. When the proper diagnosis is made and coupled with the appropriate technique, manipulation has no contraindications and can be applied to all tissues of the body. Pre-treatment assessment should be performed as part of each manipulative treatment visit to ensure that the correct diagnosis and correct treatment is employed.

a.i.(c).(ii). - f.iv. ...

g. Intramuscular Manual Therapy: Dry Needling. IMT involves using filament needles to treat "Trigger Points" within muscle. It may require multiple advances of a filament needle to achieve a local twitch response to release muscle tension and pain. Dry needling is an effective treatment for acute and chronic pain of neuropathic origin with very few side effects. Dry needling is a technique to treat the neuro-musculoskeletal system based on pain patterns, muscular dysfunction and other orthopedic signs and symptoms.

i. - i.iv. ...

j. Superficial Heat and Cold Therapy (excluding Infrared Therapy) is a generally accepted treatment. Superficial heat and cold are thermal agents applied in various manners that lower or raise the body tissue temperature for the reduction of pain, inflammation, and/or effusion resulting from injury or induced by exercise. It includes application of heat just above the surface of the skin at acupuncture points. Indications include acute pain, edema and hemorrhage, need to increase pain threshold, reduce muscle spasm, and promote stretching/flexibility. Cold and heat packs can be used at home as an extension of therapy in the clinic setting. Continuous cryotherapy units with compression are allowable in post-surgical orthopedic patients.

i. -ii. ...

iii. Maximum Duration: 30 days

13.k. -14.a. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 23:1203.1.

HISTORICAL NOTE: Promulgated by the Louisiana Workforce Commission, Office of Workers Compensation Administration, LR 37:1640 (June 2011), amended by the Louisiana Workforce Commission, Office of Workers Compensation, LR 40:1126 (June 2014), LR 49:

§2011. Therapeutic Procedures—Operative

A. - F.2.c.ii.(e).(iv). ...

3. Artificial Cervical Disc Replacement. This involves the insertion of an FDA approved prosthetic device into the cervical intervertebral space with the goal of maintaining physiologic motion at the treated cervical segment. The use of artificial discs in motion-preserving technology should be based on the surgeon's skill and training. Artificial disc

replacement has been found to be efficacious for both one and two level arthroplasty

4. - 7.c....

AUTHORITY NOTE: Promulgated in accordance with R.S. 23:1203.1.

HISTORICAL NOTE: Promulgated by the Louisiana Workforce Commission, Office of Workers Compensation Administration, LR 37:1651 (June 2011), amended by the Louisiana Workforce Commission, Office of Workers Compensation, LR 40:1132 (June 2014), LR 49:

Subchapter B. Low Back Pain

§2019. Follow-Up Diagnostic Imaging and Testing Procedures

A. - C.1.b. ...

c. Post-Fusion Patients—monitoring of fusion can be done with initial x-rays within the first few weeks after surgery. Then, x-rays every three months up to a year. CT scan or X-rays can be done at one year to assess for fusion.

d. Myelography is the injection of radiopaque material into the spinal subarachnoid space, with x-rays then taken to define anatomy. It may be used as a diagnostic procedure to obtain accurate information of characteristics, location, and spatial relationships among soft tissue and bony structures. Myelography is an invasive procedure with complications including nausea, vomiting, headache, convulsion, arachnoiditis, cerebral-spinal fluid (CSF) leakage, allergic reactions, bleeding, and infection. Therefore, myelography should only be considered when CT and MRI are unavailable, for morbidly obese patients or those who have undergone multiple operations, and when other tests prove non-diagnostic. The use of small needles and a less toxic, water-soluble, nonionic contrast is recommended.

e. CT Myelogram provides more detailed information about relationships between neural elements and surrounding anatomy and is appropriate in patients with multiple prior operations or tumorous conditions.

f. Single Photon Emission Computerized Tomography (SPECT). A scanning technique which may be helpful to localize facet joint pathology and is useful in determining which patients are likely to have a response to facet injection. SPECT combines bone scans & CT Scans in looking for facet joint pathology.

g. Bone Scan (Radioisotope Bone Scanning) is generally accepted, well-established, and widely used. Bone scanning is more sensitive but less specific than MRI. ^{99m}Technetium diphosphonate uptake reflects osteoblastic activity and may be useful in diagnosing metastatic/primary bone tumors, stress fractures, osteomyelitis, and inflammatory lesions, but cannot distinguish between these entities.

h. Other Radioisotope Scanning: Indium and gallium scans are generally accepted, well-established, and widely used procedures usually to help diagnose lesions seen on other diagnostic imaging studies. ⁶⁷Gallium citrate scans are used to localize tumor, infection, and abscesses. ¹¹¹Indium-labeled leukocyte scanning is utilized for localizing infection or inflammation.

i. Dynamic [Digital] Fluoroscopy: Dynamic [Digital] Fluoroscopy of the lumbar spine measures the motion of intervertebral segments using a videofluoroscopy unit to capture images as the subject performs lumbar flexion and extension, storing the anatomic motion of the

spine in a computer. Currently it is not recommended for use in the diagnosis of lumbar instability, since there is limited information on normal segmental motion for the age groups commonly presenting with low back pain, and diagnostic criteria for specific spinal conditions are not yet defined. No studies have yet demonstrated predictive value in terms of standard operative and non-operative therapeutic outcomes.

2. - 3.e.i. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 23:1203.1.

HISTORICAL NOTE: Promulgated by the Louisiana Workforce Commission, Office of Workers Compensation Administration, LR 37:1658 (June 2011), amended by the Louisiana Workforce Commission, Office of Workers Compensation, LR 40:1137 (June 2014), LR 46:1246 (September 2020), LR 49:

§2021. Therapeutic Procedures—Non-Operative

A. - H.13.b.viii.(d). ...

ix. Superficial Heat and Cold Therapy (excluding Infrared Therapy) is a generally accepted treatment. Superficial heat and cold are thermal agents applied in various manners that lower or raise the body tissue temperature for the reduction of pain, inflammation, and/or effusion resulting from injury or induced by exercise. It includes application of heat just above the surface of the skin at acupuncture points. Indications include acute pain, edema and hemorrhage, need to increase pain threshold, reduce muscle spasm, and promote stretching/flexibility. Cold and heat packs can be used at home as an extension of therapy in the clinic setting. Continuous cryotherapy units with compression are allowable in post-surgical orthopedic patients.

- (a). time to produce effect: Immediate;
- (b). frequency: two to five times per week;
- (c). maximum duration: thirty days

13.b.x. - 14.a. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 23:1203.1.

HISTORICAL NOTE: Promulgated by the Louisiana Workforce Commission, Office of Workers Compensation Administration, LR 37:1664 (June 2011), amended by the Louisiana Workforce Commission, Office of Workers Compensation, LR 40:1140 (June 2014), LR 46:1452 (September 2020), LR 49:

Chapter 21. Pain Medical Treatment Guidelines

Subchapter A. Chronic Pain Disorder Medical Treatment Guidelines

Editor's Note: Form LWC-WC 1009. Disputed Claim for Medical Treatment has been moved to §2328 of this Part.

§2111. Therapeutic Procedures—Non-Operative

A. - C.19.c.ix.(b).(iv). ...

x. Superficial heat and cold therapy (including infrared therapy) is a generally accepted treatment. Superficial heat and cold therapies are thermal agents applied in various manners that lowers or raises the body tissue temperature for the reduction of pain, inflammation, and/or effusion resulting from injury or induced by exercise. Indications include acute pain, edema and hemorrhage, need to increase pain threshold, reduce muscle spasm and promote stretching/flexibility. Cold and heat packs can be used at home as an extension of therapy in the clinic setting. At the time of the writing of this guideline, continuous cryotherapy units with compression are supported by evidence only in post-surgical patients.

- (a). time to produce effect: immediate;
 - (b). frequency: two to five times per week;
 - (c). maximum duration: one month.
- xi. - xvi. (a). ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 23:1203.1.

HISTORICAL NOTE: Promulgated by the Louisiana Workforce Commission, Office of Workers Compensation Administration, LR 37:1692 (June 2011), amended LR 46:205 (February 2020), repromulgated LR 46:365 (March 2020), LR 46:797 (June 2020), LR 46:797 (June 2020), LR 49:

Chapter 23. Upper and Lower Extremities Medical Treatment Guidelines

Subchapter A. Lower Extremities

Editor's Note: Form LWC-WC 1009. Disputed Claim for Medical Treatment has been moved to §2328 of this Part.

§2311. Therapeutic Procedures- Non-Operative

A. - G.15.a.i.(m).(iv). ...

(n). Superficial Heat and Cold Therapy is a generally accepted treatment. Superficial heat and cold therapies are thermal agents applied in various manners that lower or raises the body tissue temperature for the reduction of pain, inflammation, and/or effusion resulting from injury or induced by exercise. It may be used acutely with compression and elevation. Indications include acute pain, edema and hemorrhage, need to increase pain threshold, reduce muscle spasm and promote stretching/flexibility. At the time of the writing of this guideline, continuous cryotherapy units with compression are supported by evidence only in post-surgical patients.

- (i). Time to Produce Effect: Immediate.
- (ii). Frequency: Two to five times per

week.

- (iii). Maximum Duration: One month.

15.a.i.(o). - 16.a. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 23:1203.1.

HISTORICAL NOTE: Promulgated by the Louisiana Workforce Commission, Office of Workers Compensation Administration, LR 37:1801 (June 2011), LR 49:

§Subchapter B. Shoulder Injury Medical Treatment Guidelines

Editor's Note: Form LWC-WC 1009. Disputed Claim for Medical Treatment has been moved to §2328 of this Part.

§2315. Introduction

A. This document has been prepared by the Louisiana Workforce Commission, Office of Workers' Compensation and should be interpreted within the context of guidelines for physicians/providers treating individuals qualifying under Louisiana's Workers' Compensation Act as injured workers with shoulder injuries. Although the primary purpose of this document is advisory and educational, these guidelines are enforceable under the Louisiana Workers Compensation Act. All medical care, services, and treatment owed by the employer to the employee in accordance with the Louisiana Workers' Compensation Act shall mean care, services, and treatment in accordance with these guidelines. Medical Care, services, and treatment that varies from these guidelines shall also be due by the employer when it is demonstrated to the medical director of the office by a preponderance of the scientific medical evidence, that a variance from these guidelines is reasonably required to cure or relieve the injured worker from the effects of the injury or occupational disease given the circumstances. Therefore, these guidelines

are not relevant as evidence of a provider's legal standard of professional care. To properly utilize this document, the reader should not skip nor overlook any sections.

AUTHORITY NOTE: Promulgated in accordance with R.S. 23:1203.1.

HISTORICAL NOTE: Promulgated by the Louisiana Workforce Commission, Office of Workers Compensation Administration, LR 37:1820 (June 2011), LR 49:

§2317. General Guideline Principles

A. The principles summarized in this section are key to the intended implementation of all Office of Workers' Compensation medical treatment guidelines and critical to the reader's application of the guidelines in this document.

1. Application of Guidelines. The OWCA provides procedures to implement medical treatment guidelines and to foster communication to resolve disputes among the provider, payer, and patient through the Workers' Compensation Act.

2. Education. Education of the patient and family, as well as the employer, insurer, policy makers and the community should be the primary emphasis in the treatment of workers' compensation injuries. Currently, practitioners often think of education last, after medications, manual therapy, and surgery. Practitioners must develop and implement strategies to educate patients, employers, insurance systems, policy makers, and the community as a whole. An education-based paradigm should always start with inexpensive communication providing reassuring and evidence-based information to the patient. More in-depth education is currently a component of treatment regimens which employ functional, restorative, preventive and rehabilitative programs. No treatment plan is complete without addressing issues of individual and/or group patient education as a means of facilitating self-management of symptoms and prevention. . Facilitation through language interpretation, when necessary, is a priority and part of the medical care treatment protocol.

3. Informed Decision Making. Providers should implement informed decision making as a crucial element of a successful treatment plan. Patients, with the assistance of their health care practitioner, should identify their personal and professional functional goals of treatment at the first visit. Progress towards the individual's identified functional goals should be addressed by all members of the health care team at subsequent visits and throughout the established treatment plan. Nurse case managers, physical therapists, and other members of the health care team play an integral role in informed decision-making and achievement of functional goals. Patient education and informed decision-making should facilitate self-management of symptoms and prevention of further injury.

4. Treatment Parameter Duration. Time frames for specific interventions commence once treatments have been initiated, not on the date of injury. Obviously, duration will be impacted by patient adherence, as well as availability of services. Clinical judgment may substantiate the need to accelerate or decelerate the time frames discussed in this document. Such deviation shall be in accordance with La. R.S. 23:1203.1

5. Active Interventions. Emphasizing patient responsibility, such as therapeutic exercise and/or functional

treatment, are generally emphasized over passive modalities, especially as treatment progresses. Generally, passive interventions are viewed as a means to facilitate progress in an active rehabilitation program with concomitant attainment of objective functional gains.

6. Active Therapeutic Exercise Program. Exercise program goals should incorporate patient strength, endurance, flexibility, coordination, and education. This includes functional application in vocational or community settings.

7. Positive Patient Response. Positive results are defined primarily as functional gains that can be objectively measured.

a. Objective functional gains include, but are not limited to, positional tolerances, range-of-motion (ROM), strength, and endurance, activities of daily living, ability to function at work, cognition, psychological behavior, and efficiency/velocity measures that can be quantified. Subjective reports of pain and function should be considered and given relative weight when the pain has anatomic and physiologic correlation. Anatomic correlation must be based on objective findings.

8. Re-Evaluation of Treatment within Four Weeks. If a given treatment or modality is not producing positive results within four weeks, treatment should be either modified or discontinued. Reconsideration of diagnosis should also occur in the event of poor response to a seemingly rational intervention.

9. Surgical Interventions. Surgery should be contemplated within the context of expected improvement of functional outcome and not purely for the purpose of pain relief. The concept of "cure" with respect to surgical treatment by itself is generally a misnomer. All operative interventions must be based upon positive correlation of clinical findings, clinical course, and diagnostic tests. A comprehensive assimilation of these factors must lead to a specific diagnosis with positive identification of pathologic conditions. The decision and recommendation for operative treatment, and the appropriate informed consent should be made by the operating surgeon. Prior to surgical intervention, the patient and treating physician should identify functional operative goals and the likelihood of achieving improved ability to perform activities of daily living or work activities and the patient should agree to comply with the pre- and post-operative treatment plan and home exercise requirements. The patient should understand the length of partial and full disability expected post-operatively.

10. Pharmacy-Louisiana Law and Regulation: All prescribing will be done in accordance with the laws of the state of Louisiana as they pertain respectively to each individual licensee, including, but not limited to: Louisiana State Board of Medical Examiners regulations governing medications used in the treatment of non-cancer-related chronic or intractable pain; Louisiana Board of Pharmacy Prescription Monitoring Program; Louisiana Department of Health and Hospitals licensing and certification standards for pain management clinics; other laws and regulations affecting the prescribing and dispensing of medications in the state of Louisiana.

11. Six Month-Time Frame. Injuries resulting in temporary total disability may require maintenance treatment and may not attain return to work in six months.

12. Return To Work. Return to work is therapeutic, assuming the work is not likely to aggravate the basic problem or increase long-term pain. An injured worker's return-to-work status shall not be the sole cause to deny reasonable and medically necessary treatment under these guidelines. Two good practices are: early contact with injured workers and provide modified work positions for short-term injuries. The practitioner must provide specific physical limitations and the patient should never be released to non-specific and vague descriptions such as "sedentary" or "light duty." The following physical limitations should be considered and modified as recommended: lifting, pushing, pulling, crouching, walking, using stairs, bending at the waist, awkward and/or sustained postures, tolerance for sitting or standing, hot and cold environments, data entry and other repetitive motion tasks, sustained grip, tool usage and vibration factors. Even if there is residual chronic pain, return-to-work is not necessarily contraindicated. The practitioner should understand all of the physical demands of the patient's job position before returning the patient to full duty and should request clarification of the patient's job duties. Clarification should be obtained from the employer or, if necessary, from including, but not limited to, occupational health nurse, physical therapist, occupational therapist, vocational rehabilitation specialist, chiropractor or another professional. American Medical Association clarifies "disability" as "activity limitations and/or participation restrictions in an individual with a health condition, disorder or disease" versus "impairment" as "a significant deviation, loss, or loss of use of any body structure or body function in an individual with a health condition, disorder or disease".

13. Delayed Recovery. Within the discretion of the treating physician, strongly consider a psychological evaluation, if not previously provided, as well as initiating interdisciplinary rehabilitation treatment and vocational goal setting, for those patients who are failing to make expected progress 6 to 12 weeks after initiation of treatment of an injury. The OWCA recognizes that 3 to 10 percent of all industrially injured patients will not recover within the timelines outlined in this document despite optimal care. Such individuals may require treatments beyond the limits discussed within this document, but such treatment requires clear documentation by the authorized treating practitioner focusing on objective functional gains afforded by further treatment and impact upon prognosis.

14. Guideline Recommendations and Inclusion of Medical Evidence. All recommendations are based on available evidence and/or consensus judgment. It is generally recognized that early reports of a positive treatment effect are frequently weakened or overturned by subsequent research. Per R.S. 1203.1, when interpreting medical evidence statements in the guideline, the following apply to the strength of recommendation.

Strong	Level 1 Evidence	We Recommend
Moderate	Level 2 and Level 3 Evidence	We Suggest
Weak	Level 4 Evidence	Treatment is an Option
Inconclusive	Evidence is Either Insufficient or Conflicting	

a. Consensus guidelines are generated by a professional organization that the guidelines are intended to serve. A committee of specialists and experts are selected by the organization to create an unbiased, vetted recommendation for the treatment of specific issues within the realm of their expertise. All recommendations in the guideline are considered to represent reasonable care in appropriately selected cases, regardless of the level of evidence or consensus statement attached to it. Those procedures considered inappropriate, unreasonable, or unnecessary are designated in the guideline as "not recommended."

15. Treatment of Pre-Existing Conditions The conditions that preexisted the work injury/disease will need to be managed under two circumstances: (a) A pre-existing condition exacerbated by a work injury/disease should be treated until the patient has returned to their objectively verified prior level of functioning or Maximum Medical Improvement (MMI); and (b) A pre-existing condition not directly caused by a work injury/disease but which may prevent recovery from that injury should be treated until its objectively verified negative impact has been controlled. The focus of treatment should remain on the work injury/disease.

B. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 23:1203.1.

HISTORICAL NOTE: Promulgated by the Louisiana Workforce Commission, Office of Workers Compensation Administration, LR 37:1821 (June 2011), amended by the Louisiana Workforce Commission, Office of Workers Compensation, LR 40:1162 (June 2014), LR 49:

§2319. Initial Diagnostic Procedures

A. ...

1. History Taking and Physical Examination (Hx and PE) are generally accepted, well-established and widely used procedures that establish the foundation/basis for and dictates subsequent stages of diagnostic and therapeutic procedures. List of medications patient is taking should be included in every history, including over the counter medicines as well as supplements. When findings of clinical evaluations and those of other diagnostic procedures are not complementing each other, the objective clinical findings should have preference. The medical records should reasonably document the following:

1.a. - 7.a. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 23:1203.1.

HISTORICAL NOTE: Promulgated by the Louisiana Workforce Commission, Office of Workers Compensation Administration, LR 37:1822 (June 2011), LR 49:

§2321. Follow-Up Diagnostic Imaging and Testing Procedures

A. - C.1.j. ...

k. Diagnostic Arthroscopy (DA) allows direct visualization of the interior of a joint, enabling the diagnosis of conditions when other diagnostic tests have failed to reveal an accurate diagnosis; however, it should generally not be employed for exploration purposes only. In order to perform a diagnostic arthroscopy, the patient must have completed at least some conservative therapy without sufficient functional recovery and meet criteria for arthroscopic repair.

i. DA may also be employed in the treatment of acute joint disorders. In some cases, the mechanism of injury and physical examination findings will strongly suggest the presence of a surgical lesion. In those cases, it is appropriate to proceed directly with the interventional arthroscopy.

3 - 4.e.i. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 23:1203.1.

HISTORICAL NOTE: Promulgated by the Louisiana Workforce Commission, Office of Workers Compensation Administration, LR 37:1825 (June 2011), LR 49:

§2323. Specific Diagnosis, Testing and Treatment

A. - A.10.a.vii. ...

b. Specific Physical Exam Findings may include: Restricted active and passive glenohumeral ROM in multiple planes is the primary physical finding. It may be useful for the examiner to inject the subacromial space with lidocaine and then repeat ROM testing to rule out stiffness secondary to rotator cuff or bursal pathology. Lack of improvement of ROM usually confirms the diagnosis. Postural changes and secondary trigger points along with atrophy of the deltoid and supraspinatus muscles may be seen.

c. Diagnostic Testing Procedures:

i. Plain x-rays should be done to rule out concomitant pathology such as subluxation or tumor.

ii. Other diagnostic testing may be indicated to rule out associated pathology. Refer to Follow-up Diagnostic Procedures and to Specific Diagnosis, Testing, and Treatment. Dynamic sonography may be useful to specifically identify the movements most affected and rule out other pathology.

iii. Laboratory tests should be considered to rule out systemic diseases.

d. Non-operative Treatment Procedures: Address the goal to restore and maintain function and may include the following:

i. Therapeutic interventions are the mainstay of treatment. They should include ROM, active therapies, and a home exercise program. Passive as well as active therapies may be used for control of pain and swelling. Therapy should progress to strengthening and instruction in a home exercise program targeted to further improve ROM and strength of the shoulder girdle musculature. There is some evidence that a home exercise program will have similar results to fully-supervised physical therapy in non-workers compensation populations; however, to facilitate return to work, supervised therapy is generally recommended for at least several sessions to assure proper performance of home exercise and to evaluate continued progress. These sessions are in addition to any sessions already performed for the original primary related diagnosis. Refer to Therapeutic Procedures, Non-operative for all other therapies as well as a description of active and passive therapies.

(a). Time to Produce Effect: Four sessions.

(b). Frequency: Two times per week for the first two weeks and one time or less thereafter.

(c). Optimum Duration: 8 to 12 sessions.

(d). Maximum Duration: 20 sessions per year.

Additional follow-up visits may be justified to reinforce exercise patterns or to reach final functional goals if therapy to date has demonstrated objective functional gains.

ii. Return to work duties with increased ROM as tolerated are also helpful to increase function. Refer to Return to Work.

iii. Medications, such as NSAIDs and analgesics, may be helpful. Narcotics are indicated for post-manipulation or post-operative cases. Judicious use of pain medications to optimize function may be indicated. Refer to Medications.

iv. Subacromial bursal and/or glenohumeral steroid injections can decrease inflammation and allow the therapist to progress with functional exercise and ROM. There is strong evidence that intra-articular injection of a corticosteroid produces pain relief and increases ROM in the short-term for individuals with restriction of both active and passive ROM in more than one direction. There is good evidence that the addition of a physical therapy or home exercise program is more effective than steroid injections alone. Injections under significant pressure should be avoided as the needle may be penetrating the tendon and injection into the tendon can cause possible tendon breakdown, tendon degeneration, or rupture. Injections should be minimized for patients under 30 years of age. Steroid injections should be used cautiously in diabetic patients. Diabetic patients should be reminded to check their blood glucose level at least daily for 2 weeks after injections.

(a). Time to Produce Effect: One injection.

(b). Maximum Duration: Three injections in one year at least four to eight weeks apart, when functional benefits are demonstrated with each injection.

v. There is no clear long-term benefit for suprascapular nerve blocks, however, blocks may be appropriate for patients when pain is not well-controlled and injections improve function.

(a). Time to Produce Effect: One block should demonstrate increased ability to perform exercises and/or range-of-motion.

(b). Maximum Duration: Three per year.

vi. In cases that are refractory to conservative therapy lasting at least three to six months, and in whom ROM remains significantly restricted (abduction usually less than 90 degrees), the following treatment may be considered:

(a). Distension arthrography or "brisement" in which saline, an anesthetic and usually a steroid are forcefully injected into the shoulder joint causing disruption of the capsule. There is good evidence that distension arthrogram with steroid and saline improves function in patients with decreased passive ROM after three months of treatment. Early therapy to maintain ROM, and restore strength and function should follow distension arthrography. Return to work with restrictions should be expected within one week of the procedure; return to full-duty is expected within four to six weeks.

(b). Dynamic splinting may be appropriate for rare cases when a functional ROM has not been achieved with the treatment listed above.

vii. There is no evidence that hyaluronate injections are superior to physical therapy in this condition and are not recommended.

viii. Other therapies in Therapeutic Procedures, Non-operative, may be employed in individual cases.

e. Surgical Indications: Surgery may be considered when functional deficits interfere with activities of daily living and/or job duties after three to six months of active patient participation in non-operative therapy. For most individuals this constitutes limitations in the range of 130 degrees elevation and 120 degrees abduction; with significant functional limitations; however, individuals who must perform overhead work and lifting may require a greater ROM. Prior to surgical intervention, the patient and treating physician should identify functional operative goals and the likelihood of achieving improved ability to perform activities of daily living or work activities. The patient should also agree to comply with the pre- and post-operative treatment plan and home exercise requirements. The patient should understand the length of partial and full disability expected post-operatively.

f. Operative Procedures: Manipulation under anesthesia which may be done in combination with steroid injection, distension arthrography, or arthroscopy. Contraindications to closed manipulation under anesthesia include anti-coagulation or bleeding diatheses, significant osteopenia, or recent surgical repair of shoulder soft tissue, fracture or neurological lesion. Complications may include humeral fracture, dislocation, cuff injuries, labral tears or brachial plexus injury. Arthroscopic capsular release or open surgical release may be appropriate in rare cases with failure of previous methods and when the patient has demonstrated ability to follow through with required physical and occupational therapy. Other disorders, such as impingement syndrome, may also be treated at the same time. Radiofrequency is not recommended due to reported complications from chondrolysis.

g. Post-Operative Treatment. An individualized rehabilitation program based upon communication between the surgeon and the therapist using the treatments found in Therapeutic Procedures, Non-operative. Therapy may include the following:

i. Early therapeutic rehabilitation interventions are recommended to maintain ROM and should progress to strengthening exercises.

ii. Frequency: Suggested frequency pattern is three to five times per week for the first two weeks, three times per week for the following two weeks, then one to two times per week. The exact frequency per week will depend on the severity.

iii. Optimum Duration: Six to eight weeks with progression to home exercise and/or pool therapy.

iv. Maximum Duration: Up to 12 weeks. Additional follow-up visits may be justified to reinforce exercise patterns or to reach final functional goals if the therapy to date has demonstrated objective functional gains.

v. Return to work and restrictions after surgery may be made by an experienced primary occupational medicine physician in consultation with the surgeon or by the surgeon.

vi. Patient should be approaching MMI within 8 to 12 weeks post-operatively; however, co-existence of other pathology should be taken into consideration.

B. - F.16.h. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 23:1203.1.

HISTORICAL NOTE: Promulgated by the Louisiana Workforce Commission, Office of Workers Compensation Administration, LR 37:1828 (June 2011), amended LR 49:

§2325. Therapeutic Procedures—Non-Operative

A. - F.6.c.vii.(b). ...

viii. Topical Drug Delivery

(a). Description. Topical creams and patches may be an alternative treatment of localized musculoskeletal and neuropathic disorders and can be especially helpful in avoiding opioid use.

(b). Indications: neuropathic pain for many agents; episodic use of NSAIDs and salicylates for joint pain or musculoskeletal disorders. All topical agents should be used with strict instructions for application as well as maximum number of applications per day to obtain the desired benefit and avoid potential toxicity.

(c). Dosing and time to therapeutic effect: all topical agents should be prescribed with clear instructions for application and maximum number of applications per day to obtain the desired benefit and avoid potential toxicity. For most patients, the effects of long-term use are unknown. Thus, episodic use may be preferred for some agents.

(d). Side Effects. localized skin reactions may occur, depending on the medication agent used.

(e). Topical Agents

(i). Capsaicin. As of the time of this guideline writing, formulations of capsaicin have been FDA approved for management of pain associated with post-herpetic neuralgia. Capsaicin offers a safe and effective alternative to systemic NSAID therapy. Although it is quite safe, the local stinging or burning sensation that typically dissipates with regular use, usually after the first 7 to 10 days of treatment, limits effective use of capsaicin. Patients should be advised to apply the cream on the affected area with a plastic glove or cotton applicator and to avoid inadvertent contact with eyes and mucous membranes.

[a]. There is good evidence that low dose capsaicin (0.075 percent) applied four times per day will decrease pain up to 50 percent. There is strong evidence that a single application of eight percent capsaicin is more effective than a control preparation of 0.04 percent capsaicin for up to 12 weeks. However, there may be a need for frequent application, and it is not known whether subsequent applications of capsaicin are likely to be as effective as the first application. There is some evidence that in patients who are being treated with capsaicin 8 percent patches, two methods of pre-treatment are equally effective in controlling application pain and in enabling patients to tolerate the patch: topical four percent lidocaine cream applied to the area for one hour before placement of the capsaicin patch and 50 mg oral tramadol taken 30 minutes before patch placement.

(ii). Clonidine. There is good evidence that topical clonidine gel 0.1 percent is likely to alleviate pain from diabetic peripheral neuropathy in patients who display a nociceptive response to the application of 0.1 percent capsaicin applied to the pretibial area. It is likely that

patients who do not display a pain response to pretibial capsaicin are not likely to have a clinically meaningful analgesic response to clonidine gel. It is unknown if this screening test applies to other types of neuropathic pain. Clonidine gel may be used for neuropathic pain.

[a]. Lofexidine (Lucemyra) is now available and indicated for mitigation of opioid withdrawal symptoms to facilitate abrupt discontinuation in adults. This is necessary to block or reduce life threatening side effects of opioid withdrawal. This drug will be beneficial in drug treatment centers and for physicians finding necessity to abruptly stop opioid medication.

(iii). Ketamine and Tricyclics. Topical medications, such as the combination of ketamine and amitriptyline, have been proposed as an alternative treatment for neuropathic disorders including CRPS. A study using a 10 percent concentration showed no signs of systemic absorption. This low-quality study demonstrated decreased allodynia at 30 minutes for some CRPS patients. However, as of the time of this guideline writing, neither tricyclic nor ketamine topicals are FDA approved for topical use in neuropathic pain. Furthermore, there is good evidence that neither two percent topical amitriptyline nor 1 percent topical ketamine reduces neuropathic pain syndromes. Despite the lack of evidence, it is physiologically possible that topical tricyclics and a higher dose of ketamine could have some effect on neuropathic pain. Other less expensive topicals and compounds, including over-the-counter, should be trialed before more expensive compounds are ordered. The use of topical tricyclics and/or ketamine should be limited to patients with neuritic and/or sympathetically mediated pain with documented supporting objective findings such as allodynia and/or hyperalgesia. Continued use of these agents beyond the initial prescription requires documentation of effectiveness, including functional improvement, and/or decreased use of other medications, particularly decreased use of opioids or other habituating medications.

(iv). Lidocaine. As of the time of this guideline writing, formulations of lidocaine (patch form) have been FDA approved for pain associated with post-herpetic neuralgia. Evidence is mixed for long-term use of lidocaine topically. Physicians should always take into account the blood level that may be achieved with topical use as toxic levels have been reported and there is variability and systemic absorption among individuals. There is good evidence that lidocaine five percent plasters, applied for up to 12 hours to the lower extremities of patients with post-herpetic neuralgia and diabetic painful neuropathy, is non-inferior to pregabalin for the same indications. The topical lidocaine is associated with significantly fewer drug-related adverse events over four weeks of observation. There is some evidence that a five percent lidocaine patch may be used as a secondary option for patients with focal neuropathic pain. A 30 to 50 percent pain reduction may be achieved in those who tolerate the patch. Up to three patches may be used simultaneously for 12 hours per day. It should be applied only to intact skin. Metered dose eight percent pump sprays have also been used and usually require a three times per day reapplication. There is some evidence that the eight percent sprays are effective for short-term, two-week use. However, the effects of long-term use are unknown.

(v). Topical Salicylates and Nonsalicylates have been shown to be effective in relieving pain in acute musculoskeletal conditions and single joint osteoarthritis. Topical salicylate and nonsalicylates achieve tissue levels that are potentially therapeutic, at least with regard to COX inhibition.

[a]. There is insufficient evidence to support the use of topical rubefaciants containing salicylates for acute injuries or chronic conditions. They seem to be relatively well tolerated in the short-term, based on limited data. The amount and quality of the available data mean that uncertainty remains about the effects of salicylate-containing rubefaciants.

[b]. There is good evidence that diclofenac gel (Voltaren, Solaraze) reduces pain and improves function in mild-to-moderate hand osteoarthritis. There is good evidence that topical diclofenac and ketoprofen are more effective than placebo preparations for purposes of relieving pain attributable to knee osteoarthritis. There is good evidence that topical NSAIDs probably reduce the risk of GI adverse effects by approximately one-third compared to oral NSAIDs. Topical diclofenac does not appear to affect the anti-platelet properties of aspirin unlike the oral version. The topical solution of two percent sodium diclofenac applied thrice a day is equal to 1.5 percent four times per day.

[c]. Diclofenac gel has been FDA approved for acute pain due to minor strains, pains, and contusions and for relief of pain due to osteoarthritis of the joints amenable to topical treatment, such as those of the knees, shoulders, and hands. It is likely that other NSAIDs would also be effective topically. Thus, topical NSAIDs are permitted when patients show functional improvement.

[d]. Other than local skin reactions, the side effects of therapy are minimal, although not non-existent. The usual contraindications to use of these compounds needs to be considered. Local skin reactions are rare and systemic effects are even less common. Their use in patients receiving warfarin therapy may result in alterations in bleeding time. Overall, the low level of systemic absorption can be advantageous. This allows the topical use of these medications when systemic administration is relatively contraindicated, such as is the case in patients with hypertension, cardiac failure, or renal insufficiency. Both topical salicylates and NSAIDs are appropriate for many chronic pain patients. However, in order to receive refills, patients should demonstrate increased function, decreased pain, or decreased need for oral medications.

(vi). Other Compounded Topical Agents. At the time of writing this guideline, no studies identified evidence for the effectiveness of compounded topical agents other than those recommended above. Therefore, other compounded topical agents are not generally recommended. In rare cases, they may be appropriate for patients who prefer a topical medication to chronic opioids or who have allergies or side effects from other more commonly used oral agents.

(vii). Prior authorization is required for all agents that have not been recommended above.

ix. Other Agents

(a). Glucosamine. There is good evidence that glucosamine does not improve pain related disability in

those with chronic low back pain and degenerative changes on radiologic studies; therefore, it is not recommended for chronic lower spinal or non-joint pain. For chronic pain related to joint osteoarthritis, see specific extremity guidelines. Glucosamine should not be combined with chondroitin as it is ineffective.

(b). Oral Herbals. There is insufficient evidence due to low quality studies that an oral herbal medication, Compound Qishe Tablet, reduced pain more than placebo. There is also insufficient evidence that Jingfukang and a topical herbal medicine, Compound Extractum Nucis Vomicae, reduced pain more than Diclofenac Diethylamine Emulgel. Further research is very likely to change both the effect size and our confidence in the results. Currently, no oral herbals are recommended.

(c). Vitamin D. A large beneficial effect of vitamin D across different chronic painful conditions is unlikely. Therefore, it is not recommended.

(d). Alpha-Lipoic Acid. An adequate meta-analysis shows that there is some evidence that alpha-lipoic acid at a dose of 600 mg per day may reduce the symptoms of painful diabetic neuropathy in the short term of three to five weeks. The effect of the intravenous route appears to be greater than that of the oral route, but the oral route may have a clinically relevant effect. Doses of 1200 or 1800 mg have not been shown to have additional therapeutic benefit. This medication may be used for neuropathic pain.

7. - 14.b.x.(d). ...

xi. Superficial Heat and Cold Therapy is a generally accepted treatment. Superficial heat and cold therapies are thermal agents applied in various manners that lower or raises the body tissue temperature for the reduction of pain, inflammation, and/or effusion resulting from injury or induced by exercise. It may be used acutely with compression and elevation. Indications include acute pain, edema and hemorrhage, need to increase pain threshold, reduce muscle spasm and promote stretching/flexibility. At the time of the writing of this guideline, continuous cryotherapy units with compression are supported by evidence only in post-surgical patients.

- (a). Time to Produce Effect: Immediate.
- (b). Frequency: Two to five times per week.
- (c). Maximum Duration: One month.

14.b.xii. -15.a. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 23:1203.1.

HISTORICAL NOTE: Promulgated by the Louisiana Workforce Commission, Office of Workers Compensation Administration, LR 37:1850 (June 2011), LR 49:

Family Impact Statement

This amendment to Title 40 should have no impact on families.

Poverty Impact Statement

This amendment to Title 40 should have no impact on poverty or family income.

Provider Impact Statement

1. This Rule should have no impact on the staffing level of the Office of Workers' Compensation as adequate staff already exists to handle the procedural changes.

2. This Rule should create no additional cost to providers or payers.

3. This Rule should have no impact on ability of the provider to provide the same level of service that it currently provides.

Small Business Analysis

This amendment to Title 40 should have no direct impact on small or local businesses.

Public Comments

All interested persons are invited to submit written comments or hearing request on the proposed Rule. Such comments or request should be sent to Tavares Walker, OWC-Administration, 1001 North 23rd Street, Baton Rouge, LA 70802. Such comments should be received by 5 p.m. on January 9, 2023.

Ava Cates
Secretary

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES RULE TITLE: Medical Treatment Guidelines

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

The proposed rule will have no fiscal impact on state or local governmental units, other than the publication fees associated with the proposed rule change.

LA R.S. 23:1203.1 requires the Office of Workers' Compensation Administration (OWCA) assistant secretary, with the assistance of the medical advisory council, to review and update the medical treatment schedule a minimum of once every two years. In accordance with LA R.S. 23:1203.1, the proposed rule amends the medical guidelines as contained in Title 40, Labor and Employment, Part I, Workers' Compensation Administration, Subpart 2, Medical Guidelines, Chapter 20, Chapter 21 Subchapter A, and Chapter 23.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

Implementation of the proposed rule change will have no effect on revenue collections of state or local governmental units.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

The proposed rules update the medical guidelines for the treatment of injured workers. It is not anticipated that the proposed rules will result in a direct economic benefit. However, it is anticipated that the proposed rules will provide an indirect benefit to injured workers, employers, and insurers, by providing better medical treatment to injured workers; thus, facilitating their recovery and return to work.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

The proposed rule change has no known effect on competition and employment.

Tavares A. Walker
Deputy Assistant Secretary
2212#059

Alan M. Boxberger
Interim Legislative Fiscal Officer
Legislative Fiscal Office

Potpourri

POTPOURRI

Department of Agriculture and Forestry Office of the Commissioner

Right to Farm—Diminution of Value of Agricultural Property Guidelines

Pursuant to R.S. 3:3609, the department provides the following guidelines for owners of private agricultural property and governmental entities to assist in determining which governmental actions are likely to result in the diminution of value of private agricultural property.

For purposes of these guidelines, the following terms shall mean:

Diminution in Value—an existent reduction of twenty percent or more of the fair market value or the economically viable use of, as determined by a qualified appraisal expert, the affected portion of any parcel of private agricultural property or the property rights thereto for agricultural purposes, as a consequence of any regulation, rule, policy, or guideline promulgated for or by any governmental entity.

Governmental Action—annexation of territory by a governmental entity and the issuance of a rule, regulation, policy, or guideline promulgated for or by any governmental entity, or an order or other legally binding directive having the force of law or capable of being enforced by government. However, “governmental action” does not mean the following:

- (a) a formal exercise of the power of eminent domain;
- (b) the adoption, enactment, repeal, or amendment of a statute or resolution by the legislature;
- (c) a governmental action directed or mandated by an order of a court of competent jurisdiction;
- (d) law enforcement activity involving the seizure or forfeiture of private agricultural property for a violation of law or as evidence in a criminal proceeding;
- (e) an order issued as a result of a violation of law;
- (f) actions taken to enforce a mortgage or other valid security device;
- (g) actions taken in compliance with federal law or regulation; or
- (h) a result of police power to prohibit activities that are harmful to the public safety and health

Governmental Entity—

- (a) a board, authority, commission, department, office, or agency of the state government;
- (b) a local governmental subdivision with a population of less than four hundred twenty-five thousand; or
- (c) a special purpose district.

Private Agricultural Property—bona fide agricultural, aquacultural, silvicultural, floracultural, viticultural, or horticultural land that is assessed as such for parish ad valorem taxes as agricultural lands under homestead exemption that is wholly owned by a private citizen or

citizens, or a privately or publicly held corporation, partnership, limited partnership, nonprofit corporation, or other legal entity and that is located outside the corporate limits of any municipality.

Governmental actions that may result in the diminution of private agriculture property value include, but are not limited to, the issuance of rules, regulations, policies, guidelines, ordinances, practices, or actions for or by any governmental entity that may involve:

1. zoning, rezoning, or other land-use changes;
2. oil- and gas-production;
3. drainage;
4. right of way or right of access;
5. placement of public works facilities; or
6. the annexation of territory by a governmental entity;

The above and foregoing is an illustrative list, and any determination of whether any specific governmental action results in the diminution of the value of private agricultural property is a case-by-case examination and must be considered on an individual basis.

Nothing in these guidelines shall be construed to restrict the factors to be considered in any determination of whether a reduction of private agricultural property value has occurred, or the cause of any such reduction.

Mike Strain, DVM
Commissioner

2212#060

POTPOURRI

Office of the Governor Office of Financial Institutions

Judicial Interest Rate for 2023

Pursuant to authority granted by La. R.S. 13:4202(B)(1), as amended, the Louisiana Commissioner of Financial Institutions has determined that the judicial rate of interest for calendar year 2023 will be six and one half (6.50 %) percent per annum.

Stanley M. Dameron
Commissioner

2212#061

POTPOURRI

Department of Insurance Office of the Commissioner

Public Hearing—Substantive Change to Proposed Rule:
Regulation 53—Basic Health Insurance Plan Pilot Program
(LAC 37:XIII.3145)

The Department of Insurance published a Notice of Intent to amend its rule, Regulation 53, to update statutory references that have been redesignated and to modify terminology as provided in Act 56 of the 2022 Regular

Session of the Louisiana Legislature, in the October 20, 2022, Volume 48, No. 10 edition of the *Louisiana Register*. The Department of Insurance proposes the following change: to amend §3145.F of the current notice of intent of Regulation 53 by deleting the sentence “Nothing in the LA Health Plan shall be construed so as to be in violation of any federal or state law or regulation with the exception of laws specifically preempted by R.S. 22:2241-2247.” The Louisiana Basic Health Insurance Plan Pilot Program (LA Health) is not an active program and thus does not conform with current federal or state law. If LA Health becomes an active program in the future, Regulation 53 will be amended to conform with current federal or state law. Since this is a substantive change, the Louisiana Department of Insurance is giving the public an opportunity for a hearing as published in this potpourri.

**Title 37
INSURANCE**

Part XIII. Regulations

Chapter 31. Regulation Number 53—Basic Health Insurance Plan Pilot Program

§3145. General Provisions

A. - E. ...

F. The LA Health Plan shall be governed by the laws and regulations of the state of Louisiana and specifically those of the LA Health Plan.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:11, R.S. 22:2241-2247, and the Administrative Procedure Act, R.S. 49:950 et seq.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 20:1012 (September 1994), amended LR 49:

Public Hearing

A public hearing on the proposed substantive change will be held by the Louisiana Department of Insurance on January 26, 2023, at 10:00 a.m. in the Poydras Hearing Room, Poydras Building, 1702 North Third Street, Baton Rouge, Louisiana. Interested persons who wish to make comments may do so at the public hearing or by writing to Jennifer Land, Louisiana Department of Insurance, P.O. Box 94214, Baton Rouge, LA 70804-9214. Comments will be accepted no later than January 26, 2023, by close of business, 4:30 p.m.

James J. Donelon
Commissioner

2212#030

POTPOURRI

**Department of Insurance
Office of the Commission**

Public Hearing—Substantive Change to Proposed Rule;
Regulation 124—Catastrophe Claims Process Disclosure
Form-Guide (LAC 37:XIII.19119)

The Department of Insurance published a Notice of Intent to promulgate Regulation 124—Catastrophe Claims Process Disclosure Form-Guide in the October 20, 2022, Volume 48,

No. 10 edition of the *Louisiana Register*. The Department of Insurance proposes amending §19119, Appendix A of the current Notice of Intent to promulgate Regulation 124 by removing “under penalty of perjury” from the first line of the Certificate of Hand-Delivery of the Catastrophe Claims Process Disclosure Form-Guide.

Since this is a substantive change, the Louisiana Department of Insurance will conduct a public hearing in this matter in accordance with the statutory provisions contained in the Administrative Procedure Act, including specifically those in R.S. 49:968(H)(2). The public hearing will be held in accordance with the particulars published in this potpourri, and all interested persons are invited to attend and participate in the subject hearing.

**Title 37
INSURANCE**

Part XIII. Regulations

**Chapter 191. Regulation 124— Catastrophe Claims Process Disclosure Form-Guide
§19119. Appendix A**

Certificate of Hand-Delivery

Catastrophe Claims Process Disclosure Form-Guide

I hereby certify, that on the ____ day of _____, 20____, I appeared at:

(Physical address):

and personally hand-delivered a true and complete copy of the Catastrophe Claims Process Disclosure Form-Guide to:

(Name of recipient): _____

Delivery of this disclosure form-guide was made in connection with the following policy of insurance:

(Policy number): _____

(Policyholder): _____

(Printed name): _____

(Signature): _____ (Date signed): _____

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:2, 22:11, 22:1897, and the Administrative Procedure Act, R.S. 49:950, et seq.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Office of the Commissioner, LR 49:

Public Hearing

A public hearing on the proposed substantive changes will be held by the Louisiana Department of Insurance on January 20, 2023, at 10:00 a.m. in the Poydras Hearing Room, Poydras Building, 1702 North Third Street, Baton Rouge, LA. Interested persons who wish to make comments or offer testimony may do so at the public hearing or by writing to Philip Dominique, Louisiana Department of Insurance, P.O. Box 94214, Baton Rouge, LA 70804-9214. Comments will be accepted no later than January 20, 2023, by close of business, 4:30 p.m.

James J. Donelon
Commissioner

2212#031

POTPOURRI
Department of Natural Resources
Office of Conservation

Orphaned Oilfield Sites

Office of Conservation records indicate that the Oilfield Sites listed in the table below have met the requirements as set forth by Section 91 of Act 404, R.S. 30:80 et seq., and as such are being declared Orphaned Oilfield Sites.

Operator	Field	District	Well Name	Well Number	Serial Number
Evergreen Operating Co. LTD	Greenwood-Waskom	S	TP SU89; Turner	001	231507
Evergreen Operating Co. LTD	Greenwood-Waskom	S	TP SU89; Hardin	001-ALT	233747
Evergreen Operating Co. LTD	Greenwood-Waskom	S	TP SU89; Cook	001-ALT	235180
Evergreen Operating Co. LTD	Greenwood-Waskom	S	TP SU89; Turner	002-ALT	236790
Evergreen Operating Co. LTD	Greenwood-Waskom	S	Pxy Suq; Turner A	001	237997

Operator	Field	District	Well Name	Well Number	Serial Number
Ross Exploration, Inc.	Caddo Pine Island	S	Bickham	014	44344(30)
Ross Exploration, Inc.	Caddo Pine Island	S	Bickham	018	48619(30)
Roy E Wells	San Miguel Creek	S	Roy Wells	001	197081
Time Energy, L.L.C.	Cox Bay	L	BN-1/BN-8 ra SUD; CBU	001-ALT	44885(30)

Richard P. Ieyoub
Commissioner

2212#035

POTPOURRI
Workforce Commission

Notice of the Maximum Weekly Benefit Amount for
Unemployment Insurance

The Louisiana Workforce Commission is required, under R.S. 23:1474(G)(3)(b), to annually publish the formula for computation of benefits. The following table shall be applied by the administrator subsequent to his determination of comparative balance, and applied trust fund balance range:

Procedure	Applied Trust Fund Balance Range	Maximum Dollar Amount of "wages" under R.S. 23:1474	Formula for Computation of Benefits	Maximum Weekly Benefit Amount
1	Less than seven hundred fifty million dollars	Eight thousand five hundred dollars	Apply R.S. 23:1592 without seven percent discount under R.S. 23:1592(C) to formula for computation of benefits	Two hundred forty-nine dollars
2	Equal to or greater than seven hundred fifty million dollars but less than one billion one hundred fifty million dollars	Seven thousand seven hundred dollars	Apply R.S. 23:1592 without seven percent discount under R.S. 23:1592(C) and without five percent discount under R.S. 23:1592(D), to formula for computation of benefits	Two hundred seventy-five dollars
3	Equal to or greater than one billion one hundred fifty million dollars but less than one billion four hundred million dollars	Seven thousand dollars	Apply R.S. 23:1592 without seven percent discount under R.S. 23:1592(C) and without five percent discount under R.S. 23:1592(D), to formula for computation of benefits	Two hundred eighty-two dollars
4	Greater than one billion four hundred million dollars	Seven thousand dollars	Apply R.S. 23:1592 without seven percent discount under R.S. 23:1592(C) and without five percent discount under R.S. 23:1592(D), to formula for computation of benefits	Three hundred twelve dollars

Renita Williams
Deputy Secretary

2212#022

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