

# Rules

## RULE

### Department of Agriculture and Forestry Seed Commission

#### Virus-Tested Sweet Potato Certification Standards (LAC 7:XIII.222)

In accordance with the provisions of the Administrative Procedure Act, R.S. 49:950, et. seq., the Department of Agriculture and Forestry, Seed Commission, adopts regulations regarding virus-tested sweet potato certification standards.

The Department of Agriculture and Forestry, Seed Commission adopts these rules and regulations for the purpose of setting tolerances for specific sweet potato pests. These tolerances, which were inadvertently omitted from the original standards, will provide a mechanism to maintain the physical quality of virus-tested sweet potato plants and seed. These rules are enabled by R.S. 3:1433.

### Title 7

## AGRICULTURE AND ANIMALS

### Part XIII. Seeds

#### Chapter 1. Louisiana Seed Law

#### Subchapter C. Certification of Specific Crops/Varieties

#### §222. Virus-Tested Sweet Potato Certification Standards

A.-B.3.a.iii. ...

b. Specific Greenhouse Requirements

#### Maximum Tolerance Allowed

Presence or Symptoms of:	Foundation (LAES)	Certified GO
Bacterial Stem Rot ( <i>Erwinia chrysanthemi</i> )*	0	0
Black Rot ( <i>Ceratocystis fimbriata</i> )*	0	0
Scurf ( <i>Monilochaetes infuscans</i> )*	0	0
Root-Knot Nematode ( <i>Meloidogyne</i> spp.)	0	0
Feathery Mottle (sweet potato feathery mottle virus [SPFMV])*	0	0
Russet Crack (a strain of SPFMV)*	0	0
Internal Cork (a virus)*	0	0
Wilt ( <i>Fusarium oxysporum</i> f. sp. <i>batatas</i> )*	0	0
Sweet potato Weevil ( <i>Cylas formicarius</i> var. <i>elegantulus</i> )	0	0
Exotic or hazardous pests	0	0
Variety mixture	0	0
Off-types (mutations)	0	0

\* Plants or mini-roots exhibiting symptoms

C.-3a.iv. ...

b. Specific Field Requirements (vine inspection):

#### Maximum Tolerance Allowed

Presence or symptoms of:	Certified G1	Certified G2	Certified G3
Bacterial Stem Rot ( <i>Erwinia chrysanthemi</i> )	none	none	none
Wilt ( <i>Fusarium oxysporum</i> f. sp. <i>batatas</i> )	none	none	none
Exotic or Hazardous Pests	none	none	none
Variety Mixture	none	none	none
Off-types (mutations)	0.05%	0.05%	0.10%

D.-E. 2b. ...

c. Specific Seed Root Standards

## Maximum Tolerance Allowed

Presence or symptoms of:	Certified G1	Certified G2	Certified G3
Surface rots ( <i>Fusarium</i> spp.) & Soft Rots ( <i>Rhizopus</i> spp.)	5%	5%	5%
Bacterial Root Rot ( <i>Erwinia</i> spp.)	none	none	none
Black Rot ( <i>Ceratocystis fimbriata</i> )	none	none	none
Scurf ( <i>Monilochaetes infuscans</i> )	1.0%	1.0%	2.0%
Streptomyces soil rot ( <i>Streptomyces ipomoeae</i> )	2.5%	2.5%	5.0%
Root-Knot Nematode ( <i>Meloidogyne</i> spp.)	5.0%	5.0%	5.0%
Russet Crack (a strain of SPFMV)	none	none	none
Internal Cork (a virus)	none	none	none
Wilt ( <i>Fusarium oxysporum</i> f. sp. <i>batatas</i> )	none	none	none
Sweet potato Weevil ( <i>Cylas formicarius</i> var. <i>elegantulus</i> )	none	none	none
Exotic or hazardous pests	none	none	none
Variety Mixture	none	none	none
Off-types (mutations)	0.20%	0.20%	0.50%

\*\*\*

AUTHORITY NOTE: Promulgated in accordance with R.S. 3:1433.

HISTORICAL NOTE: Promulgated by the Department of Agriculture and Forestry, Seed Commission, LR 25:1617 (September 1999), amended LR 26:1428 (July 2000).

Bob Odom  
Commissioner

0007#036

## RULE

### Department of Agriculture and Forestry Office of Agriculture and Environmental Sciences Advisory Commission on Pesticides

#### Pesticide Restrictions (LAC 7:XXIII.143)

In accordance with provisions of the Administrative Procedure Act, R.S. 49:950, et seq., the Department of Agriculture and Forestry, Advisory Commission on Pesticides, adopts regulations regarding applications of certain pesticides in certain parishes.

The Department of Agriculture and Forestry, Advisory Commission is adopting these rules and regulations for the purpose of adding Wards 1 and 6 of St. Landry Parish so that certain pesticides shall not be applied by commercial applicators between March 15 and September 15.

These rules comply with and are enabled by R.S. 3:3203 and R.S. 3:3223.

### Title 7

## AGRICULTURE AND ANIMALS

### Part XXIII. Pesticides

#### Chapter 1. Advisory Commission on Pesticides

#### Subchapter I. Regulations Governing Application of Pesticides

#### §143. Restrictions on Application of Certain Pesticides

A.-B.15. ...

C. The pesticides listed in §143.B shall not be applied by commercial applicators between March 15 and September 15 in the following parishes:

- |                               |                                     |
|-------------------------------|-------------------------------------|
| 1. Avoyelles                  | 14. Madison                         |
| 2. Bossier                    | 15. Morehouse                       |
| 3. Caddo                      | 16. Natchitoches                    |
| 4. Caldwell                   | 17. Ouachita                        |
| 5. Catahoula                  | 18. Pointe Coupee, Ward 2           |
| 6. Claiborne, Ward 4          | 19. Rapides                         |
| 7. Concordia                  | 20. Red River                       |
| 8. DeSoto, Ward 7             | 21. Richland                        |
| 9. East Carroll               | 22. St. Landry, Wards 1, 4, 5 and 6 |
| 10. Evangeline, Wards 1 and 5 | 23. Tensas                          |
| 11. Franklin                  | 24. Union                           |
| 12. Grant                     | 25. West Carroll                    |
| 13. LaSalle                   | 26. Winn, Ward 7                    |

D.-M.2. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 3:3203, R.S. 3:3242 and R.S. 3:3249.

HISTORICAL NOTE: Promulgated by the Department of Agriculture, Advisory Commission on Pesticides, LR 9:169 (April 1983), amended LR 10:193 (March 1984), LR 11:219 (March 1985), LR 11:942 (October 1985), amended by the Department of Agriculture and Forestry, Office of Agricultural and Environmental Sciences, LR 18:953 (September 1992), amended LR 19:791 (September 1993), LR 21:668 (July 1993), LR 21:668 (July 1995), LR 24:281 (February 1998), LR 24:2076 (November 1998), LR 26:1428 (July 2000).

Bob Odom  
Commissioner

0007#035

**RULE**

**Department of Civil Service  
Board of Ethics**

Contribution Limit (LAC 52:I.1609)

In accordance with the provisions of the Administrative Procedure Act, R.S. 49:950, et seq., the Louisiana Board of Ethics has amended a rule to the Rules for the Board of Ethics concerning the aggregate political committee contribution limit for district level candidates pursuant to its authority in Section 1134.A of the Code of Governmental Ethics (R.S. 42:1134.A).

**Title 52  
ETHICS**

**Part I. Board of Ethics**

**Chapter 16. The Board as Supervisory Committee of  
the Louisiana Campaign Finance  
Disclosure Act**

**§1609. Contribution Limit**

A. For the period January 1, 2000 to December 31, 2003, the total amount of combined contributions for both the primary and general elections, from political committees,

which may be accepted by a district office candidate shall not exceed \$49,255.

AUTHORITY NOTE: Promulgated in accordance with R.S. 42:1134(A).

HISTORICAL NOTE: Promulgated by the Department of Civil Service, Board of Ethics, LR 26:1429 (July 2000).

R. Gray Sexton  
Ethics Administrator

0007#023

**RULE**

**Department of Economic Development  
Office of Commerce and Industry**

Regional Economic Development  
Alliance Program (LAC 13:VII)

In accordance with R.S. 49:950, et seq., the Administrative Procedure Act, the Louisiana Department of Economic Development hereby repeals, in its entirety, *Louisiana Administrative Code* Title 13, Economic Development; Part VII, Regional Economic Development Alliance Program.

**Title 13**

**ECONOMIC DEVELOPMENT**

**Part VII. Regional Economic Development Alliance  
Program**

**Repealed**

Kevin P. Reilly, Sr.  
Secretary

0007#088

**RULE**

**Department of Economic Development  
Office of Commerce and Industry  
Division of Business Incentives**

Mississippi River Bridge Relocation  
Tax Exemption Program (LAC 13:I.Chapter 27)

In accordance with R.S. 49:950, et seq., the Administrative Procedure Act, the Louisiana Department of Economic Development hereby repeals, in its entirety, *Louisiana Administrative Code* Title 13, Economic Development; Part I, Financial Incentive Programs; Chapter 27, Mississippi River Bridge Relocation Tax Exemption Program.

**Title 13**

**ECONOMIC DEVELOPMENT**

**Part I. Financial Incentive Programs**

**Chapter 27. Mississippi River Bridge Relocation Tax  
Exemption Program**

**Repealed**

Kevin P. Reilly, Sr.  
Secretary

0007#091

**RULE**

**Department of Economic Development  
Office of Commerce and Industry  
Division of Business Incentives**

Sales and Use Tax Exemption on Energy  
Conservation Property (LAC 13:I.Chapter 29)

In accordance with R.S. 49:950, et seq., the Administrative Procedure Act, the Louisiana Department of Economic Development hereby repeals, in its entirety, *Louisiana Administrative Code* Title 13, Economic Development; Part I, Financial Incentive Programs; Chapter 29, Sales and Use Tax Exemptions on Energy Conservation Property.

**Title 13**

**ECONOMIC DEVELOPMENT**

**Part I. Financial Incentive Programs**

**Chapter 29. Sales and Use Tax Exemption on Energy  
Conservation Property**

**Repealed**

Kevin P. Reilly, Sr.  
Secretary

0007#087

**RULE**

**Board of Elementary and Secondary Education**

Bulletin 741C Louisiana Handbook for School  
Administrators C Business Education (LAC 28:I.901)

In accordance with R.S. 49:950, et seq., the Administrative Procedure Act, the Board of Elementary and Secondary Education adopted an amendment to Bulletin 741, referenced in LAC 28:I.901.A, promulgated by the Board of Elementary and Secondary Education in LR 1:483 (November 1975). In April, 1998 BESE approved Business Education Guidelines which outline new Business Education course requirements. The rule change is necessary to align the Business Education Program of Studies with the new Business Education Guidelines.

**Title 28**

**EDUCATION**

**Part I. Board of Elementary and Secondary Education**

**Chapter 9. Bulletins, Regulations, and State Plans**

**Subchapter A. Bulletins and Regulations**

**§901. School Approval Standards and Regulations**

A. Bulletin 741

\* \* \*

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:6(A)(10), (11), (15); R.S. 17:7 (5), (7), (11); R.S. 17:10, 11; R.S. 17:22 (2).

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education LR 1:483 (November 1975), amended LR 24:1085 (June 1998), LR 26:1430 (July 2000).

**Bulletin 741C Louisiana Handbook for  
School Administrators**

**Business Education Program of Studies  
Business Education**

**2.105.02** Computer/technology education course offerings shall be as follows.

<u>Course Title</u>	<u>Recommended Grade Level</u>	<u>Units</u>
Accounting	10-12	1
Administrative Support Occupations	10-12	1
Advanced/Computerized Accounting	11,12	1
Business Computer Applications I & II	10-12	1
Business English	11,12	1
Business Law	10-12	.5
Business Machines	9-12	.5
Cooperative Office Education	12	3
Computer Multimedia Presentations	11,12	.5
Desktop Publishing	10-12	.5
Economics	9-12	1
Education for Careers	6-8	.5
	9-12	.5
Entrepreneurship	9-12	1
Financial Math	11-12	1
Introduction to Business	9-12	1
Introduction to Management	10-12	1
Keyboarding/Keyboarding Applications	6-12	1
Records Management	9-12	1
Telecommunications	9-12	.5
Word Processing	10-12	1

Keyboarding and Keyboarding Applications shall be a pre-requisite to Administrative Support Occupations and Word Processing. Level I courses shall be pre-requisite to Level II courses. Cooperative Office Education shall be limited to seniors. The students shall have successfully completed Keyboarding and have maintained an overall "C" average. Student attendance records should also be considered. Additional pre-requisites may be required by the individual school system.

Weegie Peabody  
Executive Director

0007#024

**RULE**

**Board of Elementary and Secondary Education**

Bulletin 741C Louisiana Handbook for School  
Administrators C Distance Education Programs  
(LAC 28:I.901)

In accordance with R.S. 49:950, et seq., the Administrative Procedure Act, the Board of Elementary and Secondary Education adopted an amendment to Bulletin 741, referenced in LAC 28:I.901.A, promulgated by the Board of Elementary and Secondary Education in LR 1:483 (November 1975). The availability of technology in schools and the explosion of courses offered through emerging technologies such as the Internet and video conferencing have increased curricular opportunities for schools and students. The current Standard 2.105.42 limits distance education opportunities for schools and districts to those

programs approved by the Louisiana Department of Education. The Standard 2.105.42 provides guidance and rigorous standards for districts to follow in choosing high quality programs that will expand the course offerings for students in Louisiana.

**Title 28  
EDUCATION**

**Part I. Board of Elementary and Secondary Education  
Chapter 9. Bulletins, Regulations, and State Plans**

**Subchapter A. Bulletins and Regulations**

**§901. School Approval Standards and Regulations**

A. Bulletin 741

\* \* \*

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:6(A) (10), (11), (15); R.S. 17:7 (5), (7), (11); R.S. 17:10, 11; R.S. 17:22 (2).

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education LR 1:483 (November 1975), amended LR 24:1085 (June 1998), LR 26:1431 (July 2000).

**Distance Education Programs**

**2.105.42** A school system choosing to implement a distance education program shall establish policy and procedures for reviewing and approving programs that meet State Standards for Distance Education as established by the State Board of Elementary and Secondary Education.

Weegie Peabody  
Executive Director

0007#025

**RULE**

**Board of Elementary and Secondary Education**

Bulletin 741C Louisiana Handbook for School  
Administrators (LAC 28:I.901)

In accordance with R.S. 49:950, et seq., the Administrative Procedure Act, the Board of Elementary and Secondary Education adopted an amendment to Bulletin 741, referenced in LAC 28:I.901A, promulgated by the Board of Elementary and Secondary Education in LR 1:483 (November 1975). The changes more clearly explain and refine existing policy as it pertains to the formula for computing Growth Targets, performance labels for schools scoring above and below the state average, and the minimum number of CRT units required for test data to be statistically significant.

**Title 28  
EDUCATION**

**Part I. Board of Elementary and Secondary Education  
Chapter 9. Bulletins, Regulations, and State Plans**

**Subchapter A. Bulletins and Regulations**

**§901. School Approval Standards and Regulations**

A. Bulletin 741

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AUTHORITY NOTE: Promulgated in accordance with R.S. 17:3761-3764.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education in LR 1:483 (November, 1975), amended LR 25:2160 (November 1999), LR 26:1431 (July 2000).

**Growth Targets**

**2.006.05** Each school shall receive a Growth Target that represents the amount of progress it must make every two years to reach the state 10- and 20-Year Goals.

In establishing each school's Growth Target, the SPS inclusive of students with disabilities shall be used as the baseline. However, the percentage of students with disabilities varies significantly across schools and the rate of growth for such students, when compared to regular education students, may be different. Therefore, the proportion of students with disabilities eligible to participate in the CRT or NRT test in each school will be a factor in determining the Growth Target for each school.

**Growth Targets**  
During the first ten years, the formula is the following:

$[PropRE * (100-SPS)/N] + [PropSE * (100-SPS)/(N + 5)]$ , or 5 points, *whichever is greater*

where

PropSE = the number of special education students in the school who are eligible to participate in the NRT or CRT tests, divided by the total number of students in the school who are eligible to participate in the NRT or CRT tests. For purposes of this calculation, gifted, talented, speech or language impaired, and 504 students shall not be counted as special education students, but shall be included in the calculations as regular education students.

PropRE = 1-PropSE. PropRE is the proportion of students not in special education.

SPS = School Performance Score  
N = Number of remaining accountability cycles in the 10-Year Goal period

During the second ten years, the formula is the following:

$[PropRE * (150-SPS)/N] + [PropSE * (150-SPS)/(N + 5)]$ , or 5 points, *whichever is greater*

**Performance Labels**

**2.006.07** A Performance Label shall be given to a school that qualifies, in addition to Growth Labels.

A school with an SPS of 30 or below shall be identified as an Academically Unacceptable School. This school immediately enters Corrective Actions.

For purpose of determining Academically Unacceptable Schools, during the summer of 1999 for K-8 schools and during the summer of 2001 for 9-12 schools, the SPS that includes only regular education students shall be used. Any school with an SPS of 30 or less, based on the test scores of regular education students only, shall be deemed an Academically Unacceptable School.

\*A school with an SPS of 30.1-state average\* shall be labeled Academically Below the State Average.  
\*A school with an SPS of state average\*-99.9 shall be labeled Academically Above the State Average.  
\* The state average is recalculated every growth cycle.  
\*\*A school with an SPS of 100.0-124.9 shall be labeled a *School of Academic Achievement*.  
\*\*A school with an SPS of 125.0-149.9 shall be labeled a *School of Academic Distinction*.  
\*\*A school with an SPS of 150.0 or above shall be labeled a *School of Academic Excellence* and shall have no more Growth Targets.  
\*\*A school with these labels shall no longer be subject to Corrective Actions and shall not receive "negative" growth labels, i.e., School in Decline and Minimal Academic Growth. This school shall continue to meet or exceed Growth Targets to obtain "positive" growth labels, recognition, and possible rewards.

**Inclusion of Schools with Very Low Numbers of Students**

**2.006.19** A minimum number of testing units shall be required for School Accountability calculations. All schools shall have a minimum number of 80 testing units to include one or all four parts of the statewide criterion-referenced test. All schools shall have a minimum number of 20 students with complete composite scores on the statewide norm-referenced test.

Weegie Peabody  
Executive Director

0007#026

**RULE**

**Board of Elementary and Secondary Education**

Bulletin 741C Louisiana Handbook for School Administrators C Transfer Policy, Nonpublic Schools and Home School Programs (LAC 28:I.901)

In accordance with R.S. 49:950, et seq., the Administrative Procedure Act, the Board of Elementary and Secondary Education adopted an amendment to Bulletin 741, referenced in LAC 28:I.901.A, promulgated by the Board of Elementary and Secondary Education in LR 1:483 (November 1975). The amendment relates to students transferring into public schools from in-state nonpublic schools and home schooling programs. School systems will implement the new change with the 2000-2001 school year.

**Title 28**

**EDUCATION**

**Part I. Board of Elementary and Secondary Education**

**Chapter 9. Bulletins, Regulations, and State Plans**

**Subchapter A. Bulletins and Regulations**

**§901. School Approval Standards and Regulations**

A. Bulletin 741

\* \* \*

**AUTHORITY NOTE:** Promulgated in accordance with R.S. 17:6(A) (10), (11), (15); R.S. 17:7 (5), (7), (11); R.S. 17:10, 11; R.S. 17:22 (2).

**HISTORICAL NOTE:** Promulgated by the Board of Elementary and Secondary Education LR 1:483 (November 1975), amended LR 24:1085 (June 1998), LR 26:1432 (July 2000).

**Transfer of Student Records from Approved School**

**2.026.06** A student transferred from a state-approved school, in- or out-of state, shall be allowed credit for work completed in the former school. When a student transfers from one school to another, a properly certified transcript, showing the student's record of attendance, achievement, immunization records, and the units if credit earned, shall be required.

Effective with the 2000-2001 school year, students in grades 5 and 9 transferring to the public school system from any in-state nonpublic school (state approved and unapproved), any out-of-state school or home schooling program shall be required to pass the English language arts and Mathematics portions of the state-developed LEAP 21 placement test.

**Transfer of Student Records from Schools that are Not State Approved**

**2.026.08** Local school officials from any state approved school receiving a student from an unapproved school, in- or out-of state, will determine the placement and/or credits for the student. The principal and/or superintendent may require the student to take an entrance examination on any subject matter for which credit is claimed. The school issuing the high school diploma shall account for all credits required for graduation, and its records will show when and where the credit was earned.

Effective with the 2000-2001 school year, students in grades 5 and 9 transferring to the public school system from any in-state unapproved school, any out-of-state school or home schooling program shall be required to pass the English language arts and Mathematics portions of the state-developed LEAP 21 placement test.

**Students Transferring from Home Schooling**

**2.026.09** The school shall adhere to the policies and procedures established by the school system for students re-entering the system from home schooling.

Effective with the 2000-2001 school year, students in grades 5 and 9 transferring to the public school system from in-state or out-of-state home schooling shall be required to pass the English language arts and Mathematics portions of the state-developed LEAP 21 placement test.

Weegie Peabody  
Executive Director

0007#027

**RULE**

**Board of Elementary and Secondary Education**

Bulletin 1566C Guidelines for Pupil Progression (LAC 28:XXXIX.503 and 505)

In accordance with the Administrative Procedure Act, R.S. 49:950, et seq., the State Board of Elementary and Secondary Education adopted an amendment to Bulletin 1566, Guidelines for Pupil Progression. The guidelines for Pupil Progression incorporate the High Stakes Testing Policy that was approved by the Board of Elementary and Secondary Education in January, 1999 and revised at its September and December, 1999 meetings as well as other policies related to the promotion and retention of students. The September revisions changed the current policy by allowing 4 percent of the students with disabilities (special education) to be tested out-of-level for the 1999-2000 school year. Prior to this version all students with disabilities except the estimated 1.5 percent of students that may be tested using alternate assessment were tested using LEAP 21. The December revisions extended the appeals process to eighth grade students in addition to the fourth grade. School systems will implement the new guidelines with the 1999-2000 school session.

**Title 28**  
**EDUCATION**

**Part XXXIX. Bulletin 1566C Guidelines for Pupil Progression**

**Chapter 5. Placement Policies; State Requirements**

**§503. Regular Placement<sup>1</sup>**

A.1.a.-A.1.b.ii.(a). ...

(b). Exceptions. This state policy may be overridden by the School Building Level Committee (and therefore the student may be promoted) only under the following conditions:

(i). if a given student scores at the "Unsatisfactory" level in English language arts or mathematics and scores at the "Proficient" or "Advanced" level in the other and participates in the summer school and retest offered by the LEA;

(ii). if a student with disabilities (excluding students with only a Speech or Language Impairment) participates in on-level testing, the SBLC may consider the override only if the student has participated in the summer school and retest offered by the LEA's;

(iii). if a student with disabilities (excluding students with only a Speech or Language Impairment) participates in out-of-level testing, promotion decisions shall be determined by the SBLC;

(iv). if a student with disabilities participates in an alternative assessment, promotion decisions shall be determined by the SBLC.

iii. Summer school and end-of-summer retest must be offered by school systems at no costs to all students who score at the "Unsatisfactory" level on LEAP 21.

iv. ...

v. A school system, through its superintendent, may grant an appeal on behalf of individual fourth and eighth grade students who have not scored above the "Unsatisfactory" level after retesting provided that certain criteria are met.

vi. School systems must develop and implement uniform policies to determine placement of eighth grade students who have not scored "Approaching Basic" or above on LEAP 21 into Options 1, 2, and 3.

vii. Eighth grade students who are 16 years of age on or before September 30 must enroll in an alternative program or setting, Option 2 or Option 3.

\* \* \*

**D. Transfer Students**

1. The local school board shall establish written policies for the placement of students transferring from all other systems and home schooling programs (public, nonpublic, (both in and out-of-state), and foreign countries).

a. Effective with the 2000-2001 school year, students in grades 5 and 9 transferring to the public school system from any in-state nonpublic school (state approved and unapproved), any home schooling program or Louisiana resident transferring from any out-of-state school shall be required to pass the English language arts and Mathematics portions of the state-developed LEAP 21 placement test.

<sup>1</sup>Schools can only make recommendations to parents regarding student enrollment in kindergarten, since kindergarten is not mandatory.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17.7.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 25:2171 (November 2000), amended LR 26:1433 (July 2000).

**§505. ProgressionCStudents Participating in Alternate Assessment**

A.1.a.-d...

2. For the 1999-2000 school year only, students with disabilities who participate in the alternate assessment shall have promotion decisions determined by SBLC's.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17.7.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 25:2172 (November 2000), amended LR 26:1433 (July 2000).

Weegie Peabody  
Executive Director

0007#028

**RULE**

**Department of Environmental Quality  
Office of Environmental Assessment  
Environmental Planning Division**

Fugitive Emission Control  
(LAC 33:III.2121)(AQ201)

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 Air Quality regulations, LAC 33:III.2121 (Log #AQ201).

The rule removes the word "pipeline" and removes a redundant phrase to provide clarification to the regulations for monitoring requirements and exemptions to monitoring requirements for petroleum refineries, SOCM, MTBE, and polymer manufacturing industry for fugitive emission control of organic compounds. The basis and rationale for the rule are to provide clarifications to the existing regulations.

This rule meets an exception listed in R.S. 30:2019(D)(3) and R.S. 49:953(G)(3); therefore, no report regarding environmental/health benefits and social/economic costs is required. This rule has no known impact on family formation, stability, and autonomy as described in R.S. 49:972.

**Title 33**

**ENVIRONMENTAL QUALITY**

**Part III. Air**

**Chapter 21. Control of Emission of Organic Compounds**

**Subchapter A. General**

**§2121. Fugitive Emission Control**

\* \* \*

[See Prior Text in A-C.1.a.i]

ii. valves in liquid service; and

\* \* \*

[See Prior Text in C.1.a.iii-b.i]

ii. valves in gas service;

\* \* \*

[See Prior Text in C.1.b.iii]

iv. valves in light liquid service at SOCMI, MTBE, and Polymer Manufacturing Plants; and

v. pumps in light liquid service at SOCMI, MTBE, and Polymer Manufacturing Plants.

\*\*\*

[See Prior Text in C.1.c-4.b]

c. Flanges, inaccessible valves, valves that are unsafe to monitor, check valves (including similar devices not externally regulated). Inaccessible valves should be monitored on an annual basis at a minimum. Unsafe-to-monitor valves should be monitored when conditions would allow these valves to be monitored safely, e.g., during shutdown.

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[See Prior Text in C.4.d-G. Liquid Service]

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2054.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of Air Quality and Nuclear Energy, Air Quality Division, LR 13:741 (December 1987), amended by the Office of Air Quality and Radiation Protection, Air Quality Division, LR 16:959 (November 1990), LR 17:654 (July 1991), LR 21:1330 (December 1995), LR 22:1128 (November 1996), LR 22:1212 (December 1996), LR 24:22 (January 1998), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1433 (July 2000).

James H. Brent, Ph.D.  
Assistant Secretary

0007#069

## RULE

### Department of Environmental Quality Office of Environmental Assessment Environmental Planning Division

#### Laboratory Accreditation

(LAC 33:I.4501, 4503, 4701-4707, 4711,4717, 4719, 4901, 5103, 5301, 5303, 5311, 5315, 5701, 5705, 5901-5915)(OS035)

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 Office of the Secretary regulations, LAC 33:I.Subpart 3 (Log #OS035).

The laboratory accreditation rule requires accreditation of commercial environmental laboratories by the department every three years. The accreditation program requires third-party audits, submission of samples for independent analysis, and inspection of regulated laboratories. The rule provides for quality assurance/quality control procedures, laboratory personnel qualifications, and sampling protocol. The rule establishes the requirements to ensure the quality of data generated by commercial environmental laboratories that are accredited by the department, and provides clarification to facilitate a better understanding of the program requirements. The rule also promulgates the changes made in the emergency rule OS035E, which was effective on December 15, 1999. These changes extend the deadline to apply for accreditation to July 1, 2000, and the deadline for accreditation by the department to December

31, 2000. The basis and rationale for the rule are to provide clarification for the laboratory accreditation rule and to promulgate the changes in the emergency rule, OS035E.

This rule meets an exception listed in R.S. 30:2019(D)(3) and R.S. 49:953(G)(3); therefore, no report regarding environmental/health benefits and social/economic costs is required. This rule has no known impact on family formation, stability, and autonomy as described in R.S. 49:972.

## Title 33

### ENVIRONMENTAL QUALITY

#### Part I. Office of the Secretary

#### Subpart 3. Laboratory Accreditation

#### Chapter 45. Policy and Intent

#### §4501. Description and Intent of Program

##### A. Description and Intent of Program

1. These regulations provide requirements for an accreditation program specifically applicable to commercial laboratories, wherever located, that provide chemical analyses, analytical results, or other test data to the department, by contract or by agreement, and the data is:

a. submitted on behalf of any facility, as defined in R.S. 30:2004;

b. required as a part of any permit application;

c. required by order of the department;

d. required to be included on any monitoring reports submitted to the department;

e. required to be submitted by contract; or

f. otherwise required by department regulations.

2. The department laboratory accreditation program is designed to ensure the accuracy, precision, and reliability of the data generated, as well as the use of department-approved methodologies in the generation of that data. Laboratory data generated by commercial environmental laboratories that are not accredited under these regulations will not be accepted by the department.

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[See Prior Text in B-B.6]

7. radiologicals/radioassays;

8. bioassays/biomonitoring/toxicological testing; and

9. asbestos.

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[See Prior Text in C-E]

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of the Secretary, LR 24:917 (May 1998), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1434 (July 2000).

#### §4503. Definitions

A. When used in these rules and regulations, the following words and phrases shall have the meanings ascribed to them below.

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[See Prior Text]

*Commercial Laboratory* any laboratory, wherever located, that performs analyses or tests for third parties for a fee or other compensation and provides chemical analyses, analytical results, or other test data to the department, by contract or agreement, and the data is: submitted on behalf of any facility, as defined in R.S. 30:2004; or required as a part of any permit application; or required by order of the

department; or required to be included on any monitoring reports submitted to the department; or otherwise required by department regulations. The term commercial laboratory does not include laboratories accredited by the Louisiana Department of Health and Hospitals in accordance with R.S. 49:1001, et seq.

*Corrective Action Proficiency Test Sample* Ca proficiency test sample of known composition provided by an external source (e.g., EPA) that is used to evaluate lab performance after completion of required corrective action(s) of a failed proficiency evaluation test round.

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[See Prior Text]

*Field Test* Cany activity or operation conducted on-site resulting in the measurement of a specific parameter. Field tests are generally conducted at or near the site of sampling and include soil classification, pH, temperature, flow rate, fugitive emissions monitoring of valves, pumps, flanges, etc.

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[See Prior Text]

*Interim Status* Ca status that exists in the accreditation process wherein all application requirements have been met by the laboratory, but formal accreditation status has not been granted by the department. Interim status is granted on a case-by-case basis at the discretion of the department and shall not exceed one year in length.

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[See Prior Text]

*NRCC* Nuclear Regulatory Commission.

*Primary Accrediting Authority* 3/4for the purpose of NELAP Accreditation, the Louisiana Department of Environmental Quality, with the exception of those laboratory analyses accredited under the regulatory and statutory authority of the Louisiana Department of Health and Hospitals.

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[See Prior Text]

*Traceable Material* Cany material whose true value or true measurement can be related to a standard reference, usually national or international, all having stated uncertainties (e.g., NIST traceable thermometers, standards, reagents, etc.).

\*\*\*

[See Prior Text]

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of the Secretary, LR 24:918 (May 1998), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1434 (July 2000).

## Chapter 47. Program Requirements

### §4701. Accreditation Process

A. The department accreditation process comprises four basic steps:

1. the submittal to the department's Office of Management and Finance, Laboratory Services Division of a written request from the laboratory in the form of an application provided by the department, along with payment of all applicable fees;

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[See Prior Text in A.2-4]

B. When all requirements for accreditation have been successfully fulfilled, the department shall grant the

applicant laboratory a formal notice of certification that lists those analytes and methods for which the laboratory is certified. The certificate must be posted within public view in the laboratory setting.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of the Secretary, LR 24:919 (May 1998), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1435 (July 2000).

### §4703. Application for Accreditation

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[See Prior Text in A]

B. An application for environmental laboratory accreditation shall be made in writing to the Office of Management and Finance, Laboratory Services Division. This application will provide all requested information and be accompanied by the appropriate application fee. Information will include at least one satisfactory round of the most recent department-specified proficiency evaluation test results or an analytical data package for test categories where no accessible proficiency tests exist. Supplemental information may be required.

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[See Prior Text in C-D]

E. In cases where all application requirements have been met, including review of all methodology and quality assurance program data, a special status of "interim status" may be granted at the discretion of the department on a case-by-case basis. Interim status shall not exceed one year in length. Before a laboratory is granted full accreditation, all requirements of these regulations must be met.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of the Secretary, LR 24:919 (May 1998), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1435 (July 2000).

### §4705. Categories of Accreditation

A. At the time of application each applicant must clearly identify both the fields of testing and the test categories for which accreditation is sought. A copy of the relevant test method documentation and the requisite equipment for the method must be available at the laboratory. A current list of approved methodologies for each parameter/analyte will be maintained by the department's Louisiana Environmental Laboratory Accreditation Program (LELAP) Unit in the Office of Management and Finance, and a copy of the list will become a part of the application package. In cases where the methodology used by the laboratory is not listed, the laboratory shall submit documentation that will verify that the results obtained from the method in use are equal to or better than those results obtained from the approved methodology. The department will review the data submitted by the laboratory and will notify the laboratory in writing within 60 calendar days if the method is acceptable or unacceptable as an alternate method of analysis.

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[See Prior Text in B-B.1]

2. air pollutants including industrial hygiene and Toxic Organic Compounds (T.O.) methods, stack sampling, and ambient air;

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[See Prior Text in B.3-B.8]

9. asbestos;

10. geo-technical properties of soils including, but not limited to, compaction test, permeability, particle size analysis, soils classification, etc.; and

11. minor conventional parameters CBOD<sub>5</sub>, oil and grease, TSS, pH, fecal and total coliform, and residual chlorine.

\* \* \*

[See Prior Text in C]

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of the Secretary, LR 24:919 (May 1998), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1435 (July 2000).

**§4707. Fees**

\* \* \*

[See Prior Text in A-E]

F. Travel expenses incurred by representatives of the department, traveling within and outside of the state of Louisiana, conducting an assessment/inspection for the purpose of accreditation shall be reimbursed by the laboratory. These rates shall be in accordance with the Division of Administration state general travel regulations, within the limits established for state employees.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of the Secretary, LR 24:920 (May 1998), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1436 (July 2000).

**§4711. Proficiency Testing Participation**

\* \* \*

[See Prior Text in A-C]

D. Proficiency testing studies will be available at a minimum of every six months. Laboratories shall participate in two proficiency test studies per year for each field of testing. Failure to meet the minimum semiannual schedule shall be regarded as a failed proficiency test study. Laboratories may set up round robin testing programs under the department's supervision in order to satisfy this requirement, using splits where applicable.

E. Laboratories shall satisfactorily complete two proficiency test studies offered for each test category accredited within the most recent three proficiency test studies attempted. A year shall be considered as the 12-month period from the first day of July until the last day of June. Results shall be considered satisfactory when they are within the acceptable limits established by the testing agency or the department.

F. Each participating laboratory shall authorize the proficiency test provider to release the results of the proficiency evaluation (PE) test to the Office of Management and Finance, Laboratory Services Division at the same time that they are submitted to the laboratory. Every laboratory that receives test results that are "unacceptable" for a specific analyte must investigate and identify likely causes for these results, resolve any problems, and report such activity to the Office of Management and Finance, Laboratory Services Division along with the submittal of corrective action proficiency sample test results.

The laboratory shall report only the analytes for which corrective action was required.

\* \* \*

[See Prior Text in G-J]

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of the Secretary, LR 24:922 (May 1998), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1436 (July 2000).

**§4717. Repealed**

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of the Secretary, LR 24:922 (May 1998), repealed by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1436 (July 2000).

**§4719. Implementation**

A. All commercial laboratories analyzing data as of the effective date of these regulations that are directly or indirectly submitting data to the department must submit an application for accreditation as required in LAC 33:I.4701.A.1, including the review fee, by July 1, 2000. The department shall not accept laboratory data generated by laboratories that do not comply with this deadline until such laboratories receive accreditation and fully comply with the requirements of this Section. The department shall not accept environmental data submitted to the department either directly or indirectly until the laboratory has applied for accreditation under these regulations.

B. All laboratories subject to these regulations must receive accreditation from the department, as provided in these regulations, undergo an on-site inspection as specified in LAC 33:I.4701.A.2, and successfully participate in proficiency evaluations as required in LAC 33:I.4701.A.3 by December 31, 2000, or as otherwise agreed to by the department and the applicant, not to exceed one year from December 31, 2000. The department shall not accept data generated by laboratories that do not comply with these deadlines until such laboratories receive accreditation and fully comply with the requirements of this Section.

C. These regulations shall not apply to field tests as defined in LAC 33:I.4503.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of the Secretary, LR 24:922 (May 1998), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1436 (July 2000).

**Chapter 49. Organization and Personnel Requirements**

**§4901. Laboratory Staff for All Programs Covered by these Regulations**

A. Managerial Staff. The laboratory shall have the managerial staff with the authority and resources needed to discharge their duties. The technical director or his/her designated representative shall be a full-time member of the laboratory staff who has the authority to exercise the day-to-day supervision of the laboratory policies and procedures. The laboratory shall be organized in such a way that confidence in its independence of judgment and integrity is maintained at all times. The laboratory shall specify and document the responsibility, authority, and interrelation of all personnel who manage, perform, or verify work affecting

the quality of calibrations and tests. Such documentation shall include:

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[See Prior Text in A.1-H]

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of the Secretary, LR 24:922 (May 1998), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1436 (July 2000).

**Chapter 51. On-Site Inspection/Evaluation**  
**§5103. Laboratory Facilities**

A. The laboratory conditions in which the tests are undertaken shall not invalidate the test results or adversely affect the required accuracy of measurement. The laboratory shall have the equipment, adequate storage facilities, procedures to preserve the identity, concentration and stability of samples, and energy sources needed for proper testing. They shall be equipped with devices to monitor essential environmental conditions. Specifically, the testing laboratory shall include the following:

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[See Prior Text in A.1-5]

6. adequate procedures and facilities in place for collection, storage, and disposal of wastes, including expired chemicals, reagents, solutions, standards, and other material with a limited shelf-life;

\*\*\*

[See Prior Text in A.7-C]

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of the Secretary, LR 24:924 (May 1998), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1437 (July 2000).

**Chapter 53. Quality System Requirements**  
**§5301. Quality Assurance/Quality Control Requirements**

A. Each laboratory seeking accreditation shall maintain their Quality Assurance/Quality Control (QA/QC) program using appropriate document control practices. The quality assurance manual, analytical methods, and administrative procedures necessary to meet requirements of these regulations shall be reviewed for accuracy and approved for release by the appropriate personnel, distributed, and controlled to ensure the use of the current approved version. Each laboratory seeking accreditation shall:

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[See Prior Text in A.1-C]

1. the structure of the laboratory (organizational charts and generic position descriptions) including relationship between management, technical operations, support services, and quality systems;

\*\*\*

[See Prior Text in C.2-6]

7. references to procedures for the control and maintenance of documents, including document control of laboratory notebooks, instrument logbooks, standards logbooks, and records for data reduction, validation, storage, and reporting;

8. the laboratory's procedures for achieving traceability of measurements to NIST reference materials or other traceable commercial vendors;

\*\*\*

[See Prior Text in C.9-14]

15. references to policy and procedures for the resolution of complaints received from clients or other parties. Records of the complaint and subsequent action shall be maintained;

\*\*\*

[See Prior Text in C.16-17]

18. identification of the laboratory's approved signatories; at a minimum, the title page of the quality assurance manual must have the signed and dated concurrence (with appropriate titles) of all responsible parties, including the quality assurance officer(s), technical director, and the laboratory manager;

19. references to processes/procedures for educating and training personnel in their ethical and legal responsibilities, including potential punishment and penalties for improper, unethical, or illegal actions;

20. references to processes/procedures for establishing that personnel are adequately experienced in the duties they are expected to carry out and/or receive any needed training;

21. references to procedures for reporting analytical results; and

22. a table of contents and applicable lists of references, glossaries, and appendices.

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[See Prior Text in D]

E. The laboratory shall conduct annual internal audits to verify the compliance with the laboratory's quality system. The quality assurance officer shall be responsible for planning and organizing audits. Personnel shall not audit their own activities.

F. Standard operating procedures (SOPs) shall be kept in a manual available to the analyst and the inspector. SOPs may be included as a part or section of the laboratory's quality assurance manual. The laboratory shall have clearly defined, written SOPs or an equivalent, addressing, at a minimum, and as appropriate:

1. methods of analysis:
  - a. identification of the test method;
  - b. applicable matrix or matrices;
  - c. detection limit;
  - d. scope and application, including components to be analyzed;
  - e. summary of test method;
  - f. definitions;
  - g. safety;
  - h. equipment and supplies;
  - i. reagents and standards;
  - j. sample collection, preservation, storage, handling, and chain of custody;
  - k. quality control;
  - l. calibration;
  - m. procedure;
  - n. calculations;
  - o. method performance;
  - p. pollution prevention;
  - q. data assessment and acceptance criteria for quality control measures;
  - r. corrective actions for out-of-control or unacceptable data;

- s. contingencies for handling out-of-control or unacceptable data;
- t. waste management;
- u. references; and
- v. any tables, diagrams, flowcharts, and validation data;

- 2. procurement and inventory procedures;
- 3. preventive maintenance;
- 4. recordkeeping and record storage (archives);
- 5. data reduction, validation, and reporting;
- 6. correcting erroneous reports;
- 7. management of laboratory wastes and hazardous materials; and

8. complaints registered against the laboratory's testing procedures, reporting procedures, and/or other general operating procedures.

G Supervisory staff shall be responsible for quality assurance/quality control implementation and compliance.

H. The following general quality control principles shall apply, where applicable, to all testing laboratories. The manner in which they are implemented is dependent on the types of tests performed by the laboratory (e.g., chemical, microbiological, radiological). The standards for any given test type shall assure that the following applicable principles are addressed:

1. all laboratories shall have protocols in place to monitor the following quality controls:

- a. adequate controls to monitor tests such as blanks, spikes, or reference toxicants;
- b. adequate tests to define the variability and/or reproducibility of the laboratory results such as duplicates;
- c. measures to ensure the accuracy of the test data, including sufficient calibration and/or continuing calibrations, use of certified reference materials, proficiency test samples, or other measures;
- d. measures to evaluate test performance, such as method detection limits, or range of applicability such as linearity;
- e. selection of appropriate formulae to reduce raw data to final results such as linear regression, internal standards, or statistical packages;
- f. selection and use of reagents and standards of appropriate quality; and
- g. measures to assure constant and consistent test conditions (both instrumental and environmental) where required by the method, such as temperature, humidity, light, or specific instrument conditions;

2. all quality control measures shall be assessed and evaluated on an ongoing basis, and quality control acceptance limits shall be used to determine the validity of the data. The acceptance/rejection criteria shall be updated at a frequency established by the method or by the department's standards;

3. the laboratory shall have procedures for the development of acceptance/rejection criteria where no method or regulatory criteria exists; and

4. the method-specified and/or method-recommended quality control protocols shall be followed. The essential standards shall be used if no protocols are written into the method or if the method protocols are less stringent.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of the Secretary, LR 24:925 (May 1998), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1437 (July 2000).

### §5303. Equipment and Supplies

\* \* \*

[See Prior Text in A-C]

D. Records shall be maintained for each item of equipment and all reference materials significant to the tests performed. Maintenance log book(s) and/or an electronic maintenance database with scheduled backups shall be maintained for all major equipment. Each log shall include:

\* \* \*

[See Prior Text in D.1-6]

7. the details of maintenance, including history of any damage, malfunction, modification, or repair.

\* \* \*

[See Prior Text in E-H.6.b]

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of the Secretary, LR 24:926 (May 1998), repromulgated LR 24:1093 (June 1998), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1438 (July 2000).

### §5311. Quality Assurance for Biomonitoring Laboratories

\* \* \*

[See Prior Text in A-M.2]

N. Reference toxicants such as sodium chloride (NaCl), potassium chloride (KCl), cadmium chloride (CdCl<sub>2</sub>), copper sulfate (CuSO<sub>4</sub>), sodium dodecyl sulfate (CH<sub>3</sub>(CH<sub>2</sub>)OSO<sub>3</sub>Na), and potassium dichromate (K<sub>2</sub>Cr<sub>2</sub>O<sub>7</sub>) are suitable for use by the laboratory. Standard reference materials can be obtained from commercial supply houses or can be prepared in-house using reagent grade chemicals.

\* \* \*

[See Prior Text in O-O.7]

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of the Secretary, LR 24:929 (May 1998), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1438 (July 2000).

### §5315. Records

A. The laboratory shall maintain a record system that shall produce accurate, readily available records that document all laboratory activities. The testing laboratory shall retain on record all original raw data and observations, calculations and derived data, calibration records, and the final test report in a manner in which the continuity and integrity of the analytical process is preserved. All records shall be maintained for a minimum of 10 years or as required by regulatory or legal requirement. Where computers or automated equipment are used for the capture, processing, manipulation, recording, reporting, storage, or retrieval of test data, the laboratory shall ensure that:

1. computer software is documented and adequate for use;

2. procedures are established and implemented to protect the integrity of data. Such procedures shall include, at a minimum, integrity of data entry or capture, data storage, data transmission, and data processing;

3. computers and automated equipment are maintained to ensure proper functioning and retrieval of data; and
4. procedures are developed and implemented to maintain security of data, including prevention of unauthorized access to, or unauthorized amendment of, computer records.

\* \* \*

[See Prior Text in B-F]

G The laboratory shall maintain administrative records (e.g., training records) in a manner in which the continuity, integrity, and retrievability processes are preserved.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of the Secretary, LR 24:931 (May 1998), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1438 (July 2000).

### **Chapter 57. Maintenance of Accreditation**

#### **§5701. Display of Accreditation Certificate**

\* \* \*

[See Prior Text in A-B]

C. The accredited laboratory shall not misrepresent its state or NELAP accreditation documents. This shall include use in laboratory reports, catalogs, advertising, business solicitations, or proposals.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of the Secretary, LR 24:932 (May 1998), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1439 (July 2000).

#### **§5705. Discreditation and Suspension**

\* \* \*

[See Prior Text in A-F.16]

G If the department discredits/suspends a laboratory, the laboratory shall return the certificate of accreditation to the department within 10 calendar days from receipt of notification of the discreditation or suspension.

AUTHORITY NOTE: Promulgated in accordance with RS. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of the Secretary, LR 24:932 (May 1998), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1439 (July 2000).

### **Chapter 59. Accreditation for Laboratories Participating in the NELAP Certification Program**

#### **§5901. Accreditation Process**

A. In-state laboratories participating in the National Environmental Laboratory Accreditation Program (NELAP) shall be certified under standards established by these regulations and those of the NELAP program, as found at <http://134.67.104.12/html/nelac/standards.htm> or by writing NELAP, U.S. Environmental Protection Agency (MD-75A), Research Triangle Park, NC 27711, Attention: NELAP Director, telephone (919) 541-1120. NELAP-certified laboratories shall be required to meet the requirements for reciprocity as set forth in LAC 33:I.4713.

B. The NELAP accreditation process comprises these basic steps:

1. the submittal to the department of a written request from the laboratory in the form of an application provided by the department with the payment of all applicable fees;

2. a review of personnel qualifications;
3. an on-site assessment/evaluation of the laboratory submitting the request/application by authorized representatives of the department with the appropriate laboratory background;
4. the successful participation in the NELAP-approved proficiency evaluations; and
5. a review of the quality assurance/quality control practices, and quality systems in use at the laboratory.

C. When all the requirements for accreditation have been successfully fulfilled, the department shall grant the applicant laboratory a formal notice of accreditation and a certificate of accreditation that lists those fields of testing, methods used by the laboratory, and individual analytes determined by a particular method for which the laboratory is accredited.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of Environmental Assessment, Environmental Planning Division, LR 26:1439 (July 2000).

#### **§5903. Categories of Accreditation**

A. A laboratory may apply for accreditation in any one or more of the nine fields of testing and in one or more of the eleven test categories applicable to the field(s) of testing selected. The laboratory shall be accredited in those parameters/analytes within the test category(ies) found in LAC 33:I.4705.B. The laboratory shall be accredited in those parameters/analytes within the test category(ies) for which the laboratory demonstrates acceptable performance on proficiency samples (when available) and meets all other requirements of these regulations.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of Environmental Assessment, Environmental Planning Division, LR 26:1439 (July 2000).

#### **§5905. Inspections of a Laboratory**

A. As a condition of obtaining and maintaining NELAP accreditation, the laboratory shall permit and facilitate inspections/assessments by personnel or designated representatives of the department. The specific requirements for an on-site inspection are outlined in LAC 33:I.Chapter 51.

B. Inspectors shall conform to appropriate safety procedures during an on-site inspection. The specific requirements for an inspector are outlined in LAC 33:I.4709.B.

C. A comprehensive on-site inspection/assessment of each accredited laboratory shall be conducted at intervals of not more than two years. The department may make an announced or unannounced inspection or assessment of an accredited laboratory whenever the department, in its discretion, considers such an inspection or assessment necessary to determine the extent of the laboratory's compliance with the conditions of its accreditation and these regulations.

D. The primary accrediting authority shall forward a written report of findings to the laboratory within 30 calendar days from the date of the on-site inspection/assessment.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of Environmental Assessment, Environmental Planning Division, LR 26:1439 (July 2000).

**§5907. Corrective Action Reports in Response to On-Site Inspections**

A. The laboratory shall submit to the department a corrective action plan/report. The plan/report shall include, at a minimum, the action(s) that the laboratory shall implement to correct each deficiency noted in the on-site inspection/assessment report and the time period required to accomplish each corrective action.

1. If the corrective action plan/report is deemed unacceptable, the laboratory shall have an additional 30 days to submit a revised corrective action plan/report.

2. If the corrective action plan/report is deemed unacceptable after the second submittal, the laboratory shall have its accreditation revoked in accordance with section 4.4.3 of the NELAP Standards for all or any portion of its scope of accreditation for any or all fields of testing.

3. If the laboratory fails to implement the corrective actions as stated in their corrective action plan/report, its accreditation shall be revoked.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of Environmental Assessment, Environmental Planning Division, LR 26:1440 (July 2000).

**§5909. Proficiency Testing Participation**

A. All laboratories seeking accreditation under NELAP shall participate in the department-approved proficiency testing program as required in LAC 33:I.4711.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of Environmental Assessment, Environmental Planning Division, LR 26:1440 (July 2000).

**§5911. Accreditation for Out-of-State Laboratories Seeking NELAP Accreditation**

A. Acceptance of accreditation from another NELAP accrediting authority in that field of testing shall be determined by the department. The laboratory must comply with these regulations and the standards established by NELAP. NELAP certified laboratories shall be required to meet the requirements for reciprocity as set forth in LAC 33:I.4713.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of Environmental Assessment, Environmental Planning Division, LR 26:1440 (July 2000).

**§5913. Certification of Compliance Statement**

A. The Certification of Compliance statement as required in section 4.1.9 of the NELAP standards shall be required. This statement shall be signed by the laboratory manager and the quality assurance officer or other designated person.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of Environmental Assessment, Environmental Planning Division, LR 26:1440 (July 2000).

**§5915. Accreditation**

A. The period of accreditation shall be one year. To maintain accreditation the laboratory shall meet all requirements of these regulations and the NELAP standards.

B. The department may suspend or discredit a laboratory in any or all of the test categories within the fields of testing for failure to meet the requirements of these regulations and the NELAP standards.

C. The department shall notify the laboratory by registered letter of the suspension or discreditation and the reason for the action.

D. Accreditation shall remain in effect until revoked by the accrediting authority, withdrawn at the written request of the accredited laboratory, or the expiration of the accreditation period.

E. The laboratory may renew accreditation by meeting the requirements outlined in LAC 33:I.5703.

F. Appeals for laboratories that have received discreditation or revocation notices are governed by applicable statutes.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2011.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of Environmental Assessment, Environmental Planning Division, LR 26:1440 (July 2000).

James H. Brent, Ph.D.  
Assistant Secretary

0007#073

**RULE**

**Department of Environmental Quality  
Office of Environmental Assessment  
Environmental Planning Division**

Radiation Protection CDetermination of Fee  
(LAC 33:XV.2508)(NE024)

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.2508 (Log #NE024).

This rule will amend the regulations so that if a registrant is no longer in possession of an x-ray unit for which he is being billed, and written documentation is received in the department by the due date on the invoice, the registrant will not have to pay the assessed fee. The written documentation shall include the name, address, and telephone number of transferee. If a registrant sells, donates, or transfers an x-ray unit for which a fee is being assessed, this rule will apply. The basis and rationale for this rule are to prevent the registrant from having to pay a fee on an x-ray unit that is no longer in his possession.

This rule meets an exception listed in R.S. 30:2019(D)(3) and R.S. 49:953(G)(3); therefore, no report regarding environmental/health benefits and social/economic costs is required. This rule has no known impact on family formation, stability, and autonomy as described in R.S. 49:972.

**Title 33**  
**ENVIRONMENTAL QUALITY**  
**Part XV. Radiation Protection**

**Chapter 25. Fee Schedule**

**§2508. Determination of Fee**

\* \* \*

(See Prior Text A-D)

E. Electronic products that are no longer possessed by the registrant (e.g., sold, donated, or transferred) shall not be subject to the annual maintenance fee, provided written documentation is received by the invoice due date, which includes the name, address, and telephone number to whom possession was transferred.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2001, et seq.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of Air Quality and Radiation Protection, Radiation Protection Division, LR 18:718 (July 1992), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1441 (July 2000).

James H. Brent, Ph.D.  
Assistant Secretary

0007#072

**RULE**

**Department of Environmental Quality**  
**Office of Environmental Assessment**  
**Environmental Planning Division**

Remedial Action Plans (RAPs)  
(LAC 33:V.625, 630, 635, 660 and 717)(HW073)

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 adopted the Hazardous Waste regulations, LAC 33:V.625, 630, 635, 660, and 717 (Log #HW073).

In order to maintain delegation to operate the hazardous waste program in Louisiana in lieu of EPA, or to become delegated for previously undelegated activities, the state must adopt regulations equivalent to federal regulations. Federal regulations promulgated in part 40 of the CFR on November 30, 1998, contain certain provisions which conflict with state statutes, specifically, the process to approve or deny a remedial action plan (RAP) application; the effective date of a RAP; when to begin physical construction; appeal of the decision to deny a modification or revocation; and reissuance or termination of a RAP. This rule replaces the federal requirements with equivalent state requirements that comply with the state statutes. In addition, the rule removes redundant state requirements for public notices for hazardous waste activities. The basis and rationale for this rule are to maintain an equivalent RCRA Subtitle C program.

This rule meets an exception listed in R.S. 30:2019 (D) (3) and R.S. 49:953 (G) (3); therefore, no report regarding environmental/health benefits and social/economic costs is required. This rule has no known impact on family formation, stability, and autonomy as described in R.S. 49:972.

**Title 33**  
**ENVIRONMENTAL QUALITY**  
**Part V. Hazardous Waste and Hazardous Materials**  
**Subpart 1. Department of Environmental**

**Quality**

**Chapter 5. Permit Application Contents**

**Subchapter G. Remedial Action Plans (RAPs)**

**General Information**

**§625. May the Decision to Approve or Deny My RAP Application Be Administratively Appealed?**

A. You may request an administrative hearing on a decision by the administrative authority to grant or deny your RAP application, under R.S. 30:2024. If the secretary does not grant your hearing request within 30 days of filing, you are entitled to file an application for *de novo* review of the secretary's action in the Nineteenth Judicial District Court.

B. An aggrieved person [as defined in R.S. 30:2004 (17)] may appeal a final decision on your RAP to the Nineteenth Judicial District Court, under R.S. 30:2050.21. Such an appeal would not suspend the effectiveness of the RAP, if one is issued. However, the secretary may grant, or the court may order, a stay of the RAP decision.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2180, et seq.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of Environmental Assessment, Environmental Planning Division, LR 26:1441 (July 2000).

**§630. When Does My RAP Become Effective?**

A. Your RAP becomes effective 30 days after the administrative authority notifies you and all commenters that your RAP is approved unless:

1. the administrative authority specifies a later effective date in the decision;
2. review is requested under R.S. 30:2024; or
3. no commenters requested a change in the draft RAP, in which case the RAP becomes effective immediately when it is issued.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2180, et seq.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of Environmental Assessment, Environmental Planning Division, LR 26:1441 (July 2000).

**§635. When May I Begin Physical Construction of New Units Permitted Under the RAP?**

A. You must not begin physical construction of new units permitted under the RAP for treating, storing, or disposing of hazardous remediation waste before receiving a RAP which is effective under the terms of LAC 33:V.630.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2180, et seq.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of Environmental Assessment, Environmental Planning Division, LR 26:1441 (July 2000).

**§660. May the Decision to Approve or Deny a Modification, Revocation and Reissuance, or Termination of My RAP be Administratively Appealed?**

A. You may request an administrative hearing on a decision by the administrative authority to grant or deny a modification, revocation and reissuance, or termination of

your RAP under R.S. 30:2024. If the secretary does not grant your hearing request within 30 days of filing, you are entitled to file an application for *de novo* review of the secretary's action in the Nineteenth Judicial District Court.

B An aggrieved person [as defined in R.S. 30:2004 (17)] may appeal a final decision on your RAP to the Nineteenth Judicial District Court, under R.S. 30:2050.21. Such an appeal would not suspend the effectiveness of the RAP, if one is issued. However, the secretary may grant, or the court may order, a stay of the RAP decision.

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2180, et seq.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of Environmental Assessment, Environmental Planning Division, LR 26:1441 (July 2000).

**Chapter 7. Administrative Procedures for Treatment, Storage, and Disposal Facility Permits**

**Subchapter C. Public Notice of Permit Actions and Public Comment Period**

**§717. Methods**

A. Public notice of activities described in LAC 33:V.713.A shall be given by the following methods:

\*\*\*

[See Prior Text in A-A.5.b]

c. those on the list as a result of notification to the public of the opportunity to be put on the mailing list through periodic publication in the public press and in such publications as regional and state funded newsletters, environmental bulletins, or state law journals. The administrative authority may update the mailing list from time to time by requesting written indication of continued interest from those listed and the administrative authority may delete from the list the name of any person who fails to respond to such a request.

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[See Prior Text in B-C]

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2180, et seq.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of Solid and Hazardous Waste, Hazardous Waste Division, LR 10:200 (March 1984), amended LR 17:478 (May 1991), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1442 (July 2000).

James H. Brent, Ph.D.  
Assistant Secretary

0007#071

**RULE**

**Department of Environmental Quality  
Office of Environmental Assessment  
Environmental Planning Division**

Volatile Organic Compounds CLoading  
(LAC 33:III.2107)(AQ203)

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 Air Quality regulations, LAC 33:III.2107 (Log #AQ203).

Test Methods 18, 25A, 25B, and flaring devices will be added as appropriate test methods for determining compliance with the control requirements for loading facilities for volatile organic compounds. This is part of the State Implementation Plan, which is federally enforceable, and EPA has requested these changes. The basis and rationale for this rule are to implement changes requested by EPA.

This rule meets an exception listed in R.S. 30:2019 (D) (3) and R.S. 49:953 (G) (3); therefore, no report regarding environmental/health benefits and social/economic costs is required. This rule has no known impact on family formation, stability, and autonomy as described in R.S. 49:972.

**Title 33**

**ENVIRONMENTAL QUALITY**

**Part III. Air**

**Chapter 21. Control of Emission of Organic Compounds**

**Subchapter A. General**

**§2107. Volatile Organic Compounds-Loading**

\*\*\*

[See Prior Text in A-E.1]

2. test method 18 (40 CFR part 60, appendix A, as incorporated by reference at LAC 33:III.3003) for determining gaseous organic compounds emissions by gas chromatography;

3. test method 25 (40 CFR part 60, appendix A, as incorporated by reference at LAC 33:III.3003) for determining total gaseous non-methane organic emissions as carbon;

4. test method 25A or 25B (40 CFR part 60, appendix A, as incorporated by reference at LAC 33:III.3003) for determining total gaseous organic concentration using flame ionization or nondispersive infrared analysis; and

5. flaring devices which shall be designed and operated according to 40 CFR 60.18.

\*\*\*

[See Prior Text in F]

AUTHORITY NOTE: Promulgated in accordance with R.S. 30:2054.

HISTORICAL NOTE: Promulgated by the Department of Environmental Quality, Office of Air Quality and Nuclear Energy, Air Quality Division, LR 13:741 (December 1987), amended LR 16:116 (February 1990), amended by the Office of Air Quality and Radiation Protection, LR 17:360 (April 1991), LR 22:1212 (December 1996), LR 24:20 (January 1998), amended by the Office of Environmental Assessment, Environmental Planning Division, LR 26:1442 (July 2000).

James H. Brent, Ph.D.  
Assistant Secretary

0007#070

**RULE**

**Office of the Governor  
Department of Veterans Affairs**

Revocation of Bonus Payments (LAC 4:VII.913 and 915)

The Louisiana Department of Veterans Affairs has deleted in its entirety LAC 4:VII.913 and 915, pertaining to the

Desert Shield/Desert Storm Bonus Payments and World War II Merchant Marine Bonus Payments. This action has been taken because both bonus programs have expired.

**Title 4**

**ADMINISTRATION**

**Part VII. Governor's Office**

**Chapter 9. Veterans' Affairs**

**Subchapter A. Veterans' Affairs Commission**

**§913. Desert Shield/Desert Storm Bonus Payments**

**Repealed**

AUTHORITY NOTE: Promulgated by Act 12, Section 20-8xxx, Military Bonus Payments, 1991 Regular Session.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Department of Veterans' Affairs, LR 17:1205 (December 1991), repealed LR 26:1443 (July 2000).

**§915. World War II Merchant Marine Bonus Payments**

**Repealed**

AUTHORITY NOTE: Promulgated in accordance with Act 90, 1993 Regular Legislative Session.

HISTORICAL NOTE: Promulgated by the Office of the Governor, Office of Veterans' Affairs, LR 20:294 (March 1994), repealed LR 26:1443 (July 2000).

David C. Perkins  
Deputy Assistant Secretary

0007#022

**RULE**

**Department of Health and Hospitals  
Board of Nursing**

Renewal of License and Change of Status  
(LAC 46:XLVII.3333 and 3337)

Notice is hereby given, in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950, et seq., that the Board of Nursing (board) pursuant to the authority vested in the board by R.S. 37:918, R.S. 37:919 has amended the Professional and Occupational Standards pertaining to the retired status of the board. The rules are set forth below.

**Title 46**

**PROFESSIONAL AND OCCUPATIONAL  
STANDARDS**

**Part XLVII. Nurses**

**Subpart 2. Registered Nurses**

**Chapter 33. General**

**§3333. Renewal of License**

A.-D.1. ...

2. Pays the required one-time fee as specified under LAC 46:XLVII.3341.

3. A license will be printed designating the year and retired status. No further licenses will be issued.

4. A licensee in retired status will continue to receive *The Examiner* and other official mailings and continue to be listed in the official roster of Registered Nurses in Louisiana.

5. After placed in retired status, no further renewal applications will be sent.

6. If at a future date, the licensee wishes to return to practice, the requirements for reinstatement specified under

LAC 46:XLVII.3335.D, 4507.E.2, and/or 4507.A.3 must be met.

7. The professional designation can be used followed by retired.

8. If the Registered Nurse (RN) license is placed in retired status, the Advanced Practice Registered Nurse (APRN) license shall also be placed in retired or inactive status with no fee.

9. The APRN license may be placed in retired or inactive status with no fee while the RN license remains active.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:918 and 920.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Nursing, LR 7:74 (March 1981), amended by the Department of Health and Hospitals, Board of Nursing, LR 24:1293 (July 1998), LR 26:1443 (July 2000).

**§3337. Change of Status**

A. A registrant who is no longer practicing as a registered nurse, may, by submitting a written notice to the board, be granted inactive status. No annual renewal nor fee is required of a person in inactive status.

B. A person who holds an inactive status may resume practicing status by submitting a completed applicant form, paying the required fee and meeting all other requirements for licensure renewal.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:918 and R.S. 37:920.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Nursing, LR 7:74 (March 1981), amended by the Department of Health and Hospitals, Board of Nursing, LR 16:1060 (December 1990), LR 24:1293 (July 1998), LR 26:1443 (July 2000).

Barbara L Morvant, R.N., M.N.  
Executive Director

0007#001

**RULE**

**Health and Hospitals  
Board of Physical Therapy Examiners**

Licensure; Unauthorized Practice; and  
Supervision (LAC 46:LIV.Chapters 1 and 3)

Notice is hereby given, in accordance with R.S. 49:950 et seq., the Administrative Procedure Act, that the Board of Physical Therapy Examiners (board), pursuant to the authority vested in the board by R.S. 2401.2A(3) intends to amend its existing rules as set forth below.

**Title 46**

**PROFESSIONAL AND OCCUPATIONAL  
STANDARDS**

**Part LIV. Physical Therapy Examiners**

**Subpart 1. Licensure**

**Chapter 1. Physical Therapists and Physical  
Therapist Assistants**

**Subchapter B. Graduates of American Physical Therapy  
Schools**

**§107. Qualifications for License**

A.-B.3. ...

4. have graduated from an associate degree program accredited by the Commission on Accreditation of Physical Therapy Education (CAPTE); and

B.5-C. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2(A)3.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy Examiners, LR 13:744 (December 1987), amended by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 15:387 (May 1989), LR 17:662 (July 1991), LR 19:208 (February 1993), LR 22:284 (April 1996), LR 24:39 (January 1998), LR 26:1443 (July 2000).

#### **§109. Procedural Requirements**

A. In addition to the substantive qualifications specified in §107, to be eligible for a license, an applicant shall satisfy the procedures and requirements for application provided by §§123-129 of this Chapter, and if applicable, the procedures and requirements for examination required by the board provided by §§131-149 of this Chapter.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3).

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy Examiners, LR 13:744 (December 1987), amended by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 26:1444 (July 2000).

#### **Subchapter C. Graduates of Foreign Physical Therapy Schools**

##### **§115. Qualifications for License**

A.-A.1. ...

2. have successfully completed his education in physical therapy that is substantially equivalent to the requirements of physical therapists educated in accredited physical therapy programs in the United States as the board, upon evaluation of the applicants educational program by an approved credentials evaluation service, deems sufficient, however, such substantially equivalent education shall be no less than a total of 120 semester hour credits which includes a minimum of 60 semester hour credits for professional education and a minimum of 40 semester hours of general education as established in a course work evaluation tool approved by the board;

A.3.-B. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3).

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy Examiners, LR 13:744 (December 1987), amended by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 17:662 (July 1991), LR 18:962 (September 1992), LR 19:208 (February 1993), LR 22:284 (April 1996), LR 24:39 (January 1998), LR 26:1444 (July 2000).

##### **§117. Procedural Requirements**

A. In addition to the substantive qualifications specified in §115, to be eligible for a license, a foreign graduate applicant shall satisfy the procedures and requirements for application provided by §§123-129 of this Chapter, and the procedures and requirements for examination required by the board required in §§131-149 of this Chapter.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3).

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy Examiners, LR 13:745 (December 1987), amended by the

Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 17:662 (July 1991), LR 26:1444 (July 2000).

#### **Subchapter E. Application**

##### **§125. Application Procedure**

A. Application for licensure shall be made on original forms supplied by the board.

B. If application is made for licensure on the basis of examination, such examination shall be a national examination approved by the board and administered at an approved testing service.

C. Application for licensure by reciprocity shall comply with the requirements set forth in Subchapter D.

D.-I. ...

J. To assure equal opportunity for all persons, the board will make reasonable accommodations for an applicant for licensure by examination if the applicant has a qualified disability pursuant to applicable law and is approved by the board. A request for a reasonable accommodation, with supporting documentation, must be submitted in writing to the board during the application process and within a reasonable time before administration of the examination for the board to make a decision regarding the request.

K. Every applicant shall personally sign his application for licensure and oath.

L. An application which is incomplete will be closed after six months of inactivity. At the end of this period, any application which is not completed will be considered abandoned and closed by the board and any fees paid shall not be refunded. Should the applicant re-apply after his incomplete application is closed, he shall be required to begin the process anew which includes the payment of the application fee to the board.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3).

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy Examiners, LR 13:745 (December 1987), amended by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 15:387 (May 1989), LR 17:663 (July 1991), LR 19:208 (February 1993), LR 26:1444 (July 2000).

##### **§127. Additional Requirements for Foreign Graduates**

A. ...

B. As a condition to the board's consideration of a foreign graduate application, the board must receive a comprehensive credential evaluation certificate from an approved credentialing agency which includes, but is not limited to, the Foreign Credentialing Commission on Physical Therapy (FCCPT).

C. A foreign graduate must comply with §125, and more particularly in complying with §125.I, the board-approved supervisor shall also attend the personal appearance of the applicant with a member of the board, or its designee, as a condition to the board's consideration of his application.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2(A)3.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy Examiners, LR 13:745 (December 1987), amended by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 15:387 (May 1989), LR 19:208 (February 1993), LR 26:1444 (July 2000).

## **Subchapter F. Examination**

### **§131. Designation of Examination**

A. The examination approved by the board pursuant to R.S. 37:2409 shall be standardized and nationally accepted by the Federation of State Boards of Physical Therapy.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3).

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy Examiners, LR 13:746 (December 1987), amended by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 15:387 (May 1989), LR 17:663 (July 1991), LR 26:1445 (July 2000).

### **§135. Dates, Places of Examination**

A. Once the application process is completed, including the payment of fees, the applicant will be notified of his eligibility to schedule the examination at any approved testing service. Within 60 days from the date specified in the eligibility letter, the applicant must sit for the examination. If the examination is not taken within the referenced 60 days, the applicant is removed from the eligibility list and must begin the application process again including the payment of the examination costs to the Federation of State Boards of Physical Therapy.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3).

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy Examiners, LR 13:746 (December 1987), amended by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 15:387 (May 1989), LR 26:1445 (July 2000).

### **§137. Administration of Examination**

A. The board's licensing examination is administered by an approved testing service and is computer based. The testing service is authorized and directed by the board to obtain positive photographic identification from all applicants appearing and properly registered for the examination; to establish and require examinees to observe an appropriate seating arrangement; to provide appropriate instructions for taking the examinations; to fix and signal the time for beginning and ending the examination; to prescribe such additional rules and requirements as are necessary or appropriate to the taking of the examination in the interest of the examinees of the examination process; and to take all necessary and appropriate actions to secure the integrity of the examination process, including, without limitation, excusing an applicant from the examination or changing an applicant's seating location at any time during the examination.

B. An applicant who appears for examination shall:

1. present to the appropriate representative of the testing service positive personal photograph and other identification in the form prescribed;

2. fully and promptly comply with any and all rules, procedures, instructions, directions, or requests made or prescribed by the testing service; and

3. pay the site fee for the examination directly to the testing service at the time of registration with the testing service and in the amount and form prescribed by the testing service.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3).

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy

Examiners, LR 13:746 (December 1987), amended by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 15:387 (May 1989), LR 17:663 (July 1991), LR 26:1445 (July 2000).

### **§139. Subversion of Examination Process**

A.-B. ...

1. refusing or failing to fully and promptly comply with any rules, procedures, instructions, directions, or requests made or prescribed by the testing service;

2.-10. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3).

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy Examiners, LR 13:747 (December 1987), amended by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 15:387 (May 1989), LR 17:664 (July 1991), LR 26:1445 (July 2000).

### **§141. Finding of Subversion**

A. When, during the administration of examination, there exists reasonable cause to believe that an applicant-examinee is engaging, or attempting to engage, in subversion, action shall be taken as deemed necessary or appropriate to terminate such conduct and such conduct shall be reported to the board.

B. ...

C. When the board, has reasonable cause to believe that an applicant has engaged or attempted to engage in conduct which subverts or undermines the integrity of the examination process, the board shall so advise the applicant and provide him with an opportunity for hearing pursuant to the Administrative Procedure Act and applicable rules of the board governing administrative hearings.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3).

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy Examiners, LR 13:746 (December 1987), amended by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 17:663 (July 1991), LR 26:1445 (July 2000).

### **§149. Lost, Stolen or Destroyed Examinations**

A. The submission of an application for examination to the board by the applicant shall constitute and operate as an acknowledgment and agreement by the applicant that the liability of the board, its members, committees, employees and agents, and the state of Louisiana to the applicant for the loss, theft or destruction of all or any portion of an examination taken by the applicant, prior to the reporting of scores thereon by the examination service, other than by intentional act, shall be limited exclusively to the refund of the fees paid to the board for the examination by the applicant.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3).

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy Examiners, LR 13:747 (December 1987), amended by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 15:387 (May 1989), LR 17:664 (July 1991), LR 26:1445 (July 2000).

## **Subchapter G. Temporary Permit**

### **§151. Temporary Permits in General**

A.-B. ...

C. A holder of a temporary permit pending examination or reexamination, whether a domestic or foreign graduate,

must schedule and sit for the licensure examination prior to the temporary permit expiration date. An extension of the temporary permit will not be issued beyond the expiration date without written proof of the examination having been taken by the applicant.

D. The board may issue a temporary permit for a limited time period to a physical therapist licensed in another state, or a foreign trained physical therapist credentialed in another country, to perform physical therapy services on a patient as part of an educational seminar or athletic event recognized and approved by the board. One or more temporary permits issued to the same person shall not exceed a total of 60 days in a calendar year. Such temporary permit holder shall be obligated to comply with the provisions of the Physical Therapy Practice Act of Louisiana and the board's rules regarding the practice of physical therapy in Louisiana. The temporary permit holder is obligated to obtain the temporary permit prior to his performing physical therapy services pursuant to this paragraph.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3).

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy Examiners, LR 13:747 (December 1987), amended by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 19:208 (February 1993), LR 26:1445 (July 2000).

#### **§155. Permit Pending Reexamination**

A. An applicant who possesses all of the qualifications for licensure prescribed by §107 of this Chapter, except for §107.A.5 and §107.B.5, who has once failed the licensing examination administered by the board, and who has applied to the board within 10 days of receipt of written notice and completed all requirements for examination shall be issued a new temporary permit to be effective for 60 days.

B.-C.1 ...

2. failure of a permit holder to appear for and take the licensing examination within the 60-day permit period.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3) and Act 731 of 1992.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy Examiners, LR 13:747 (December 1987), amended by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 15:388 (May 1989), LR 17:664 (July 1991), LR 19:208 (February 1993), LR 26:1446 (July 2000).

#### **Subchapter H. License and Permit Issuance, Termination, Renewal and Reinstatement**

##### **§161. Issuance of License**

A.-B ...

C. A licensee shall not copy or otherwise reproduce his license or allow another person to copy or otherwise reproduce his license.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3).

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy Examiners, LR 13:748 (December 1987), amended by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 15:388 (May 1989), LR 17:664 (July 1991), LR 26:1446 (July 2000).

#### **Subchapter I. Continuing Education**

##### **§169. Requirements**

A. Minimum Continuing Education Requirements. Licensees shall document successful completion of 1.2 units,

or 12 hours of acceptable continuing education credit during each annual period.

B. Criteria of Acceptability. Acceptable continuing education activities are defined as formally organized and planned instructional experiences of at least two hours duration per sitting; with a qualified instructor or instructors; and with objectives compatible with the professional continuing education needs of the physical therapist or physical therapist assistant. There are two types of approved courses: clinical and administrative. The entirety of the annual requirement may be comprised of approved clinical courses. A maximum of four hours of approved administrative courses will be allowed to be applied to the annual requirement.

1. Continuing Education Activities Specifically Acceptable for License Renewal. Prior board approval is recommended for all activities other than those specified under Subparagraphs a and b. below. However, activities listed in category a below must comply with the criteria of acceptability referenced in §169.B above. Continuing education activities which do not fit into categories in §169.B.1.a. and b. below and have not been pre-approved by the board prior to participation may or may not be acceptable to the board as fulfilling continuing education requirements.

a. APTA (American Physical Therapy Association) accredited courses, LPTA (Louisiana Physical Therapy Association) accredited courses, APTA home study courses, or Louisiana State University Health Sciences Center, School of Physical Therapy, sponsored courses.

B.1.b.-B.3.e. ...

f. continuing education activities less than two consecutive hours in duration, or valued at less than 0.2 units of continuing education credit.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3) and Act 731 of 1992.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 15:388 (May 1989), LR 17:664 (July 1991), LR 19:208 (February 1993), LR 21:394 (April 1995), LR 21:1243 (November 1995), LR 26:1446 (July 2000).

#### **Subchapter J. Responsibilities**

##### **§177. Committees**

A. The board may appoint committees to assist in the review of an applicant's qualifications for licensure; conduct an applicant's interview to deliver a temporary permit; review continuing education requirements and activities; and other purposes deemed necessary by the board.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3) and Act of 1992.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 17:666 (July 1991), LR 19:208 (February 1993), LR 26:1446 (July 2000).

##### **§179. Board Meeting Attendance**

A. Regularly scheduled meetings of the board are held once each month. board members are required to attend a minimum of 80 percent of the regularly scheduled meetings, as well as special meetings, open forums or hearings which may be scheduled in conjunction with or separate from regularly scheduled meetings. Attendance constitutes active participation in at least 80 percent of the entire meeting. Exceptions may be granted for good cause by the board. Notification of an expected absence shall be submitted to the

board office as soon as possible prior to the commencement of the meeting.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3) and Act of 1992.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 17:666 (July 1991), LR 19:208 (February 1993), LR 26:1446 (July 2000).

**Subpart 2. Practice**

**Chapter 3. Practice**

**Subchapter A. General Provisions**

**§305. Special Definition; Practice of Physical Therapy**

A. ...

\* \* \*

*Physical Therapy Supportive Personnel*

a. ...

b. *Physical Therapist Assistant*Ca person licensed by the board who is a graduate of an associate degree program in physical therapist assisting accredited by the Commission on Accreditation of Physical Therapy Education (CAPTE) or was granted licensure pursuant to R.S. 37:2403.D.

c. ...

*Preventative Services*Cthe use of physical therapy knowledge and skills by a physical therapist to provide education or activities in a wellness setting for the purpose of injury prevention, reduction of stress and/or the promotion of fitness, but does not include the administration of physical therapy treatment and, therefore, can be performed without referral or prescription.

*Topical Agents/Aerosols*Ctopical medications or aerosols used in wound care which are obtained over the counter or by physician prescription or order.

*Wound Care and Debridement*Ca physical therapist, physical therapist permittee or student physical therapist may perform wound debridement and wound management that includes, but is not limited to, sharps debridement, debridement with other agents, dry dressings, wet dressings, topical agents including enzymes, and hydrotherapy. A physical therapist assistant, physical therapist assistant permittee or student physical therapist assistant shall not perform sharps debridement. The board's licensees and permittees, as well as students and supportive personnel, shall comply with the supervision requirements set forth in §321.

B. Minimal standards of acceptable and prevailing physical therapy practice shall include, but not be limited to, the American Physical Therapy Association Codes of Ethics.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3).

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy Examiners, LR 13:748 (December 1987), amended by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 17:666 (July 1991), LR 19:208 (February 1993), LR 21:1243 (November 1995), LR 24:40 (January 1998), LR 26:1447 (July 2000).

**Subchapter B. Practice of Physical Therapy**

**§307. Prohibitions and Practice**

A.-C. ...

D. A licensed physical therapist is authorized to engage in the practice of physical therapy as set forth in the Physical Therapy Practice Act and the board's rules which includes, but is not limited to, the performance of physical therapy

evaluations, consultative services, wound care and debridement, the storage and administration of aerosol and topical agents, the performance of passive manipulation, and preventative services all as more fully defined in §305.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2(A)3.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy Examiners, LR 13:749 (December 1987), amended by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 21:395 (April 1995), LR 24:40 (January 1998), LR 26:1447 (July 2000).

**Subchapter C. Supervised Practice**

**§317. General Supervision Requirements for Permittees**

A. ...

B. A licensed physical therapist who undertakes to supervise a physical therapist or physical therapist assistant holding a temporary permit under §153 or §155 of these rules shall:

1.-5. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3).

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy Examiners, LR 13:749 (December 1987), amended by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 15:38 (May 1989), LR 17:667 (July 1991), LR 24:41 (January 1998), LR 26:1447 (July 2000).

**§321. Supervision Requirements**

A.-A.1. ...

a. be on premises daily in each practice setting for at least one half of the physical therapy treatment hours in which the physical therapist assistant is rendering physical therapy treatment;

A.1.b.-C.1. ...

2. A physical therapist aide/technician may assist a physical therapist assistant or a physical therapist assistant permittee in patient care as assigned by the physical therapist who must be continuously, on the premises during the provision of physical therapy services.

D.-E.2. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3).

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy Examiners, LR 13:750 (December 1987), amended by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 15:388 (May 1989), LR 19:208 (February 1993), LR 24:41 (January 1998), LR 26:1447 (July 2000).

**§323. Documentation Standards**

A.-C. ...

D. Documentation by a student must be co-signed by the supervising physical therapist or supervising physical therapist assistant.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3).

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Physical Therapy Examiners, LR 13:750 (December 1987), amended by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 15:389 (May 1989), LR 21:395 (April 1995), LR 26:1447 (July 2000).

**Subchapter D. Disciplinary Proceedings**

**§331. Initiation of Complaints**

A. Complaints may be initiated by any person or by the board on its own initiative. A licensee or temporary permittee is obligated to report violations of the Practice Act, board's rules or the American Physical Therapy Association's Codes of Ethics, Guides for Professional Conduct and Standards of Practice. Failure by a licensee or temporary permittee to report such violations to the board subjects the licensee or temporary permittee to disciplinary action.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2401.2A(3).

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Physical Therapy Examiners, LR 15:389 (May 1989), LR 19:208 (February 1993), LR 26:1448 (July 2000).

Pursuant to the Administrative Procedure Act, if oral presentation or argument is requested by the requisite number of persons or the proper entities, then a public hearing on these matters will be held on May 25, 2000, at 10 a.m. at the office of the Board of Physical Therapy Examiners, 714 East Kaliste Saloom, Suite D2, Lafayette, LA 70508. Please contact the board office at (337) 262-1043 to confirm whether or not the public hearing will be conducted.

Written comments concerning the proposed rules may be directed to this address and made to the attention of Becky Legé, Chairman. Such comments should be submitted no later than the close of business at 5 p.m. on Friday, May 19, 2000.

Becky Legé  
Chairman

0007#029

**RULE**

**Department of Health and Hospitals  
Office of the Secretary  
Bureau of Health Services Financing**

**Health Care Facility Sanctions (LAC 50:I.5501)**

The Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing adopts the following rule as authorized by the Health Care Facilities and Services Licensing Enforcement Act, R.S. 40:2199, as enacted by the Legislature in 1997, and in accordance with the Administrative Procedure Act, R.S. 49:950 et seq.

Act 1390 of the 1997 Regular Legislative Session established under R.S. 40:2199 the authority for the Department of Health and Hospitals to impose civil fines on those health care facilities determined to be out of compliance with any state or federal law or rule governing the operation and provision of health care services. It is anticipated that the imposition of civil fines will increase compliance with regulations and thereby improve the quality of health care provided to the citizens of this state. Sanctions specified in the rule are applicable to the violation of any state or federal statute, regulation or Department of Health and Hospital's (Department) rule governing health care services; except nursing facility services. Sanctions for the

violation of any state or federal statute, regulation, or department rule governing nursing facilities were previously promulgated.

**Title 50**

**PUBLIC HEALTHC MEDICAL ASSISTANCE**

**Part I. Administration**

**Subpart 7. Sanctions**

**Chapter 55. Health Care Facility Sanctions**

**§5501. General Provisions**

A. Any health care facility listed in Subsection B below found to be in violation of any state or federal statute, regulation, or any Department of Health and Hospitals (Department) rule adopted pursuant to the Administrative Procedure Act governing administration and operation of the facility may be sanctioned as provided in this Chapter.

B. For purposes of this rule, facility refers to any agency licensed by Department of Health and Hospitals as an adult day health care center, substance abuse/addiction treatment facility, ambulatory surgical center, case management agency, urine drug screening clinic, suppliers of portable x-ray services, home health agency, hospice, hospital, or intermediate care facility for the mentally retarded.

C. The opening or operation of a facility without a license or registration shall be a misdemeanor punishable upon conviction by a fine of not less than \$1,000, but not more than \$5,000 (for each offense). Each day's violations shall constitute a separate offense. On learning of such a violation, the department shall refer the facility to the appropriate authorities for prosecution.

D. Any facility found to have a violation that poses a threat to the health, safety, rights, or welfare of a patient or client may be liable for civil fines in addition to any criminal actions which may be brought under [any] other applicable laws.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2199.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Office of Family Security, LR 11:37 (January 1985), amended LR 11:770 (August 1985), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 18:189 (February 1992), LR 26:1448 (July 2000).

**§5503. Description of Violation and Applicable Civil**

**Fines**

**A. "Class A" Violations**

1. A "Class A" violation is a violation of a rule or regulation that creates a condition or occurrence relating to the maintenance and operation of a facility which results in death or serious harm to a patient or client. Examples of "Class A" violations include, but are not limited to:

a. acts or omissions by an employee or employees of a facility that either knowingly or negligently resulted in the death of a patient or client;

b. acts or omissions by an employee or employees of a facility that either knowingly or negligently resulted in serious harm to a patient or client.

2. Civil fines for "Class A" violations may not exceed \$2,500 for the first violation and may not exceed \$5,000 per day for repeat violations.

**B. "Class B" Violations**

1. A Class B violation is a violation of a rule or regulation in which a condition or occurrence relating to the maintenance and operation of a facility is created which

results in the substantial probability of death or serious harm to a patient or client if the condition or occurrence remains uncorrected. Examples of "Class B" violations include, but are not limited to:

- a. medications or treatments improperly administered or withheld;
- b. lack of functioning equipment necessary to care for a patient or client;
- c. failure to maintain emergency equipment in working order;
- d. failure to employ a sufficient number of adequately trained staff to care for residents or clients; and
- e. failure to implement adequate infection control measures.

2. Civil fines for "Class B" violations may not exceed \$1,500 for the first violation and may not exceed \$3,000 per day for repeat violations.

C. "Class C" Violations

1. A "Class C" violation is a violation of a rule or regulation in which a condition or occurrence relating to the maintenance and operation of a facility that creates a potential for harm by directly threatening the health, safety, rights or welfare of a patient or client, including potential for harm created through exploitation. Examples of "Class C" violations include, but are not limited to:

- a. failure to perform treatments as ordered by the physician, including the administration of medications;
- b. improper storage of poisonous substances;
- c. failure to notify physician and family of changes in condition of a patient or client;
- d. failure to maintain equipment in working order;
- e. inadequate supply of needed equipment;
- f. lack of adequately trained staff necessary to meet a patient or client's needs;
- g. failure to adhere to professional standards in giving care to a patient or client; and
- h. failure to protect patients or clients from personal exploitation, including, but not limited to, sexual conduct involving facility staff and a patient or client.

2. Civil fine for "Class C" violations may not exceed \$1,000 for the first violation and may not exceed \$2,000 per day for repeat violations.

D. "Class D" Violations

1. "Class D" violations are violations of rules or regulations related to administrative and reporting requirements that do not directly threaten the health, safety, rights, or welfare of a patient or client. Examples of "Class D" violations include, but are not limited to:

- a. failure to submit written report of accidents;
- b. failure to timely submit a Plan of Correction;
- c. falsification of a record; and
- d. failure to maintain a patient's or client's financial records as required by rules and regulations.

2. Civil fines for "Class D" violations may not exceed \$100 for the first violation and may not exceed \$250 per day for repeat violations.

E. "Class E" Violations

1. "Class E" violations occur when a facility fails to submit a statistical or financial report in a timely manner as required by rule or regulation.

2. Civil fines for "Class E" violations may not exceed \$50 for the first offense and may not exceed \$100 per day for repeat violations.

F. Determination of Amount of Civil Fine

1. In establishing the amount of civil fines to be imposed against the provider, the department will consider:

- a. all relevant aggravating circumstances, including, but not limited to:
  - i. whether the violation resulted from intentional or reckless conduct by the provider;
  - ii. the pervasiveness of the violation;
  - iii. the duration of the violation; and
  - iv. the extent of actual or potential harm to patients or clients;
- b. all relevant mitigating circumstances, including, but not limited to:
  - i. whether the provider had taken steps to prevent the violation; and
  - ii. whether the provider had implemented an effective corporate compliance program prior to the violation;
- c. when the provider had an effective compliance program in place at the time of the violation, the assessed fine will not exceed 50 percent of the maximum potential fine.

2. The aggregate fines assessed for violations identified in any one calendar month may not exceed \$10,000 for "Class A" and "Class B" violations. The aggregate fines assessed for "Class C", "Class D", and "Class E" violations identified in any one calendar month may not exceed \$5,000.

G. The department shall have the authority to determine whether a violation is a repeat violation and to sanction the provider accordingly. A violation is considered a repeat violation if either:

1. the existence of the violation is established as of a particular date and it is one that may be reasonably expected to continue until corrective action is taken. The department may elect to treat the cited continuing violation as a repeat violation subject to appropriate fines for each day following the date on which the initial violation is established until such time as there is evidence that the violation has been corrected; or

2. the existence of a violation is established and another violation that is the same or substantially similar to the cited violation occurs within 18 months. The second and all similar violations occurring within an 18-month time period will be considered repeat violations and sanctioned accordingly.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2199.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Office of Family Security, LR 11:37 (January 1985), amended LR 11:770 (August 1985), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 18:189 (February 1992), LR 26:1448 (July 2000).

**§5505. Notice and Appeal Procedure**

A. Notice Requirements. When the Department imposes a civil fine on a health care provider, it shall give the provider written notice of the imposition. The notice shall be delivered by certified mail and shall contain the following information:

1. the nature of the violation(s) and whether the violation(s) is classified as an initial or repeat violation;
2. the legal authority for the violation(s);
3. the civil fine assessed for each violation;
4. information that the facility has ten working days from receipt of the notice within which to request an informal reconsideration of the proposed civil fine;
5. information that the facility has 30 working days from receipt of the notice within which to request an administrative appeal of the proposed civil fine. The request for an informal reconsideration does not constitute a request for an administrative appeal, nor does it extend the time limit for requesting an administrative appeal; and
6. information that the department's decision becomes final and no administrative or judicial review may be obtained if the facility fails to timely request an informal reconsideration and/or administrative .

B. Informal Reconsideration. The provider may request an informal reconsideration of the department decision to impose a civil fine.

1. The request must be in writing and received by the department within ten working days of the provider's receipt of the notice of the imposition of the fine.

2. The reconsideration shall be conducted by designated employees of the department who did not participate in the initial decision to recommend imposition of the civil fine.

3. The reconsideration decision shall be based upon all documents and oral testimony furnished by the provider to the department at the time of the informal reconsideration.

4. Correction of the violation cited for imposition of the civil fine shall not be the basis for a reconsideration.

5. The designated employee(s) shall only have the authority to confirm, reduce or rescind the civil fine.

6. The department shall notify the provider of the reconsideration decision within ten working days after the reconsideration is conducted.

C. Administrative Appeal. The provider may request an administrative appeal of the department's decision to impose a civil fine.

1. If a timely request for an administrative appeal is received, the hearing shall be conducted as provided in the Administrative Procedure Act, R.S. 49:950 et seq.

2. An appeal bond shall be posted with the Bureau of Appeals as provided in R.S. 40:2199(D) or the provider may choose to file a devolutive appeal (pay the fine, pending the outcome of all appeals).

3. The provider may request judicial review of the administrative appeal decision as provided in the Administrative Procedure Act.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2199.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Office of Family Security, LR 11:37 (January 1985), amended LR 11:770 (August 1985), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 18:189 (February 1992), LR 26:1449 (July 2000).

**§5507. Collection of Fines**

A. The decision to impose a fine is final when:

1. an administrative appeal is not requested within the specified time limit;

2. the facility admits to the violations and agrees to pay the fine; or

3. the administrative appeal affirms the department finding of violations and the time for seeking judicial review has expired.

B. When Payment of Civil Fines is Final

1. Payment shall be made in full within ten working days of the date the fine becomes final, unless the department allows a payment schedule in light of documented financial hardship.

2. Arrangements for a payment schedule must commence within ten calendar days of the fine becoming final.

3. Interest shall begin to accrue at the current judicial rate beginning ten working days after the fine becomes due.

C. Failure to make Payment of Assessed Fines. When the assessed fine is not received within the prescribed time period, the department shall take the following action.

1. For a Medicaid provider, the full amount with accrued interest shall be deducted from funds otherwise due to the provider as Medicaid reimbursement payment due, whether monthly or quarterly.

2. If the provider is non-Medicaid, civil actions shall be instituted as necessary to collect the fines due.

D. Consideration as an Allowable Cost or Charge to Patient/Client. No provider may claim imposed fines or interest as reimbursable costs to Medicaid or Medicare, nor increase charges to residents, clients or patients as a result of such fines or interest.

E. Disposition of Civil Fines. Civil fines collected shall be deposited in the Health Care Facility Fund maintained by the State Treasury.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2199.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Office of Family Security, LR 11:37 (January 1985), amended LR 11:770 (August 1985), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 18:189 (February 1992), LR 26:1450 (July 2000).

David W. Hood  
Secretary

0007#048

**RULE**

**Department of Health and Hospitals  
Bureau of Health Services Financing**

**Minimum Standards/Requirements for Substance Abuse/Addiction Treatment Facilities/Programs (LAC 48:I.Chapter 74)**

The Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing adopts the following rule governing the requirements for licensing Substance Abuse/Addiction Treatment Facilities/ Programs as authorized by R.S. 40:1058.1-1058.9 and in accordance with the Administrative Procedure Act, R.S. 49:950, et seq.

Act 1000 of the 1997 Regular Session of the Legislature authorized the Department of Health and Hospitals to

promulgate rules in accordance with R.S. 40:1058.2. These written rules are the Minimum Licensure Standards for Substance Abuse/Addiction Treatment Facilities. Any facility that presents itself to the public as a provider of services related to the abuse/addiction of controlled dangerous substances, drugs or inhalants, alcohol, problem and compulsive gambling, or a combination of the above is required to have a valid and current license prior to admitting any client. Therefore, the Bureau adopts the following licensure standards for all substance abuse/addiction treatment facilities/programs in the state.

Any existing licensed facility shall continue to operate abiding by the last amended rules (published in the *Louisiana Register*, Volume 12, January 1986) for up to one year from adoption of this final rule. Any facility issued an initial new license will be required to comply with all the following licensure standards upon finalization of this rule. Effective one full year from the adoption of this rule, the provisions of this rule shall govern all facilities, regardless of the date of issuance of license.

This rule shall supersede all previous manuals pertaining to this subject, including the standards manual which comprises the Minimum Standards for Licensing Alcoholism and Drug Abuse/Substance Abuse Programs in its entirety as published in January 1977 and January 1986.

#### TITLE 48

### PUBLIC HEALTH GENERAL

#### Part I. General Administration

#### Subpart 3. Licensing and Certification

### Chapter 74. Minimum Standards/Requirements for Abuse/Addiction Treatment Facilities/Programs

#### Subchapter A. General Provisions

#### §7401. Definitions and Acronyms

A. The following words and terms, when used in this Chapter, shall have the following meanings, unless the context clearly states otherwise.

*AADD* Abuse/addiction disease/disorder.

*Abuse* Any act or failure to act that caused or may have caused injury to a client knowingly, recklessly, or intentionally, including incitement to act. Injury may include, but is not limited to: physical injury, mental disorientation, or emotional harm, whether it is caused by physical action or verbal statement.

*Adequate/Sufficient* Reasonable, enough, e.g., personnel to meet the needs of the clients currently enrolled in a specific program.

*Adolescent* Can individual between the ages of 13 and 17 inclusive who has not been emancipated by marriage or judicial decree. Incarcerated adolescents will be in accordance with incarceration guidelines.

*Advertise* To solicit or induce to purchase the services provided by a treatment facility.

*Adult* Can individual 18 years of age or older, or an individual under the age of 18 who has been emancipated by marriage or judicial decree. Persons aged 16 and above may voluntarily seek and receive substance abuse services without parental consent.

*At Risk* Identification by the Office for Addictive Disorders (OAD) of greater potential for the use/abuse of alcohol and other drugs.

*ATOD* Alcohol, tobacco, and other drugs.

*Board(s)* Entities responsible for licensure/certification for specific professions (e.g., nursing, counselors, social workers, physicians, etc.). State of Louisiana boards are the only accepted credentialing organizations for all personnel.

*Client/Patient/Consumer/Participant* Any person assigned or accepted for prevention or treatment services furnished by a licensed facility as specified.

*Compulsive Gambling* Persistent and recurrent maladaptive gambling behavior that disrupts personal, family, community, or vocational pursuits, and is so designated by a court, or diagnosed by a licensed physician, licensed social worker, licensed psychologist, licensed professional counselor, or advanced practice registered nurse who is certified in mental health.

*Consultation* Professional oversight, advice, or services provided under contract.

*Core Functions* The essential and necessary elements required of every abuse/addiction treatment facility.

a. *Assessment* Core function in which a counselor/program identifies and evaluates an individual's strengths, weaknesses, problems, and needs for the development of the treatment plan.

b. *Case Management* Core function in which services, agencies, resources, or people are brought together within a planned framework of action toward the achievement of established goals. It may involve liaison activities and collateral contacts with other providers/facilities.

c. *Client Education* Core function in which information is provided to individuals and groups concerning alcoholism and other drug abuse, positive lifestyle changes, and the available services and resources.

d. *Client Orientation* Core function in which the client is informed regarding:

i. general nature and goals of the program;

ii. rules governing client conduct and infractions that can lead to disciplinary action or discharge from the program;

iii. availability of services;

iv. costs; and

v. client's rights.

e. *Consultation with Professionals* Core function in which functional relationship with counselors and other credentialed health care professionals is provided as required to assure comprehensive quality care for the client.

f. *Counseling (Individual/Group) Services* Core function in which appropriate support is provided to the client by those professionals qualified to provide therapeutic services. Special skills are used to assist individuals, families, or groups in achieving objectives through:

i. exploration of a problem and its ramifications;

ii. examination of attitudes and feelings;

iii. consideration of alternative solutions; and

iv. decision making and problem solving.

g. *Crisis Intervention Services* Core function in which appropriate assistance is rendered during emergencies, including 24-hour telephone coverage by a qualified counselor, to provide:

i. telephone assistance to prevent relapse;

ii. referral to other services; and

iii. support during related crises.

h. **Intake**Core function in which information is gathered about a prospective client. Information is given to a prospective client about the treatment facility and facility's treatment and services.

i. **Referral**Core function in which appropriate services not provided by the facility are identified, and client/family is assisted to optimally utilize the available support systems and community resources.

j. **Reports and Record Keeping**Core functions in which results of the assessment and treatment planning are recorded. Written reports, progress notes, client data, discharge summaries and other client-related documentation is recorded in the client record.

k. **Screening**Core function in which the determination is made as to whether a client meets the program's admission criteria. Information such as the person's reason for admission, medical and substance abuse history, and other needed information, is used to determine client's need for treatment, and/or appropriateness of admission.

l. **Treatment Planning**Core function in which the counselor and the client:

- i. identify and rank problems needing resolution;
- ii. establish agreed upon immediate objectives and long-term goals; and
- iii. decide on a treatment process, frequency, and the resources to be utilized.

**Core Requirements**As contained in this Chapter apply to all facilities licensed to provide substance abuse prevention, treatment, or detoxification. Sections 7401-7425 contain core requirements for all facilities and §7427-§7457 contain additional requirements that apply to specific programs.

**Counselor**Qualified professional (QPS or QPC) as described in this document.

**Counselor in Training (CIT)**Ca person currently registered with Louisiana State Board Certified Substance Abuse Counselor (LSBCSAC) Board and pursuing a course of training in substance abuse counseling including educational hours, practicum hours, and direct, on-site supervision of work experience hours by a facility-employed QPS/QPC.

**Department**the Louisiana Department of Health and Hospitals (DHH). The following is a list of pertinent sections.

a. **Health Standards Section (HSS)**Section of Bureau of Health Services Financing, DHH that surveys, licenses, and serves as the regulatory body for health care facilities in the state.

b. **Office for Addictive Disorders (OAD)**CDHH office responsible for providing treatment and prevention services related to abuse/addiction disease/disorders.

c. **Office of Public Health (OPH)**CDHH Office that establishes and enforces various legislative health codes.

d. **Office of Planning and Review (OPR)**CDHH office which professionally reviews all floor plans and site plans prior to licensing to assure compliance with state laws and codes.

e. **Program Integrity Section (PRS)**Section of Bureau of Health Services Financing, DHH responsible for investigating fraud and abuse.

**Diagnosis**the act of identifying a disease (AA/DD) by a qualified licensed professional (licensed professional counselor, physician, social worker, advanced practice registered nurse, or psychologist) based on comprehensive assessment of physical evidence [if related to diagnosis], signs and symptoms, clinical and psychosocial evidence, and client/family history.

**Doctorate-Prepared**Can individual who has completed a Doctorate in social work, psychology, or counseling, but has not met the requirements for licensing by the appropriate state board.

**Exploitation**Act or process to use (either directly or indirectly) the labor or resources of a client for monetary or personal benefit, profit, or gain of another individual or organization.

**Facility**Provider of services, including all employees, consultants, managers, owners, and volunteers as well as premises and activities.

**Joint Ventures**Facilities funded/operated by both public and private sources. Joint ventures are classified as private entities.

**LSBCSAC**Louisiana State Board Certified Substance Abuse Counselor.

**Masters-Prepared**Can individual who has completed a Masters Degree in social work or counseling, but has not met the requirements for licensing by the appropriate state board.

**Medication Administration**Preparation and giving of legally prescribed individual dose to client; observation and monitoring of client/client response to medication.

**Medication Dispensing**Compounding, packaging, and/or giving of legally prescribed multiple doses to client.

**Medication-Prescription (Legend)**Medication that requires an order from a licensed practitioner and that can only be dispensed by a pharmacist on the order of a licensed practitioner and requires labeling in accordance with R.S. 37:1161, et seq.

**Medication-Nonprescription**Medication which can be purchased over-the-counter without a licensed practitioner's order.

**Minor**Any person under the age of 18.

**Office of State Fire Marshal (OSFM)**Establishes and enforces various legislative building codes.

**Off-Site Operation**Either autonomous or semi-autonomous, that is related to parent facility and located in same or adjacent parish.

**On Call**Immediately available for telephone consultation and less than one hour from ability to be on duty.

**On Duty**Scheduled, present, and awake at the site to perform job duties.

**Primary Prevention**Focus on reducing the onset of incidences (rate of occurrences) of alcohol, tobacco, and other drug (ATOD) use by non-users, preventing the development of ATOD use problems, and enhancing individual strengths as an inoculant against ATOD use.

**Program**Ca specific group of therapeutic services designed to deliver treatment/prevention to a defined client population.

**Public**Owned and operated by federal, state, or local government.

**Sexual Exploitation**Ca pattern, practice, or scheme of conduct that can reasonably be construed as being for the purpose of sexual arousal or gratification or sexual abuse of any person.

**Site/Premises**Ca single identifiable geographical location owned, leased, or controlled by a facility where any element of treatment is offered or provided. Multiple buildings may be contained in the license only if they are connected by walk-ways and not separated by public street or have different geographical addresses.

**Staff**Cindividuals who provide services for the facility in exchange for money or other compensation, including employees, contract providers, and consultants.

**Standards**Cpolicies, procedures, rules, and other guidelines (i.e., standards of current practice) contained in this Chapter for the licensing and operation of substance abuse/addiction treatment facilities.

**Substance Abuse/Addiction Treatment/Prevention Facility**Any facility which presents itself to the public as a provider of services related to prevention and/or treatment of the abuse/addiction of controlled dangerous substances, drugs or inhalants, alcohol, problem or compulsive gambling, or a combination of the above. Facility shall be licensed to provide treatment to clients diagnosed with abuse/addiction disease/disorders (AADD) and provide support and prevention intervention to families, the public, and to those individuals identified as having greater than normal risk for developing abuse/addiction disease/disorders.

**Supervision**Coccupational oversight, responsibility and control over employee(s)/service delivery by critically watching, monitoring, and providing direction.

**Treatment Level**Ca group of treatments/services designed to positively impact a specific type/degree of abuse/addiction.

**Unethical Conduct**Cconduct prohibited by the ethical standards adopted by DHH, state or national professional organizations or by a state licensing agency.

**Unprofessional Conduct**Any act or omission that violates commonly accepted standards of behavior for individuals or organizations.

**Variance or Waiver**Cadministrative decision by HSS or DHH secretary or designated personnel qualified to make the decision that failure (for limited time period), to meet a Minimum Standard cannot potentially cause harm to any client/citizen or interfere with quality treatment. Facility shall post all variances/waivers in conspicuous place.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1057.1-9, redesignated R.S. 40:1058.1-9.

HISTORICAL NOTE: Promulgated by Health and Human Resources Administration, LR 2:154 (May 1976), amended by the Department of Health and Human Resources, Office of Hospitals, Bureau of Substance Abuse, LR 3:16 (January 1977), amended by the Department of Health and Human Resources, Office of the Secretary, Division of Licensing and Certification, LR 12:26 (January 1986), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 26:1451 (July 2000).

### §7403. Licensing

A. General. Any facility which presents itself to the public as a provider of services related to the prevention

and/or treatment for abuse/addiction of controlled dangerous substances, drugs or inhalants, alcohol, problem or compulsive gambling, or a combination of the above is required to have a valid and current license prior to admitting any client.

B. Compliance. Each licensed facility must comply with the minimum requirements in order to remain licensed. In addition, each facility is required to have a copy of the minimum standards on-site, and all administrative and professional staff should be familiar with contents of this rule.

#### C. Exemptions

1. Hospitals, nursing homes, and federally-owned facilities are exempt from licensure.

2. State facilities are exempt from the following general requirements:

- a. licensure fees;
- b. budgetary/audit requirements;
- c. disclosure of ownership forms;
- d. planning, location requirements;
- e. governing body regulations; and
- f. liability insurance.

D. Adherence Requirements. Each facility shall adhere to requirements throughout the period of licensure. Any period of non-compliance may result in sanctions, denials, or corrective action.

E. Variance. Any variance granted by HSS shall:

1. be in writing;
2. cannot be retroactive;
3. be granted for a specific period of time, but less than one year; and
4. be listed on the facility license.

F. Off-sites. Related facilities may share a name with the primary facility, if a geographic indicator is added to the end of the facility name. All facilities must have a separate license from that issued to the parent facility.

1. Additional locations shall operate in the same or adjacent parish and shall meet the following conditions:

- a. OSFM/OPH approval;
- b. adequate professional staff to comply with all standards;
- c. adequate administrative and support staff to comply with all standards;
- d. personnel records may be housed at parent facility;
- e. client records may be housed at parent facility;
- f. telephone system to forward calls to parent facility;
- g. initial survey is required prior to opening, but annual/renewal survey may be by attestation.

2. License to operate at off-site location will be issued from HSS when the following criteria are met:

- a. adequate professional staff to operate at two or more locations;
- b. identified need for services by OAD; and
- c. submission of request for opening off-site and completed application and payment of applicable fees.

3. Treatment services shall be equal at all locations, however, off-site facilities may refer clients to parent facility to supplement core functions only when client is not expected to endure excessive expense or hardship to obtain required services.

4. Twenty-four hour off-site facilities shall meet and maintain compliance with all requirements for which the facility license is issued.

5. Exception. Primary Prevention Programs may provide educational services at various public facilities, provided that the primary site is licensed.

G License Designation. A facility shall have written notification of restrictions, limitations, and services available to the public, community, clients, and visitors.

1. Twenty-Four-Hour Facilities. (May be designated for adults, adolescent, or parents/dependent children.)

a. Detoxification Facilities

i. Medically Supported

ii. Non-medical (Social)

b. Primary Treatment Facilities

i. In-patient Treatment

ii. Residential Treatment

c. Community-Based Treatment Facilities

i. Halfway House

ii. Three Quarter House

iii. Therapeutic Community (Long Term Residential)

2. Outpatient Facilities

a. Outpatient Counseling

b. Intensive Outpatient Treatment

c. Opiate Addiction Treatment

3. Primary Prevention Programs (Non-treatment Designation)

a. Youth Based Programs

b. Community Education Only

4. Additional Designations (Conjointly approved by OAD/HSS in writing)

H. Services. The services shall be provided in accordance with license designation.

1. Any additional services provided on the premises shall be identifiable to the public as separate and apart from the licensed program.

2. Clients/families must be notified in writing upon admission when client will be housed in any building not covered in the license issued by DHH/HSS.

I. License Types

1. Full. A full license is issued only to those agencies that are in compliance with the minimum standards and all other licensure requirements. The license is valid until the date of expiration unless revoked or suspended prior to the date of expiration, or denied renewal.

2. Provisional. A provisional license is issued to those facilities that are not in compliance with the minimum standards when the termination of a license will occur if systemic changes fail to correct identified problems, provided that cited deficiencies are not detrimental to the health and safety of clients. A provisional license is valid for six months or until a designated termination date. Any license involved in an appeal process is automatically considered provisional.

J. Display of License. The current license shall be displayed on-site at each facility in full view of all clients and/or visitors. Any license issued by DHH supersedes previously issued licenses issued for the facility to operate under this chapter and deems those previously issued as invalid. Any facility displaying and/or using an invalid or altered license will be sanctioned.

K. Notification of Change Requirements. Any change listed below that is not reported in writing to HSS within 10 days is delinquent and subject to sanction. Written approval of changes by DHH is required to remain in compliance with licensure standards.

1. Change of Ownership

a. Include a copy of bill of sale, licensure fee, disclosure of ownership form, new application form, and information about relocation, name change, etc.

b. License is nontransferrable; new owners must apply for a new license.

2. New Construction and Renovations. All plans must have prior approval of the Office for State Fire Marshal and DHH Office of Planning and Review.

3. Address Change. Change of address requires issuance of replacement license. Prior approval is required, and is based on submitting requested information to HSS.

4. Change of Services. An application packet appropriate to the new service is required. An initial survey may be required prior to issuance of new license at the discretion of HSS.

5. Hours of Operation. Written approval by HSS is required in advance of the change.

L. Cessation of Business. If at any time the facility decides to cease operations then the facility is responsible for surrendering the license and notifying HSS of the date of cessation of services and the permanent location of the records.

1. All active clients and pertinent information shall be transferred/referred to appropriate treatment facilities.

2. Written notification with license shall be sent to HSS within five working days.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1057.1-9, redesignated R.S. 40:1058.1-9.

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#### **§7405. Fees**

A. General. All fees must be submitted to DHH in the form of a company or certified check or money order, and is to be made payable to the Department of Health and Hospitals (DHH). All fees are nonrefundable and nontransferable.

1. Fee Amounts. The current fee schedule is available upon request.

2. Initial Application. The fee for the initial application process and initial licensure shall be submitted prior to consideration of the license application.

3. Annual Renewal. The fee is payable in advance of issuance of a renewal license.

4. Change Fees. A fee must accompany any request requiring the issuance of a replacement license.

B. Late Fees. Any fee for renewal, or any other fee, is delinquent after the due date and an additional fee shall be assessed beginning on the day after the date due. No license will be issued until all applicable fees are paid.

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HISTORICAL NOTE: Promulgated by Health and Human Resources Administration, LR 2:154 (May 1976), amended by the Department of Health and Human Resources, Office of Hospitals, Bureau of Substance Abuse, LR 3:16 (January 1977), amended by the Department of Health and Human Resources, Office of the Secretary, Division of Licensing and Certification, LR 12:26 (January 1986), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 26:1454 (July 2000).

**§7407. Initial Licensure**

A. Application Procedure. This process assures that the facility is capable of organizing, planning and carrying out an operation to provide the 12 core functions of counseling and other therapeutic services as designated on license. The entire application process must be completed within 90 days from the date of the original submission of the application in order to be approved. A completed application packet shall contain:

1. letter of intent that includes:
  - a. proposed date of operation;
  - b. program mission;
  - c. program description;
2. written Plan of Professional Services including a list of the 12 core functions of AA/DD treatment and a facility plan to furnish those services;
3. current application, disclosure forms and other forms with application fee;
4. written approval from the Office of Planning and Review for the proposed facility, if required;
5. a letter-size sketch of the floor plan;
6. jurisdictional approvals as required by:
  - a. Office of Public Health;
  - b. Office of State Fire Marshal;
  - c. municipal zoning and other approvals as applicable;
  - d. others, if necessary, (e.g., State Methadone Authority);
7. proof of general and professional liability insurance of at least \$500,000;
8. governing body information including names, addresses, telephone numbers of each member;
9. disclosure in writing of any financial and/or familial relationship with any other entity receiving third-party payor funds, or any entity which has previously been licensed in Louisiana;
10. organizational chart for all professional level personnel.

B. Exceptions. If a requirement is not applicable to the program being licensed, the applicant may list and mark "not applicable." HSS can assist by telephone, if additional answers are needed.

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HISTORICAL NOTE: Promulgated by Health and Human Resources Administration, LR 2:154 (May 1976), amended by the Department of Health and Human Resources, Office of Hospitals, Bureau of Substance Abuse, LR 3:16 (January 1977), amended by the Department of Health and Human Resources, Office of the Secretary, Division of Licensing and Certification, LR 12:26 (January 1986), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 26:1455 (July 2000).

**§7409. Survey**

A. General

1. All surveys shall be unannounced and may be in conjunction with other agency personnel and/or personnel from other local, state or federal agencies.

2. Any facility that cannot be surveyed when scheduled will be sanctioned unless prior arrangements are approved by HSS and will not be licensed until all fines are paid.

B. Initial

1. On-site survey of all aspects of the operation is required prior to the admission of any client for treatment at the facility.

2. DHH shall determine whether the facility is capable of becoming operational as indicated by compliance with all accepted standards of completed preparations and employment of all personnel, as well as securing all jurisdictional approvals.

3. Facility must become fully prepared for survey within six months of completion of application process.

4. Facility shall be staffed to admit clients and all personnel shall have received orientation.

5. Facility shall be fully prepared to begin admitting clients before requesting an on-site survey.

6. Facility shall meet all requirements of the Minimum Standards.

a. If survey findings indicate that facility has minor violations, a corrective plan of action shall be submitted before issuance of a license.

b. All client oriented corrections shall be completed before DHH issues a license.

c. All unlicensed direct care workers must have criminal history checks with appropriate action taken prior to initial survey.

7. Any facility that is not recommended for licensure following the on-site survey shall be required to submit another application fee and application packet for review prior to requesting a subsequent on-site survey.

8. No client may be admitted until the survey has been completed and facility has been notified that it is approved to admit clients. Health Standards surveyor shall notify the facility verbally as to whether it is appropriate to begin admitting clients or to await further direction by DHH.

C. Annual Survey. An on-site survey of all aspects of the facility is performed annually to assure and promote continuous adherence to standards.

D. Complaint Investigations. DHH shall determine the type and extent of investigation to be made in response to complaints in accordance with R.S. 40: 2009.13, et seq.

1. May be an internal investigation with a report submitted to DHH/HSS.

2. May be on-site focused or complete survey by DHH/OAD and/or DHH/HSS and other local, federal, and state agencies as appropriate.

E. Follow-up Surveys. On-site visit, or request for submission of documentation for desk review to assure that corrective actions have been completed as alleged in the submitted plan of corrections and/or to assure continued compliance between surveys.

F. Survey Results. All survey results become available for public inspection 60 days after the survey or on the date that an acceptable plan of correction is received from the

facility, whichever is sooner. If violations of Minimum Standards are:

1. minor and do not directly involve client care, the facility may be allowed up to 60 days to make all necessary corrections;

2. not minor or if they directly affect client care, adverse action shall be implemented.

G Plan of Corrections. Written allegations of correction are submitted from facility to HSS to describe actions taken by the facility in response to cited violations.

1. Required Components/Elements

a. Actions taken to correct any problems caused by deficient practice directed to a specific client.

b. Actions taken to identify other clients who may also have been affected by deficient practice, and to assure that corrective action will have positive impact for all clients.

c. Systemic changes made to insure that deficient practice will not recur.

d. Quality assurance plan developed to monitor to prevent recurrence.

2. Miscellaneous

a. All components of the corrective action plan must be specific and realistic, including the dates of completion.

b. Plan must be submitted as directed by HSS staff, usually within 10 days of the date of the survey, or the provider may be sanctioned.

c. Corrections must be completed within 60 days of survey unless directed to correct in less time due to danger or potential danger to clients/staff.

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**§7411. Annual License Renewal**

A. License must be renewed at least annually. It is the responsibility of the facility to:

1. request a renewal packet from HSS if one is not received at least 45 days prior to license expiration;

2. complete all forms and return to HSS at least 30 days prior to license expiration;

3. submit annual licensure fee, if required, with renewal packet; and

4. submit proof of insurance with renewal packet.

B. Annual license renewal for Primary Prevention programs may be accomplished by attestation provided that:

1. the facility has had three consecutive years of deficiency-free surveys; and

2. Office for Addictive Disorders recommends attestation in writing.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1057.1-9, redesignated R.S. 40:1058.1-9.

HISTORICAL NOTE: Promulgated by Health and Human Resources Administration, LR 2:154 (May 1976), amended by the Department of Health and Human Resources, Office of Hospitals, Bureau of Substance Abuse, LR 3:16 (January 1977), amended by

the Department of Health and Human Resources, Office of the Secretary, Division of Licensing and Certification, LR 12:26 (January 1986), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 26:1456 (July 2000).

**§7413. Adverse Actions**

A. General. DHH reserves the right to suspend, deny (initial or renewal), or revoke any license at the discretion of the secretary or his/her designee. Facility owners and staff shall be referred to other entities, such as boards or state or federal enforcement agencies, when there is suspicion of illegal, unprofessional or unethical behavior. Any involuntary termination of licensure or voluntary termination to avoid adverse action automatically disqualifies that facility and those associated with the facility from applying for licensure for a period of at least one year.

B. Denial of Initial License. Denial of initial licensure shall be in accordance with R.S. 40:1058.5(A). Additionally, DHH shall not accept application for an additional facility with common owners, managers, or staff unless the original facility is in full compliance for one year without interruption and is not under investigation by any other agency.

C. Revocation or Denial of Renewal of License. License may be revoked or denied for the following nonexclusive reasons: [See also R.S. 40:1058.5(B)]

1. cruelty or indifference to the welfare of the clients;

2. misappropriation or conversion of the property of the clients;

3. violation of any provision of this part or of the minimum standards, rules, and regulations, or orders promulgated hereunder:

a. serving more clients in the facility than authorized by license;

b. repeated failure to adhere to rules and regulations that resulted in issuance of a provisional license or other sanction;

c. serious violation of standards or current professional standards of practice;

d. failure to submit corrective action plans for identified violations;

e. reasonable cause to suspect that client health/safety is jeopardized;

f. reliable evidence that the facility:

i. falsified records;

ii. failed to provide optimum therapy in accordance with current standards of practice; or

iii. has bribed, solicited or harassed any person to use the services of any particular facility;

g. failure to submit required fees in a timely manner;

h. failure to cooperate with survey/investigation by DHH/authorized agencies;

i. failure to employ and utilize qualified professionals;

4. permitting, aiding, or abetting the unlawful, illicit, or unauthorized use of drugs or alcohol within the facility;

5. conviction or plea of nolle contendere by the applicant for a felony. If the applicant is an agency, the head of that agency must be free of such conviction. If a subordinate employee is convicted of a felony, the matter must be handled administratively to the satisfaction of HSS;

6. documented information of past or present conduct or practices of the facility which are detrimental to the welfare of the clients.

D. Provisional License. As described in §7403.

E. Appeals

1. Notice. HHS shall give at least 30 days notice of denial of renewal or revocation of license unless DHH determines that the health and/or safety of clients is in jeopardy. In the event that DHH determines that the health and/or safety of clients is in jeopardy, clients will be removed from the facility immediately. No advance notice will be provided when health and/or safety are involved, and the facility may appeal within 30 days following the removal.

2. Administrative Reconsideration. Request must be submitted in writing to HSS (designee of DHH secretary) within 15 days of receipt of the notice of denial of renewal or revocation.

3. Administrative Appeal. Request must be submitted in writing to DHH, Office of the Secretary within 30 days of receipt of the notice of denial of renewal or revocation. Request for administrative reconsideration does not affect time frames for requesting administrative appeal.

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### **Subchapter B. Core Requirements for All Programs**

#### **§7417. Organization and Administration**

A. Administration Quality and Adequacy

1. Facility administration shall be qualified and adequate to assure adherence to all licensing standards.

2. Qualifications shall be determined by the complexity of the services being provided.

3. Facility compliance with licensing standards shall determine adequacy of available administrative oversight.

4. Facilities shall be organized so that administrative personnel do not perform any programmatic duties and/or make clinical decisions, unless licensed/certified to make clinical decisions.

B. Administrative Records. Record keeping shall be in accordance with accepted standards to assure the development and implementation of facility specific policies and procedures to adhere to all licensing standards.

1. Personnel (staff providing direct care to clients)

a. Annual health screens in accordance with OPH guidelines (includes Dietary workers when applicable).

b. Actual hours of work.

c. Orientation/training/in-services.

d. Disciplinary actions.

e. Results of criminal background checks on all direct care staff.

f. Verification of professional credentials, licensure/certification and renewals.

g. Job descriptions/Performance expectations.

2. Administrative Operations

a. Organizational chart.

b. Mission and description of services.

c. Payment methods in accordance with Wage and Hour Board.

d. Proof of general and professional liability insurance in the amount of at least \$500,000.

e. Projected plan of operations based on the findings of the facility specific to continuous improvement program.

f. Written agreements with other entities to assure adherence to licensing standards and continuity of care.

g. Written designation of facility administrator and clinical services director. Facility may have other job titles as desired, however, the above two positions are required for each facility.

3. Governing Body. All private providers shall have an identifiable governing body composed of adults who have legal authority over the policies and activities of the facility. Responsibilities include:

a. governing of all facility operations;

b. documentation to identify all members including name, address, telephone numbers with current updates as indicated;

c. maintenance of written minutes of all meetings of the governing body, including, but not limited to, date, time, location, participants, topics discussed, decisions reached, and actions taken, committee reports, and any other pertinent information;

d. annual documented review and appropriate actions on all policies, procedures, facility rules, goals, grievances, budget, internal and external evaluations, (including all survey findings);

e. codes of conduct to ensure professional, ethical and legal operations;

f. facility practices that ensure employees have necessary administrative support to provide therapeutic milieu for clients.

C. Ownership. Type of ownership must be identified.

1. Public Government entities (local, state, and federal)

2. Private for profit or nonprofit:

a. individual;

b. corporation (individual, group of individuals, or publicly-owned stock);

c. church;

d. council/organization;

e. joint ventures/contractors.

D. Facility Protocols. Each facility shall establish facility-specific, written policy and implement such policy in these areas.

1. General

a. Procedures to ensure the health, safety, and well-being of clients.

b. Procedures to ensure that clients receive optimum treatment in order to achieve recovery.

c. Criteria to assure access to care without over-utilization of services.

d. Protocols to assure uniform and quality assessment, diagnosis, evaluation, and referral to appropriate level of care.

e. Procedures to assure operational capability and compliance.

f. Procedures to assure that only qualified personnel are providing care within the scope of the core functions of substance abuse treatment.

g. Procedures to assure that delivery of services shall be cost-effective and in conformity with current standards of practice.

h. Procedures to assure confidentiality of client records.

2. Continuous Quality Improvement Program (CQIP). Facility shall:

a. have ongoing programs to assure that the overall function of the clinic is in compliance with federal, state, and local laws, and is meeting the needs of the citizens of the area, as well as attaining the goals and objectives developed from the mission statement established by the facility;

b. focus on improving patient outcomes and patient satisfaction;

c. have objective measures to allow tracking of performance over time to ensure that improvements are sustained;

d. develop/adopt quality indicators that are predictive of desired outcomes or are outcomes that can be measured, analyzed and tracked;

e. identify its own measure of performance for the activities it identifies as priorities in quality assessment and performance improvement strategy;

f. conduct distinct successful improvement activities proportionately to the scope and complexity of the clinic operations;

g. immediately correct problems that are identified through its quality assessment and improvement program that actually or potentially affect the health and safety of the clients;

h. make an aggressive and continuous effort to improve overall performance of clinic and personnel;

i. use the process of improvement (identification of client care and service components; application of performance measures; and continuous use of a method of data collection and evaluation) to identify or trigger further opportunities for improvement; and

j. use annual internal evaluation procedure to collect necessary data to formulate plan and quarterly meetings of staff committee (at least three individuals) to assess and choose which CQIP activities are necessary and set goals for the quarter, to evaluate the activities of the previous quarter, and to implement immediately any changes that would protect the clients from potential harm or injury.

3. Research or Non-traditional Treatment Modalities. Approval for exceptional procedures, treatment modalities, etc., shall be approved in accordance with federal and state guidelines.

4. Operational Requirements. The facility shall:

a. be fully operational for the business of providing substance abuse/addiction prevention/treatment during normal business hours and after hours as indicated/approved on original application or change notification approval;

b. be available as a community resource, and maintain current schedule of area support groups;

c. share space, telephones, or personnel with other entities only in compliance with R.S. 40:2007;

d. have active clients who are receiving services at the time of any survey after the initial survey;

e. be able to accept referrals during hours of operation as specified on licensure application;

f. utilize staff to provide services based on the needs of their current caseload of clients;

g. have required staff on duty at all times during operational hours.

E. Required Facility Reporting. The facility director shall verbally/facsimile report these incidents to HSS within 24 hours of discovery. State-operated facilities are also required to follow OAD reporting policy:

1. fire and/or natural disasters;

2. any substantial disruption of program operation;

3. any death or serious injury of a client that may potentially be related to program activities; and

4. violations of laws, rules, and professional and ethical codes of conduct by facility personnel/volunteers.

F. Required Postings. The facility shall post a legible copy of the following documents in full view of clients, visitors, and employees:

1. the age appropriate Client Bill of Rights;

2. escape routes;

3. facility specific rules and responsibilities and grievance procedure;

4. current license and variances;

5. current activity schedule;

6. current survey findings.

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#### **§7419. Personnel Requirements**

A. Standards of Conduct

1. The facility, and all personnel in accordance within individual professional licensure, shall:

a. protect the health, safety, rights, and welfare of clients;

b. provide services designated on license;

c. adhere to all applicable laws, regulations, policies, and procedures;

d. maintain required licenses, permits and credentials; and

e. adhere to professional and ethical codes of conduct.

2. Neither the facility nor any of its personnel shall:

a. commit an illegal, unprofessional or unethical act;

b. assist or knowingly allow another person to commit an illegal, unprofessional, or unethical act;

c. knowingly provide false or misleading information;

d. omit significant information from required reports and records or interfere with their preservation;

e. retaliate against anyone who reports a violation or cooperates during a review, inspection, investigation, hearings or related activity; or

f. interfere with department reviews, inspections, investigations, hearings, or related activity. This includes taking action to discourage or prevent someone else from cooperating with the activity.

**B. General**

1. Referrals. Facility personnel shall report violations of laws, rules, and professional and ethical codes of conduct to HSS and to appropriate licensing board when applicable. The facility shall maintain records and have written policies governing staff conduct and reporting procedures that comply with this §7419.

2. Staffing. A facility shall employ sufficient and qualified staff to meet the requirements and responsibilities required by licensure as well as the needs of each client being served.

3. Qualifying Experience. Any experience used to qualify for any position must be counted by using one year equals 12 months of full-time work. At no time will any professional staff be considered full time at two facilities.

4. Caseloads. All counselors (including full time, part time, and those who also have other duties) must have caseloads appropriate to available time, which shall be determined by the needs of the active clients and the level of treatment being provided.

5. Multiple Positions. A person may hold more than one position within the facility if that person is qualified to function in both capacities, and the required hours for each job are separate and apart for each position.

6. Credential Verification. Facility administration is responsible for assuring that all credentials are from accredited institutions, legal, and verified to deter the fraudulent use of credentials.

7. Clinical Services Director. A qualified professional supervisor or qualified professional counselor shall be designated, in writing, as responsible for supervising all treatment services and programs.

8. Contract Staff Services. Formal written agreements with professionals or other entities to provide services which may or may not be directly offered by facility staff are required for contract services. Both parties shall review and document review of each agreement annually.

**C. Training**

1. Orientation. Each employee shall complete at least eight hours of orientation prior to providing direct client care/contact. The content of the basic orientation provided to all employees at the time of employment with annual review shall include the following:

- a. policies/procedures and objectives of the facility;
- b. duties and responsibilities of the employee;
- c. organizational/reporting relationships;
- d. ethics and confidentiality;
- e. client's rights;
- f. standards of conduct required by the facility;
- g. information on the disease process and expected behaviors of clients;
- h. emergency procedures including disaster plan, evacuation;
- i. principals and practices of maintaining a clean, healthy and safe environment;
- j. additional information as appropriate to job duties, type of client, etc;
- k. universal precautions;

- l. violent behavior in the workplace;
- m. abuse/neglect;
- n. overview of Louisiana licensing standards;
- o. prevention overview; and
- p. basic emergency care of ill or injured clients until trained personnel can arrive.

2. In-Service. This educational offering shall assist the direct care/contact workers to provide current treatment modalities, and serve as refresher for subjects covered in orientation. Documentation of attendance for at least three hours per quarter is required. Additional educational programs are encouraged.

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**§7421. Personnel Qualifications/Responsibilities**

**A. Qualified Professional Supervisor (QPS)**

**1. Qualifications**

a. The following professionals who are currently registered with their respective Louisiana board:

- i. licensed psychologist;
- ii. licensed clinical social worker;
- iii. licensed professional counselor.

b. The following professionals who are currently registered with their respective Louisiana boards and who can demonstrate two years of professional level counseling experience, and one year of professional level substance abuse counseling, or 90 clock hours (six semester hours) of substance abuse training post-certification, including the twelve core functions from an accredited college or university, or an educational provider approved by DHH may function as QPS. Documentation shall be available from the facility upon request. The professionals eligible to become QPS's are listed below:

- i. board certified substance abuse counselor (BCSAC);
- ii. licensed physician (MD);
- iii. registered nurse (RN);
- iv. board-certified compulsive gambling counselor (BCCGC);
- v. Masters-prepared social worker/counselor;
- vi. Masters-prepared counselor under the supervision of a licensed psychologist, licensed professional counselor (LPC), or licensed clinical social worker (LCSW).

**2. Responsibilities. The QPS shall:**

- a. provide direct client care utilizing the twelve core functions of the substance abuse counseling and/or specific functions related to professional license;
- b. serve as resource person for other professionals counseling substance abuse clients;
- c. attend and participate in care conferences, treatment planning activities, and discharge planning related to primary caseload and/or clients of professionals being supervised;

d. provide on-site and direct professional supervision of treatment and any counselor-in-training, including but not limited to, activities such as individual/group counseling, or educational presentations;

e. provide oversight and supervision of such activities as recreation, art/music, or vocational education, to assure compliance with accepted standards of practice;

f. function as patient advocate in all treatment decisions affecting the client;

g. be designated as the clinical services supervisor unless other QPSs are employed and available at the facility) and/or actively supervise QPC if program does not require full-time supervisor;

h. assure that facility adheres to rules and regulations regarding all substance abuse treatment, e.g., group size, caseload, referrals, etc.;

i. provide only those services which are appropriate to their profession.

#### B. Qualified Professional Counselor (QPC)

1. Qualifications. A QPC is a professional who is employed in the treatment of abuse/addiction disorders and who is currently licensed/certified by the appropriate Louisiana board as one of the following professionals:

a. board certified substance abuse counselor (BCSAC);

b. Licensed clinical social worker (LCSW);

c. licensed professional counselor (LPC);

d. licensed psychologist;

e. licensed physician (MD);

f. registered nurse (RN);

g. board-certified compulsive gambling counselor (BCCGC);

h. Masters-prepared social worker/counselor;

i. Masters-prepared counselor under the supervision of a licensed psychologist, licensed professional counselor (LPC), or licensed clinical social worker (LCSW).

#### 2. Responsibilities. The QPC shall:

a. provide direct care to clients utilizing the 12 core functions of substance abuse counseling and may serve as primary counselor to specified caseload;

b. serve as resource person for other professionals and paraprofessionals in their specific area of expertise;

c. attend and participate in client care conferences, treatment planning activities, and discharge planning;

d. provide on-site and direct professional supervision of any paraprofessional or inexperienced professional;

e. function as the patient advocate in all treatment decisions affecting the client;

f. prepare and write notes/other documents related to client recovery, e.g. assessment, progress notes, treatment plans, etc.; and

g. provide only those services that are appropriate to their profession.

#### C. Board Certified Prevention Specialist (BCPS)

1. Qualifications. Prevention Specialists shall be certified in accordance with requirements promulgated by the LSBCSAC.

#### 2. Responsibilities. Duties include:

a. program coordination;

b. education and training;

c. community organization;

d. public policy;

e. planning and evaluation; and

f. professional responsibility.

#### D. Counselor in Training (CIT)

#### 1. Qualifications:

a. registered with the professional licensing board and in good standing at all times;

b. actively pursuing certification at all times; and

c. designated in writing as CIT by the facility and performing according to a written training plan under the auspices of the facility.

#### 2. Responsibilities. The CIT shall:

a. provide direct client care utilizing the core functions of substance abuse counseling only under the on-site supervision of facility employed QPS/QPC;

b. not identify nor represent himself/herself as counselor;

c. not perform any duties of counselor independently, without on-site supervision of facility employed QPS/QPC;

d. never identify themselves as a consultant to any substance abuse facility.

3. Exceptions. CITs who have documented evidence of at least 40 hours of training (including orientation and the 12 core functions of substance abuse counseling) and 120 hours of direct supervision by QPS/QPC may perform counseling functions when the QPS/QPC is on duty or on-call and available for immediate assistance if needed.

E. Personnel in Training. Includes all students, persons working toward professional level licensing or certification in any profession listed in §7421 B, C, D, or F.

#### 1. Qualifications:

a. current registration with appropriate LA Board when required, and in good standing at all times;

b. actively pursuing professional level preparations at all times; and

c. designated in writing by facility, and performing in accordance with a written training plan under the auspices of the facility.

#### 2. Responsibilities. Duties include:

a. providing direct client care utilizing the standards developed by the professional board, and only under the direct supervision of the appropriate QPC or QPS;

b. providing only those services in which the student has been properly trained and deemed competent to perform by the supervising QPC or QPS.

F. Support Professional Staff. Support professional staff includes employees, consultants, contract employees, or volunteers who provide services in the capacity of their profession, including but not limited to, pharmacists, dietitians, physicians, nurses, social workers, teachers, counselors, or psychologists.

#### 1. Qualifications:

a. currently unencumbered license/registration with appropriate Louisiana Board (may be approved specifically by licensing Board, if encumbered); and

b. a professional as recognized by the certifying entity, rather than assistant, aide, technician, associate, etc.

#### 2. Responsibilities. Duties include:

a. those within their respective board's delineated scope of practice only.

b. in-service, staff training, consultation to paraprofessionals and professionals and direct supervision, as needed to improve the overall quality of care being provided.

**G. Volunteer**

1. Qualifications. Volunteers must be:
  - a. appropriately screened and supervised to protect clients and staff;
  - b. oriented to facility, job duties, other pertinent information;
  - c. appropriately trained to meet requirements of duties assigned;
  - d. given a job description or written agreement; and
  - e. identified as volunteers.
2. Responsibilities. Duties include:
  - a. direct care activities only when qualified facility personnel present;
  - b. errands, recreational activities;
  - c. individual assistance to support services; and
  - d. other appropriately assigned duties.

**H. Medical Director.** Every facility licensed shall have a designated medical director. Primary prevention programs are not required to designate a medical director.

1. Qualifications. The medical director shall have a current, valid license to practice medicine in Louisiana.
2. Responsibilities. Medical director shall:
  - a. provide services required by facility to meet the Standards;
  - b. provide oversight for facility policy/procedure and staff regarding the medical needs of the clients being served in accordance with the current standards of medical practice; and
  - c. retain ultimate responsibility for directing the specific course of medical treatment for all clients.

**AUTHORITY NOTE:** Promulgated in accordance with R.S. 40:1057.1-9, redesignated R.S. 40:1058.1-9.

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**§7423. Health and Safety**

**A. Infection Control**

1. Facility shall protect staff, clients, and visitors from the potential/actual harm of infectious disease by the following policies and procedures.
  - a. Universal Precautions. Education, practice, and implementation shall be applied.
  - b. Infection control program to report, evaluate, and maintain documentation pertaining to the spread of infectious disease, including data collection and analysis, corrective actions, and assignment of responsibility to designated medical staff person.
  - c. Strict adherence to all sanitation requirements.
2. Facility shall establish and maintain a clean and neat environment by the implementation of the following housekeeping policies and procedures.
  - a. Supplies/equipment shall be available to staff/clients.

b. Consistent and constant monitoring and cleaning of all areas of the facility shall be practiced.

c. Facility may contract for services necessary to maintain a clean and neat environment.

d. Directions shall be posted for sanitizing both kitchen and bathroom areas.

3. Domestic animals shall be:

- a. properly vaccinated; and
- b. managed in a way consistent with the goals of the program and the needs of the client, including those with allergies.

**B. Sanitation**

1. Food and waste shall be stored, handled, and removed in a way that will not spread disease, cause odor, or provide a breeding place for pests.

2. If there is evidence of pests, the facility shall contract for pest control.

3. Poisonous, toxic and flammable materials shall be labeled, stored, and used safely.

**C. Safety**

1. Environmental

a. The entire facility, including grounds, buildings, furniture, appliances, and equipment, shall be structurally sound, in good repair, clean, and free from health and safety hazards.

b. The facility shall comply with Americans with Disabilities Act (ADA).

c. The environment shall enhance client dignity and confidentiality.

d. The facility shall have adequate space, furniture, and supplies for the services described in the program description, including:

i. an adequate number of accessible drinking units;

ii. an adequate number of sanitized non-disposable or disposable hot/cold cups;

iii. clean, comfortable and appropriately furnished areas for various activities.

e. The facility shall have private counseling space. Staff shall have office space that is not required for other simultaneous activities.

f. The facility shall prohibit weapons of any kind on-site.

2. Evacuation/First Aid. The facility shall respond effectively during a fire or other emergency. Every program shall:

a. have emergency evacuation procedures that include provisions for the handicapped;

b. hold fire drills on each shift at least quarterly and correct identified problems promptly;

c. be able to clear the building safely and in a timely manner at all times;

d. post exit diagrams conspicuously throughout the program site;

e. post emergency numbers by all phones; and

f. have adequate first aid supplies that are visible and easy to access at all times.

3. Facility shall take all precautions possible to protect the staff, clients and visitors from accidents of any nature.

4. Facility shall have a written facility specific disaster plan, and staff shall be familiar with the contents of the plan as well as the location.

D. Emergency Care. Outpatient, Prevention and Education Programs may be exempt from these requirements if access to Emergency Medical Services is less than 10 minutes.

1. At least one employee on site at each facility shall be certified in cardiopulmonary resuscitation and airway obstruction treatment and have training in dealing with out-of-hospital accidents and medical emergencies until emergency medical personnel and equipment can arrive at facility.

2. Facilities that have licensed nurses/physicians on duty during all hours of operation are exempt from this requirement.

#### E. Physical Plant Requirements

##### 1. Required Inspections

a. The facility shall pass all required inspections and keep a current file of reports and other documentation needed to demonstrate compliance with applicable laws and regulations. The inspections must be signed, dated, and free of any outstanding corrective actions. The following inspections are required:

- i. annual fire marshal inspection;
- ii. annual inspection of the alarm system by a licensed contractor;
- iii. quarterly fire alarm system test by facility staff;
- iv. annual kitchen inspection by Office of Public Health;
- v. gas pipe pressure test once every three years by the local gas company or a licensed plumber;
- vi. annual inspection and maintenance of fire extinguishers by personnel licensed or certified to perform those duties; and
- vii. regular inspections of elevators.

b. The following documentation shall be on file in facility:

- i. certificate of occupancy as required by local authorities;
- ii. DHH approval of the water supply/system;
- iii. DHH approval of the sewage system; and
- iv. documentation that the liquefied petroleum supply has been inspected and approved.

##### 2. Fire Notification/Protection Systems

a. A fire detection, alarm, and communication system required for life safety shall be installed, tested, and maintained in accordance with the facility's occupancy and capacity classifications.

b. Fire alarm systems shall be installed by agents registered with Office of State Fire Marshal.

c. Alarms shall be loud enough to be heard above normal noise levels.

d. Fire extinguishers shall be mounted throughout the facility as required by code and approved by Office of State Fire Marshal.

i. Each laundry and walk-in mechanical room shall have at least one portable A:B:C extinguisher, and each kitchen shall have at least one B:C fire extinguisher.

ii. Each fire extinguisher shall have the required maintenance service tag attached.

e. Staff shall conduct quarterly inspections of fire extinguishers for proper location, obvious physical damage, and a full charge on the gauge.

##### 3. Exterior Space Requirements. A provider shall:

a. ensure that all structures on the grounds of the facility that are accessible to clients are maintained in good repair and are free from an excessive hazard to health or safety;

b. maintain the grounds of the facility in an acceptable manner and ensure that the grounds are free from any hazard to health or safety;

c. store garbage and rubbish securely in non-combustible, covered containers that are emptied on a regular basis;

d. separate trash collection receptacles and incinerators from client activity areas and locate all containers so as to avoid being a nuisance to neighbors;

e. keep fences in good repair;

f. fence off or have natural barriers around areas determined to be unsafe, including steep grades, cliffs, open pits, swimming pools, high voltage boosters, or high speed roads.

##### 4. Interior Space Requirements

a. Group Rooms. Seating for each client shall be provided with appropriate furnishings.

b. Leisure/Craft Areas. Materials appropriate to the clients being treated at the facility shall be stocked.

c. Bathrooms. Minimum facilities include:

i. adequate operational fixtures to meet Louisiana State Plumbing Code. All fixtures must be functional and have the appropriate drain and drain trap to prevent sewage gas escape back into the facility;

ii. an adequate supply of hot water for the number of clients and the program schedule. Hot water temperature at point of service to client shall be between 105 and 120 degrees Fahrenheit;

iii. toilets shall have seats and be located to allow access without disturbing other clients during sleeping hours and/or treatment sessions;

iv. adequate supply of toilet paper, towels, and soap;

v. doors to allow for individual privacy;

vi. external emergency release mechanism;

vii. safe and adequate supply of cold running water;

viii. safety mirrors attached to the walls at convenient heights and other furnishings necessary to meet the clients' basic hygiene needs;

ix. functional toilets, wash basins, and other plumbing or sanitary facilities which shall be maintained in good operating condition, and shall be kept free of any materials that might clog or otherwise impair their operation.

d. Administrative and Counseling Space

i. Administrative office(s) for records, secretarial work and bookkeeping shall be separate and secure from client areas.

ii. Space shall be designated to allow for private discussions and counseling sessions.

e. Doors and Windows. Outside doors, windows and other features of the structure necessary for safety and comfort of clients shall be secured for safety within 24 hours after they are found to be in a state of disrepair. Total repair should be effected as soon as possible.

i. A provider must have insect screening for all opened windows. This screening shall be readily removable in emergencies and shall be in good repair.

- ii. All doors can be readily opened from both sides.
- iii. All windows open to an outside view or a patio/porch area and are available for use as an alternate means of escape, if needed.
- f. Storage. A provider shall:
  - i. ensure that there are sufficient and appropriate storage facilities;
  - ii. secure all potentially harmful materials.
- 5. Exits
  - a. Exit doors and routes shall be lighted and unobstructed at all times.
  - b. There shall be an illuminated "exit" sign over each exit. Where the exit is not visible, there shall be an illuminated "exit" sign with an arrow pointing the way.
  - c. Rooms for 50 or more people have exit doors that swing out.
  - d. No door may require a key for emergency exit. Locked facilities shall have emergency exit door releases as described in the Life Safety Code and/or approved by the Office of State Fire Marshal.
  - e. Windows shall provide a secondary means of escape.
  - f. Every building shall have at least two exits that are well separated.
  - g. Every multiple-story building shall have at least two fire escapes (not ladders) on each story that are well separated. Fire escapes shall:
    - i. be made of non-combustible material;
    - ii. have sturdy handrails or walls on both sides; and
    - iii. provide a safe route to the ground.
  - h. Stairs and ramps shall be permanent and have non-slip surfaces.
  - i. Exit routes higher than 30 inches (such as stairs, ramps, balconies, landings, and porches) shall have full-length side guards.
- 6. Electrical Systems. All electrical equipment, wiring, switches, sockets and outlets are maintained in good order and safe condition. Any room, corridor, stairway and exit within a facility is sufficiently illuminated.
  - a. The facility shall have adequate lighting to provide a safe environment and meet user needs.
  - b. Lighting shall be provided outside the building and in parking lots.
  - c. Light bulbs shall have shades, wire guards or other shields.
  - d. Emergency lighting shall illuminate "exit" routes.
- 7. Ventilation
  - a. The facility shall not use open flame heating equipment or floor furnaces, unvented space heaters, or portable heating units.
  - b. Occupied parts of the building, including kitchen and laundry areas, shall be air conditioned and temperature should remain between 65 degrees and 85 degrees Fahrenheit.
  - c. The entire facility shall be adequately ventilated with fresh air. Windows used for ventilation shall be screened.
  - d. Provider shall take all reasonable precautions to ensure that heating elements, including exposed hot water

pipes, are insulated and installed in a manner that ensures the safety of clients and staff.

#### 8. Plumbing

- a. Safe, clean, cold drinking water shall be readily available to all clients.
- b. The plumbing systems shall be designed, installed, operated and maintained in a manner that is designed to provide an adequate and safe supply of water for all required facility operations and to facilitate the complete and safe removal of all storm water and waste water.

#### 9. Finishes and Surfaces

- a. Lead-based paint or materials containing asbestos shall not be used.
- b. Floor coverings must promote cleanliness, must not present unusual problems for the handicapped and have flame-spread and smoke development ratings appropriate to the use area (e.g.; client's room versus exit corridor).
- c. All variances in floors shall be easily identified by markings, etc. to prevent falls.

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### **§7425. Rights, Abuse, Exploitation, and Neglect**

**A. Client's Rights.** Involuntary hospitalization/commitment does not mean loss of your rights to make decisions about one's life. The client shall have the right to expect the following inclusive but not exclusive rights:

- 1. assistance with healing of family relationships;
- 2. protection from unsafe and/or unskilled care by any person associated with the facility;
- 3. protection from unqualified persons providing services under the auspices of treatment;
- 4. consideration and respect toward the client, family and visitors when those people treat the facility staff with respect and consideration;
- 5. protection of personal property approved by the facility; and
- 6. protection from retaliation when client exercises his or her rights.

**B. Adult Bill of Rights.** Adults have the right to:

- 1. a humane environment that provides reasonable protection from harm and appropriate privacy for personal needs;
- 2. be free from abuse, neglect, and exploitation;
- 3. be treated with dignity and respect;
- 4. appropriate treatment in the least restrictive setting available that meets individual needs;
- 5. be told about the program's rules and regulations before admission;
- 6. be told before admission:
  - a. the condition to be treated;
  - b. the proposed treatment;
  - c. the risks, benefits, and side effects of all proposed treatment and medication;

d. the probable health and mental health consequences of refusing treatment; and

e. other available treatments which may be appropriate;

7. accept or refuse treatment after receiving the explanation in Paragraph 6 above;

8. change of mind at any time (unless specifically restricted by law);

9. a treatment plan designed to meet individual treatment needs, and the right to take part in developing that plan;

10. meet with staff to review and update the treatment plan on a regular basis;

11. refuse to take part in research without affecting regular care;

12. refuse unnecessary and/or excessive medication;

13. not to be restrained or placed in a locked room by self unless a danger to self or others;

14. have personal information kept confidential and to be told about the times when the information can be released without your permission;

15. communicate with people outside the facility. This includes the right to have visitors, to make telephone calls, and to send and receive sealed mail. This right may be restricted on an individual basis by one's doctor or the professional in charge of the program if it is necessary for treatment or for security, but even then the client may contact an attorney or DHH at any reasonable time;

16. be informed in advance of all estimated charges and any limitations on the length of services;

17. receive an explanation of treatment or rights while in treatment;

18. leave the facility within four hours of requesting release (if individual consented to treatment), unless a physician determines that he or she poses a threat of harm to self and others;.

19. make a complaint and receive a fair response within a reasonable amount of time;

20. complain directly to DHH at any reasonable time;

21. get a copy of these rights before admission, including the address and phone number of DHH;

22. have rights explained in simple terms, in a way that can be understood, within 24 hours of being admitted.

#### C. Abuse, Neglect, and Exploitation

1. Reporting. All allegations of client abuse, neglect, and exploitation shall be reported verbally/facsimile within 24 hours, and confirmed in writing to HSS within seven days.

2. Abuse. Client abuse includes:

a. any sexual activity between facility personnel and a client;

b. corporal punishment;

c. nutritional or sleep deprivation;

d. efforts to cause fear;

e. the use of any form of communication to threaten, curse, shame, or degrade a client;

f. restraint that does not conform with these rules;

g. coercive or restrictive actions that are illegal or not justified by the client's condition taken in response to the client's request for discharge or refusal of medication or treatment; and

h. any other act or omission classified as abuse by Louisiana law.

3. Neglect. Neglect examples include:

a. failure to provide adequate nutrition, clothing, or health care;

b. failure to provide a safe environment free from abuse or danger;

c. failure to maintain adequate numbers of appropriately trained staff;

d. any other act or omission classified as neglect by Louisiana law.

4. Exploitation. Examples of exploitation include:

a. use of a client's personal resources, such as credit card, medical assistance card, or insurance card, to bill for inappropriate service;

b. use of the client's food stamps or other income to purchase food/services used primarily by others;

c. using the client to solicit money or anything of value from the public, or others.

5. Sexual Exploitation. It may include sexual contact, a request for sexual contact, or a representation that sexual contact or exploitation is consistent with or part of treatment.

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### Subchapter C. Children/Adolescent Programs and Primary Prevention

#### §7427. Children/Adolescent Programs

A. General. Provisions in this section apply to facilities that are inpatient, outpatient, community-based, or primary prevention programs when service recipients are under 18 years of age. The following provisions are in addition to listed requirements for programs, and take precedence over conflicting requirements when services are provided to adolescents or children. Specific programs may have additional requirements in addition to those listed in this section.

1. The program lectures, and written materials shall be age-appropriate and easily understood by clients.

2. The program shall involve the adolescent's family or an alternate support system in the process or document why this is not appropriate.

3. Staff shall not provide, distribute, or facilitate access to tobacco products.

a. Staff shall not use tobacco products in the presence of adolescent clients.

b. The staff shall prohibit adolescent clients from using tobacco products on the program site or during structured program activities.

B. Staffing. The following staffing requirements are minimum standards and do not restrict the facility from utilizing additional employees.

1. Any facility employee who provides direct care to children/adolescents shall meet the requirements of the *Louisiana Children's Code Article 116*. Specifically, the

employee may have no documented history indicating the possibility that he/she would endanger the child. Facility shall make every effort to determine criminal history of employees.

2. The facility shall ensure that only qualified professional staff (R.S. 40:1098.2) plan, supervise, or provide education or counseling or training in the emotional, mental health, and substance abuse problems to adolescents.

3. All direct care employees shall have training in human adolescent development, family systems, adolescent psycho-pathology and mental health, substance abuse in adolescents, and adolescent socialization issues.

4. All direct care employees and volunteers shall be trained and competent to use personal and physical restraint.

C. Special Considerations

1. Facilities shall address the special needs of adolescents and protect their rights.

2. Adults and adolescents may be mixed for specific groups or activities when no conflict exists.

3. The facility shall obtain consent for admission and authorization to obtain medical treatment from parent or guardian prior to the time of admission for all clients under the age of majority.

4. If functional status of client is not age appropriate, facility shall provide additional supervision to provide for safety of all clients.

D. Minor's Bill of Rights. In accordance with the *Louisiana Children's Code, Article 116*; the minor has the right to:

1. an attorney and the right to communicate with that attorney in a private place at all times;

2. a copy of client rights in a language that can be reasonably understood;

3. receive and send letters, to receive and make telephone calls, to receive visitors (at least weekly);

4. spend a reasonable amount of money on small items, such as snacks, and soft drinks;

5. wear one's own clothes and keep personal things;

6. have a private space for personal belongings;

7. be disciplined in a way that is appropriate. Restraint and seclusion cannot be used to punish or discipline;

8. medicine that makes one feel better. If the medicine makes the minor feel bad, the individual should tell the nurse, doctor or client advocate;

9. treatment in a place that allows the most freedom possible;

10. treatment plan that is set up to meet individual needs;

11. leave the facility when condition improves enough so that treatment can be received in a less restrictive setting;

12. have a private doctor examine client at his or her own expense.

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**§7429. Primary Prevention Programs**

A. Purpose. Programs are planned, goal-oriented activities designed for the following purpose:

1. promote personal (emotional, intellectual, physical, spiritual and social) growth of individuals; and/or

2. strengthen those aspects of the community environment which preclude, forestall, or impede the development of alcohol and other drug abuse problems.

B. Types. The following are types of prevention programs:

1. youth-based programs; and

2. community education centers. Educational programs provide educational services through qualified personnel for government agencies, community organizations, school systems (public and private), churches, businesses, medical and health systems, professionals and individuals. These types of programs relate to community and personal health issues concerning the prevention of substance use/abuse.

C. Activities/Strategies/Services

1. Activities

a. Information Dissemination. Primarily one-way communication to reach into a community, systematically to identify "at risk" persons and their families, to inform the community of available services, location of needed services, and how to access the system.

b. Education. Primarily two-way communication to improve critical life and social skills, to increase resistance skills, and to improve ability to make judgments regarding the use of alcohol and other drugs.

c. Alternative Activities. Opportunities are provided that exclude the use of alcohol, tobacco, and other drug use.

d. Problem Identification and Referral Activity provides assessment of community's need for primary prevention and/or identification/referral of "at risk" individuals.

e. Community-Based Process. Activities are designed to enhance the ability of the community to prevent substance abuse.

f. Environmental. Establishes or positively impacts written and unwritten community standards, codes and attitudes toward substance use/abuse.

2. Referral Services. Program staff will be trained to recognize the symptoms of substance abuse/addiction and referrals must be made only to appropriately licensed treatment programs.

D. Staffing. The following staffing requirements are minimum standards and do not restrict the facility from utilizing additional employees.

1. All persons providing services to children/adolescents shall meet the criteria in §7417 of this document and the *Louisiana Children's Code, Article 116*. Facility must employ/assign personnel to provide for the safety of the clients during all activities.

2. A BCPS or QPS or QPC shall provide on-site supervision during all group activities.

3. At least one BCPS, QPS, or QPC shall be available on duty for every 25 clients if program is for youth groups; otherwise for events such as community education, no guidelines.

4. Volunteers who work with children/adolescents shall be screened to prevent potential harm or danger to participants.

5. Prevention professional services differ from those of counselor in that prevention professional duties do not include intervention, therefore QPC or QPS professionals may perform duties of the CPS.

E. Client Functional Status. Clients must be appropriate to program design and presentation.

F. Adherence. Programs will adhere to models currently approved by OAD and DHH/HSS to reduce substance abuse and associated problem behaviors. Providers shall adhere to the following:

1. submit all required documentation for initial licensure as required in §7407 Initial Licensure;
2. maintain rosters of all clients with pre/post test scores;
3. provide services during the hours approved at initial licensure and also provide programs after-school, holidays, summer months, and weekends for youth groups;
4. outcomes shall be measured by reasonable criteria related to program goals.
5. Annual evaluations of program effectiveness to document the effect of the program will provide indicators for continuous quality improvement. Programs are exempt from §7417.D.2.

G. Participant Record Requirements. Each youth based group participant record shall include the following:

1. admission and referral information;
2. client/participant information/data, name, race, sex, birth date, address, telephone number, Social Security number, school/employer, and next of kin/emergency contact;
3. medical limitations, such as major illnesses and allergies;
4. attendance, participation in services and/or activities; and
5. a release to obtain emergency care in case of illness or injury.

H. Facility Record Requirements. Facility shall maintain additional records as follows:

1. client/participant roster;
2. activity schedule;
3. pre/post test scores;
4. log of clients referred to or received from facilities for treatment or evaluation; and
5. personnel assignments/actual hours of work.

I. Community Education. Information is provided to the public related to abuse/addiction, either as outreach activities or as a resource center. Each facility shall:

1. employ and utilize BCPS or QPS or QPC;
2. submit the following for initial licensure:
  - a. credentials;
  - b. scheduled activities and locations;
  - c. program descriptions;
  - d. licensure fee with current, complete application;
- and
- e. description of target population(s);
3. provide all services in accordance with accepted standards of professional conduct;
4. maintain roster of participants/attendees, as well as documentation of all services provided;

5. provide a plan for process and outcome evaluation.

J. Special Considerations. All programs that contract with OAD must meet any additional requirements of OAD, and be approved in writing by OAD prior to licensing by HSS.

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#### **Subchapter D. Core Requirements for Treatment Programs**

##### **§7431. Treatment/Detoxification Programs**

A. General. If treating adolescents and/or children, follow §7427 in addition to other requirements.

B. Professional Staffing Standards. The following are the minimum staffing requirements for all treatment/detoxification programs and do not restrict any facility from utilizing additional staff. Specific programs may have additional staffing requirements.

1. Physician. Every licensed treatment or detoxification program shall have a designated medical director, who provides medical oversight of all care provided, participates in the development of policies and procedures of the facility, and provides medical care if needed. The following duties may be performed by a qualified advance practice registered nurse when in collaborative practice with the medical director. Additional duties include, non-exclusively:

- a. writing the admission/discharge orders, when required;
- b. writing/approving all prescription medication orders;
- c. writing and providing education regarding the protocols for administering all medications on-site, including non-prescription medications;
- d. supervising or providing services and care; and
- e. providing consultative and on-call coverage to assure health and safety of clients in the facility.

2. Nursing. Each facility shall have adequate nurses to provide nursing services when indicated by the diagnosis, nursing needs of the clients admitted to the facility, administration of medicines and/or treatments, and general physical health of clients. Adequate shall be defined as having nursing staff available whenever a client has needs requiring professional nursing skills.

3. Pharmacist. Any facility that dispenses/administers prescription medication on-site shall employ adequate staff to assure that any prescription medication administered and/or dispensed on-site shall meet the requirements of R.S. 37:1161 et seq., Facility shall have written agreement with a licensed pharmacist or licensed physician to provide on-site service and consultation and evaluation of medication policy and procedure of facility to dispense prescriptions, reconcile (administration and dispensing) inventories at least every 30 days, and to maintain medication records for at least three years.

4. Qualified Professional Supervisor (QPS). Every facility shall have QPS on-duty during operational hours at least one hour per week per counselor, two hours per week per counselor-in-training, and additionally as indicated by the needs of the active clients. Primary duties include supervising QPC's and CIT's during counseling sessions, treatment planning and counseling for clients who have complex needs/diagnoses. Specific additional requirements for 24-hour facilities are listed in the applicable section.

5. Qualified Professional Counselor (QPC). Each outpatient program shall have full-time QPC on duty during all hours of operation, and as determined by needs of the active clients, on-call after normal business hours. Specific requirements for 24-hour facilities are listed in the applicable section.

C. Treatment/Detoxification Protocols. All services shall be delivered according to a written plan and a posted activity schedule. The treatment program shall:

1. be age and culturally appropriate for the population served;
2. demonstrate effective communication and coordination;
3. provide for appropriate utilization of services;
4. be an environment that enhances the positive self-image of clients and preserves their human dignity;
5. administer/dispense medication safely and legally, only when prescribed or approved by the staff medical doctor or advanced practice registered nurse (APRN);
6. require professional participation in all required components of the treatment program;
7. assure that the hours of scheduled treatment activity meet requirements of the program license; and
8. utilize the 12 core functions of substance abuse counseling and other current standards of practice.

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#### **§7433. Admission, Discharge, or Transfer**

A. Admission Requirements. Initial Assessment and Diagnosis of specific abuse/addictive disorder/disease by the medical director or other licensed qualified professional (physician, advanced practice registered nurse-certified in mental health, licensed social worker, licensed professional counselor or licensed psychologist) as currently defined in the Diagnostic and Statistical Manual for Mental Disorders (DSM).

1. Initial Admission Diagnosis. Process shall contain:
  - a. physical examination within 72 hours when one is indicated by the M.D./nursing assessment/screening process;
  - b. laboratory examinations as required to prevent spread of contagious/communicable disease, and as indicated by physical examination or nursing assessment, including drug screening when history is inconclusive or unreliable;

c. medical/nursing assessment/history and screening interview;

d. psycho-social evaluation. CQPC/QPS shall document a psycho-social history that provides a thorough understanding of the client's history and present status including:

- i. circumstances leading to admission;
- ii. alcohol and other drug use, past and present (including amount, frequency, route of administration, and time/date of last use);
- iii. past psychiatric and chemical dependency treatment;
- iv. significant medical history and current health status;
- v. family and social history;
- vi. current living situation;
- vii. relationships with family of origin, nuclear family, and significant others;
- viii. education and vocational training;
- ix. employment history (including military) and current status;
- x. legal history and current legal status;
- xi. emotional state and behavioral functioning, past and present; and
- xii. strengths, weaknesses, and needs.

e. intake screening to include: vocational, economic, educational, and criminal/arrest information; and

f. appropriate assignment to treatment modality with referral to other appropriate services as indicated.

i. Clients shall have access to HIV counseling and testing services directly or through referral. Such counseling and testing shall be voluntary, anonymous/confidential, and not limited by ability to pay.

ii. The program shall make testing for tuberculosis and sexually transmitted diseases available to all clients unless the program has access to test results obtained during the past year. The services may be provided directly or through referral as long as appropriate follow-up referral/care is also provided.

2. Additional Requirements. Additional admission requirements are:

- a. availability of appropriate physical accommodations;
- b. legal authority or voluntary admission;
- c. availability of professionals to provide services needed as indicated by the initial assessment and diagnosis; and
- d. written documentation that client/family consents to treatment and understands the diagnosis and treatment modality.

3. Client/Family Orientation. Each facility shall provide orientation, confidentially and efficiently, primarily by qualified professional, concerning:

- a. visitation;
- b. family involvement;
- c. safety;
- d. authorization to provide treatment;
- e. potential problems;
- f. projected duration of treatment;
- g. consequences of non-compliance;
- h. treatment methodology; and

i. all pertinent information, including fees and consequences of non-payment of fees.

4. Re-admissions. Each facility shall have written re-admission standards which address criteria, length of stay, authorization to make exceptions, and crisis intervention.

B. Discharge Criteria. Each program shall develop and follow appropriate written criteria to decide when/how clients will be discharged or transferred to another level.

1. Indicators. The criteria shall utilize indicators to determine:

- a. satisfactory completion of the level;
- b. need for referral or transfer to another level or facility; and
- c. when client should be discharged before completing the program.

2. Discharge Plan. A written, client-specific plan to provide reasonable protection of continuity of services, that shall include:

- a. client transfer or referral/assignment to outside resources, continuing care appointments, crisis intervention assistance, and discharge summary;
  - b. documented attempts to involve family or an alternate support system in the discharge planning process;
  - c. planning before the client's scheduled discharge;
  - d. individual goals or activities to sustain recovery;
- and
- e. signature of the client or consenting person/guardian.

3. Discharge Summary. When client is being transferred to another level of treatment, two working days are allowed for completion. In other situations 30 days are allowed. The summary must be written, client specific, and include:

- a. needs and problems identified at the time of admission (may be attached);
- b. services provided;
- c. assessment of the client's progress towards goals;
- d. circumstances of discharge; and
- e. evidence that continuity of care recommended following discharge.

4. Request for Discharge. When such a request is received, the facility shall:

- a. not hold a voluntary client against the consenter/guardian's will;
- b. have written procedures for handling discharges and discharge requests that comply with applicable statutes;
- c. not try to keep a client in treatment by coercion, intimidation, or misrepresentation;
- d. not say or do anything to influence the client's decision that is not justified by the client's condition.

C. Transfer Process. Transfer procedures between two facilities to provide continuum of care which may be based on the compilation of client data rather than completing additional medical history/examination/physician orders, psycho-social assessment, treatment plan, and other pertinent information upon admission to inpatient or outpatient care.

1. Sender requirements:

- a. transfer all client information within two working days of transfer;
- b. notify the receiving facility (in writing) simultaneously with arrival of client any information that

will be needed to care for client before transfer information arrives; and

c. request and receive approval from receiving facility prior to transfer.

2. Receiver requirements:

- a. provide client with orientation to facility; and
- b. update all information received in transfer.

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#### **§7435. Client Records**

A. Client Record Standards. The facility is required to maintain a clinical record according to current professional standards for each client.

1. Safeguards shall be in place to prevent unauthorized access, loss, and destruction.

2. Client record can be copied and/or transferred from one facility to another provided that client signs authorization for transfer of record and provided that confidentiality of information is strictly in adherence with 42 CFR, Part 2.

3. Client records shall be maintained at the facility where the client is currently active and for six months after discharge. Records may then be transferred to a centralized location for maintenance in accordance with standard practice and state and federal laws.

4. Confidentiality. Records shall be:

- a. accessible only to authorized personnel trained in confidentiality and others granted access by legal authority such as surveyors, investigators, etc.;
- b. not shared with any other entity unless approved in writing by client, except in medical emergencies; and
- c. kept in compliance with 42 CFR, Part 2.

5. Record-keeping Responsibility. A trained medical records person or professional shall be designated as responsible for the client records.

B. Contents. Client record shall accurately document treatment provided and client response in accordance with professional standards of practice at all times. This record shall contain all pertinent past and current medical, psychological, social and other therapeutic information.

1. Minimum client record requirements for Treatment/Detoxification Programs.

- a. admission diagnosis and referral information;
- b. client information/data: name, race, sex, birth date, address, telephone number, social security number, school/employer, and next of kin/emergency contact;
- c. screening Csee program specific requirements.
- d. medical limitations, such as major illnesses, allergies; and
- e. attendance, participation in services/activities.

2. Additional Minimum Requirements for Client Treatment Records Contents

- a. Initial assessment and diagnosis. See §7431.C.1.

b. Treatment plan. The plan is a written list of the client's problems and needs based on admission information and updated as indicated by progress or lack of progress. Additionally, the plan shall:

i. contain input from primary counselor and client within 72 hours after admission, then information from other disciplines added as client is evaluated and treated;

ii. be reviewed and revised as required, or more frequently as indicated by client needs;

iii. contain client-specific, measurable goals that are clearly stated in behavioral terms;

iv. contain realistic and specific expected achievement dates;

v. contain how facility will provide strategies/activities to help the client achieve the goals;

vi. be followed consistently by all staff members; and

vii. contain complete, pertinent information related to the mental, physical, and social needs of the client.

c. Diagnostic laboratory and other pertinent information, when indicated.

d. Progress Notes. In accordance with current professional standards of practice, progress notes shall:

i. document implementation of the treatment plan and results;

ii. document services provided to the client. This may be done by filing a copy of the program schedule in the client record and documenting the client's level of participation in the progress notes;

iii. be completed weekly by the QPS/QPC to document progress toward stated treatment plan goals unless client is seen on a less frequent basis in accordance with the treatment plan; and

iv. be verified and co-signed by QPS/QPC when prepared or written by CIT.

e. Client Contact Report. The staff member involved in the incident shall prepare and file a written report.

f. Other pertinent information related to individual client as appropriate.

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#### **§7437. Core Functions/Services**

A. Core Functions. Core functions are: Screening, Intake, Orientation, Assessment, Treatment Planning, Counseling, Case Management, Crisis Intervention, Client Education, Referral, Reports and Record Keeping, and Consultation with Professionals.

1. Assessment-core function in which a counselor/program identifies and evaluates an individual's strengths, weaknesses, problems, and needs for the development of the treatment plan. Collection of data from client and/or family/others sufficient to formulate an

individualized and client-specific treatment plan or referral to appropriate level of care. Any assessment leading to a diagnosis shall be performed by a professional qualified to diagnose.

2. Case Management-core function in which services, agencies, resources, or people are brought together within a planned framework of action toward the achievement of established goals. It may involve liaison activities and collateral contracts with other providers/facilities.

3. Client Education-core function in which information is provided to individuals and groups concerning alcoholism and other drug abuse, positive lifestyle changes, and the available services and resources. Educational group size is not restricted and may be offered as outreach program. Program shall:

a. follow a course outline that identifies lecture topics, activity schedule, and major points to be discussed;

b. include benefits of participation in appropriate self-help groups; and

c. not identify the activity as a counseling session.

4. Client Orientation-core function in which the client is informed regarding:

a. general nature and goals of the program;

b. rules governing client conduct and infractions that can lead to disciplinary action or discharge from the program;

c. availability of services;

d. costs; and

e. client's rights.

5. Consultation with Professionals-core function in which functional relationship with counselors and other credentialed health care professionals is provided as required to assure comprehensive quality care for the client including, but not limited to, treatment of children, adolescents, or clients/family members who have complex problems or who are dually diagnosed with abuse/addiction disorder and mental illness.

6. Counseling (Individual/Group) Services-core function in which appropriate support is provided to the client by those professionals qualified to provide therapeutic services.

a. special skills are used to assist individuals, families, or groups in achieving objectives through:

i. exploration of a problem and its ramifications;

ii. examination of attitudes and feelings;

iii. consideration of alternative solutions; and

iv. decision making and problem solving.

b. counseling Session (individual, group, or family) is a documented interaction between qualified professional personnel and client or client and significant others.

c. all counseling groups shall be homogenous and no more than 12 clients.

d. Counseling sessions shall last at least 30 minutes.

7. Crisis Intervention Services-core function in which appropriate assistance during emergencies including 24-hour telephone coverage by qualified counselor to provide telephone assistance to prevent relapse, to provide referral to other services, and to provide support during related crises. Facilities may have written contract with another facility to provide coverage only if the caller is automatically transferred or given directions to reach professional

assistance, or receive a call from a professional within a 30-minute time frame.

8. Intake-core function in which information is gathered about a prospective client. Information is given to a prospective client about the treatment facility and facility's treatment and services.

9. Referral-core function in which appropriate services not provided by facility are identified, and client/family is assisted to optimally utilize the available support systems and community resources. Facility shall provide appropriate resource information regarding local agencies to client/family upon need/request and/or procedures to access, including but not limited to, vocational services, community services, and organizations to support recovery such as transitional living services, transportation, and vocational services. Additionally, facility will be expected to:

a. provide access to appropriate health care and mental health services;

b. refer pregnant clients who are not receiving prenatal care to an appropriate health care provider and monitor follow-through; and

c. refer clients to ancillary services necessary to meet treatment goals.

10. Reports and Record Keeping-core functions in which results of the assessment and treatment planning are recorded. Written reports, progress notes, client data, and discharge summaries and other client related documentation is recorded in the client record. See §7435.

11. Screening-core function that is the determination of whether a client meets the program's admission criteria. It uses information such as the person's reason for admission, medical and substance abuse history, and other needed information to determine client's need for treatment, and/or appropriateness of admission.

12. Treatment Planning-core function in which the counselor and the client:

a. identify and rank problems needing resolution;

b. establish agreed upon immediate objectives and long-term goals; and

c. decide on a treatment process, frequency, and the resources to be utilized. Documentation of treatment planning process shall be in accordance with current standards of practice.

#### B. Services

##### 1. Toxicology Services

a. Programs are required to have on-site or written agreement for toxicology services with a laboratory with appropriate Clinical Laboratories Improvement Amendments (CLIA) certification for testing.

b. If collection is performed on-site, facility shall have written protocols for collection of specimens in accordance with current standards of practice and have written approval by the testing laboratory.

c. The minimal set of substances required to be screened for toxicology are subject to annual approval by OAD.

2. Contract Services. Programs may use an outside source to provide any of the services listed above, however, the facility retains responsibility for the service.

3. Formal written agreements with professionals or other entities to provide services which may or may not be directly offered by facility staff:

a. are required for contract services;

b. both parties shall review and document review of each agreement annually;

c. the facility retains full responsibility for all services provided by contract, unless client is discharged from original facility and admitted to contract facility;

d. all services provided by contract shall meet the requirements of these standards and be provided only by qualified providers (licensed if required).

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#### Subchapter E. Outpatient Programs

##### §7439. Outpatient Counseling Programs

A. Purpose. Programs provide non-residential treatment services for clients who require on-going support on a regular or irregular basis, such as:

1. continuing care for those who have completed primary treatment and require minimal support to avoid relapse;

2. early intervention for those who have been identified as substance abusers and referred for education, activities, or support services designed to prevent progression of disease;

3. initial point of entry/reentry. Activities related to assessment, evaluation, diagnosis and assignment of level of care are provided, including transfer between facilities and/or treatment modalities, relapse assessment, and assignment to level of care;

4. combination of the above.

Note: Facility license is not required for individual or group practice of licensed counselors/therapists providing the above services under the auspices of their individual license(s).

B. Staffing. All requirements are in addition to §7431.

1. QPS: on-call as needed for crisis intervention.

2. QPC: hours of operation, and on-call as needed for crisis intervention.

3. nursing and pharmacy: not required, unless designated on license.

4. caseload size is based on needs of the active clients to ensure effective, individualized treatment and rehabilitation. Approval by OAD or HSS is required in writing when caseload exceeds 50 active clients. For this standard, *active* is defined as being treated at least every 90 days.

C. Client Functional Status. Clients must be able to function independently in outpatient setting with appropriate support.

D. Special Considerations. When these services are court ordered, facility will provide all services in accordance with these licensing standards, maintain court related information,

and initiate necessary communications to facilitate the court referral process.

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#### **§7441. Intensive Outpatient Treatment Programs**

##### **A. General**

1. All requirements are in addition to core requirements.

2. Outpatient treatment facilities offer increased levels of responsibility for clients to apply knowledge and to practice skills in structured and non-structured settings.

3. Organized and structured day/evening treatment sessions are offered for at least nine hours per week on three or more days per week.

**B. Staffing.** All requirements are in addition to §7431 unless otherwise noted .

1. Supervisor (QPS). Ten hours weekly during hours of operation.

2. Counselor (QPC). Counselor shall be on site during all hours of operation and available for crisis intervention as needed.

3. Caseload. Counselor shall have no more than 25 active clients unless written approval is granted by OAD or HSS. For this standard, *active* is defined as being treated at least every 30 days.

4. Groups (counseling) shall not exceed 12 clients, but may be smaller in keeping with the needs of the clients.

5. Facility may use outpatient counseling standards for those clients who do not receive intensive outpatient treatment, however, the client must meet criteria for functional status for outpatient counseling and be designated as counseling client.

**C. Client Functional Status.** Clients shall be able to function with limited supervision within their existing environment or in environments designed to provide support, but cannot independently maintain stability for at least 72 hours.

**D. Special Considerations.** Treatment plan review/adjustments shall be documented in progress notes weekly by counselor, and by other disciplines as needed to assure continuity of care.

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#### **§7443. Opiate Addiction Treatment Programs**

**A. General.** All requirements are in addition to core requirements.

1. Opiate addiction treatment programs detoxify chronic opiate addicts from opiates and opiate derivatives and maintain the chronic opiate addict utilizing a synthetic narcotic until the client can achieve recovery through a spectrum of counseling and other supportive/rehabilitative services.

2. Programs shall document justification, annually, for any client who continues to require opiate addiction treatment after five years.

3. The goal of all opiate addiction treatment is complete abstinence by client from all addictive substances, other than those prescribed through the treatment plan.

4. Treatment protocols require that facility provide medically-approved and medically-supervised assistance to withdraw from the synthetic narcotic when:

- a. the client requests withdrawal;
- b. quality indicators predict successful withdrawal;
- c. client or payor source suspends payment of fees;

and

d. other events occur as defined in the 21CFR 291.505.

5. Each facility is required to independently meet the requirements of the protocols established by OAD/State Methadone Authority.

6. Any program that fails to maintain any required licensure shall be also terminated immediately.

7. Facility shall get approval from State Methadone Authority prior to submitting application to HSS for initial licensure.

8. Each program shall also comply with requirements of 21 CFR 291.505 unless the comparable state requirement is more stringent.

9. Each client shall have documented evaluation by a physician or advanced practice registered nurse as follows:

a. at least weekly until the client becomes physically stable and has completed at least four weeks of attendance at clinic (at least six days per week); then

b. at least quarterly until the client completes one year in the program.

c. annually thereafter; and

d. any time that client is unstable.

##### **B. Treatment Phases/Specific Requirements**

1. Initial Treatment. Intensive assessment and intervention phase lasting from three to seven days in duration. Services to be provided are:

a. admission verification by physician that treatment is medically necessary as determined by physical examination and medical diagnosis (prior to administering of any medication);

b. individual counseling as indicated by daily nursing assessment;

c. initial treatment plan includes initial dose of medication and plan for treatment of critical health or social issues; and

d. client may not be issued any unsupervised take home dose (until written determination is available) unless specifically ordered by physician; and

e. client orientation.

2. Early Stabilization. Beginning on the third to seventh day of treatment (following initial treatment) through eight weeks duration, the following shall be provided:

- a. frequent monitoring by nurse of the client's reaction to medication;
- b. individual counseling comprised of at least four individual counseling sessions during this phase;
- c. development of treatment plan within 30 days with input by all disciplines, client and significant others; and

d. random monthly drugs of abuse/alcohol screens.

3. Long-term Treatment. This stage follows the end of early stabilization and lasts for an indefinite period of time. Services to be provided are:

a. random monthly drug/alcohol screens until the client has negative drugs of abuse/alcohol screens for one year, then approximately every 90 days. Clients who are allowed six days of take-home medication shall be tested every month;

b. continuous evaluation by the nurse of the client's use of medication/treatment from other sources;

c. documented reviews of the treatment plan every ninety days by treatment team; and

d. progress notes addressing response to treatment at least every 30 days.

4. Withdrawal. Medically supervised withdrawal from synthetic narcotic with continuing care. This service is provided if and when appropriate. Services to be provided are:

a. decreasing the dose of the synthetic narcotic to accomplish gradual, but complete withdrawal, within the tolerance level of the client;

b. counseling of the type and quantity determined by the indicators and the reason for the medically supervised withdrawal from the synthetic narcotic; and

c. discharge planning with continuity of care to assist client to function without support of the medication and treatment activities.

C. Counseling. Type and quantity shall be based on the assessment and recommendations of the treatment team and shall meet the following requirements.

1. Written documentation shall support decisions of the treatment team including indicators such as positive drug screens, maladjustment to new situations, inappropriate behavior, criminal activity, and detoxification procedure.

2. All counseling shall be provided individually or in small (not to exceed 12 clients) homogenous groups provided that group counselor is familiar with all clients and documents all contacts in the client record.

3. Written criteria are used to determine when a client will receive additional counseling and/or when individual take home medication privileges are more stringent than state guidelines.

4. Counseling shall be provided when requested by client/family.

D. Staffing. All requirements are in addition to §7431.

1. Pharmacist. Licensed pharmacist or licensed dispensing physician, in accordance with R.S. 38:1161, et seq., shall:

a. dispense all medications;

b. reconcile administration and dispensing inventory records at least every 30 days; and

c. maintain medication records for at least three years;

d. approve all transport devices for take home medications.

2. Nursing. All medications shall be administered under the supervision of a registered nurse or physician. A licensed practical nurse cannot administer medication unless registered nurse or physician is on duty or on call as defined in §7401.

3. QPS. On-site five hours per week per 100 clients.

4. QPC. One full time for each 50 clients and prorated if more or less active clients. The counselor's caseload is determined by the needs of the clients in the counselor's caseload and the counselor's available time to provide individual and group counseling. Any caseload greater than 50 clients per counselor must have written approval of State Methadone Authority and HSS.

5. Physician. Sufficient hours on-duty and on-call as needed during hours of operation.

E. Client Admission Criteria

1. Facility shall verify that the client:

a. is at least 18 years old, unless the client has parental consent; and

b. meets the federal requirements, including exceptions, regarding determination that client is currently addicted to opiates and has been addicted to opiates for at least one year prior to admission. Exceptions must be approved in writing by DHH.

2. Physician Verification. The physician shall diagnose the client based upon:

a. referring medical history and diagnosis of chronic opiate addiction, as currently defined in the Diagnostic and Statistical Manual for Mental Disorders (DSM);

b. physical examination;

c. confirmed documented history of opiate addiction;

d. needle marks(if indicated);

e. opiate positive drug screens; and

f. early signs of withdrawal.

F. Take-Home Medication Privilege. Determinations shall be made by the treatment team and documented in the client record.

1. Client responsibilities/considerations:

a. negative drug/alcohol screens for at least 90 days;

b. regularity of clinic attendance;

c. absence of serious behavioral problems;

d. absence of known criminal activity;

e. stability of home environment and social relationships;

f. assurance that take home medication can be safely stored;

g. whether the benefit to the patient outweighs the risk of diversion.

2. Exceptions. Each exception must be documented and justified by the physician, approved by the State Methadone Authority and federal agencies as required, then an exception can only be granted by those agencies for emergencies and severe travel hardships.

3. Standard Schedule (if indicated)

a. After 90 days in treatment with clinic attendance at least three times per week, no more than a two-day supply of take-home medication.

b. After two years in treatment with clinic attendance at least two times per week, no more than a three-day supply of take-home medication.

c. After three years in treatment with clinic attendance at least weekly, no more than a six-day supply of take-home medication.

4. Loss of Privilege. Positive drug screens at any time, for any drug other than prescribed, will require a new determination to be made by the treatment team regarding take-home privileges.

5. When the clinic is closed for a legal holiday or Sunday, a take home dose may be dispensed to clients who have attended the clinic at least twice and who have been determined by the nurse to be physically stable and by the counselor to create a minimal risk for diversion.

H. Client Record. Specific additional requirements for documentation include:

1. standards of clinical practice regarding medication administration/dispensing;

2. results of five most recent drug urine screens with action taken for positive results;

3. physical status and use of additional prescription medication;

4. monthly or more frequently, as indicated by needs of client, contact notes/progress notes which include employment/vocational needs, legal and social status, overall client stability; and

5. any other pertinent information.

I. Training. In addition to Orientation as described in §7419, "Staffing Qualifications/Requirements," all direct care employees shall receive training and demonstrate knowledge that includes:

1. symptoms of opiate withdrawal;

2. drug urine screens and collections, policies and procedures;

3. current standards of practice regarding opiate addiction treatment;

4. poly-drug addiction; and

5. information necessary to assure care is provided within accepted standards of practice.

J. Temporary Transfers or Guest Dosing. The facilities involved shall do the following.

1. Receiving facility shall verify dosage prior to administering medication.

2. Sending facility shall verify dosage and obtain approval/acceptance from receiving facility prior to client's transfer.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1057.1-9, redesignated R.S. 40:1058.1-9.

HISTORICAL NOTE: Promulgated by Health and Human Resources Administration, LR 2:154 (May 1976), amended by the Department of Health and Human Resources, Office of Hospitals, Bureau of Substance Abuse, LR 3:16 (January 1977), amended by the Department of Health and Human Resources, Office of the Secretary, Division of Licensing and Certification, LR 12:26 (January 1986), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 26:1471 (July 2000).

### **Subchapter F. Twenty-four Hour Facilities**

#### **§7445. Additional Core Requirements for Twenty-Four Hour Facilities**

##### **A. Physical Plant Requirements**

1. Kitchens. Kitchens used for meal preparations by either staff or clients shall be appropriately sized and provided with the necessary equipment for the preparation, storage, serving and clean-up of all meals provided to the clients/staff. In addition, if clients prepare meals, additional equipment and space will be required. All equipment shall be maintained in working order.

a. Trash containers shall be made of metal or United Laboratories-approved plastic.

b. Trash containers in kitchens and dining area shall be covered.

2. Staff Quarters. Live-in staff shall have adequate, separate living space with a private bathroom (toilet, wash basin, and tub/shower).

3. Leisure. Allotted leisure space shall be adequate for the capacity designated on the license and approved by DHH-Engineering and Planning. Each living unit of any residential facility shall contain a space for the free and informal use of clients. This space shall be constructed and equipped to meet programmatic goals.

4. Dining Area. Space shall be provided that permits clients, staff and guests to eat together in small groups and is clean, well-lighted, ventilated and attractively furnished.

5. Bedrooms. Mobile homes shall not be used for client sleeping areas. No more than four clients may occupy a designated bedroom space unless the floor plan is approved by DHH sections of Engineering and Professional Review, Fire Marshal, OAD and HSS. Sleeping areas shall have at least:

a. eighty usable square feet per person in single-occupancy rooms;

b. sixty usable square feet per person in multiple-occupancy rooms (or fifty square feet per person if bunk beds are used). Bunk beds shall not be used for Inpatient Primary Treatment programs;

c. doors for privacy and a functional window;

d. adequate personal storage space for each client, including space for hanging clothes and adequate drawer space;

e. a ceiling height of at least 7 feet 6 inches in a bedroom space of a size consistent with square footage requirements above, even if part of the room has a ceiling less than 7 feet 6 inches tall;

f. bed of solid construction, appropriate to size and age of client, that has a clean, comfortable, non-toxic fire-retardant mattress that fits bed. Cots or other portable beds are to be used in emergencies only;

g. clean sheets, pillow, bedspread and blanket provided by the facility as needed or requested by the client unless the request is unreasonable. All linens must be in good repair and systematically removed from use when no longer usable;

h. enough room above the uppermost mattress of any bed to allow the occupant to sit up;

i. a door/escape window leading directly to the outside of the building.

6. Bathrooms. There shall be at least one sink, one tub or shower, and one toilet for every eight residents.

a. Showers and tubs shall have no-slip surfaces and curtains or other safe enclosures.

b. Items required for personal hygiene shall be provided in facilities unless clients are already in possession of such items.

7. Miscellaneous

a. Personal appliances shall be in good working order and inspected for safety hazards.

b. All clients shall have access to laundry services at reasonable cost or properly maintained laundry facilities.

8. Recreational Equipment. All 24-hour treatment facilities shall have access to reasonable outdoor recreational space and suitable recreational equipment.

9. Vehicles. Transportation shall be provided in a safe and reliable vehicle that is properly licensed, insured, and inspected, and driven by an appropriately licensed person. Vehicles must be adequately insured and operated in accordance with all applicable laws and regulations.

B. Dietary Services. Services are provided on-site under the direction of a qualified dietitian, who is available for telephone consultation whenever client is admitted and has physician orders for dietary restrictions/supplements.

1. General Requirements. The facility shall provide:

a. meal break after five consecutive hours of scheduled activities;

b. an OPH approved kitchen with continuous conditions/procedures to maintain all foods at temperatures and under conditions to assure safe, sanitary handling;

c. nutritious meals of adequate quality and quantity to meet the needs of each client, including religious and dietary restrictions;

d. at least three meals daily, with no more than 14 hours between any two meals;

e. at least an evening snack;

2. Dietitian. The dietitian shall:

a. approve menus and provide written guidelines for substitutions in advance;

b. provide staff in-service training as needed to assure quality meal service;

c. provide information to professional staff regarding dietary needs of specific clients and be available for consultation when necessary.

3. Facility. The facility shall:

a. serve meals in a relaxed atmosphere that promotes utilization of newly learned skills in socialization and communication;

b. maintain sanitation of dishes;

c. ensure that all dishes, cups and glasses used by clients are free from chips, cracks or other defects; and

d. ensure that animals are not permitted in food storage, preparation, and dining areas.

4. Responsibility. Facility retains responsibility to assure that meal preparation/service with client participation meets all requirements listed above and to supervise adequately to ensure compliance.

a. The program shall define duties in writing and have written instructions posted or easily accessible to clients.

b. If menu planning and independent meal preparation are part of the client's treatment program, a licensed dietitian shall:

i. approve the client training curriculum; and

ii. provide training or approve a training program for staff who instruct and supervise clients in meal preparation.

5. Contract Services. Meal preparation/service may be provided by contract service. However, facility is responsible for ensuring that all standards above are met.

C. Adolescent/Children Requirement

1. Staffing. All requirements are in addition to §7431.

a. Twenty-four-hour facilities require that the qualified professional counselor ratio to clients shall be no higher than 1:8 during waking hours. A minimum of two staff persons shall be present at all times. A qualified professional counselor shall be on call at all times. Program sponsored activities away from the facility require staff to client ratio no higher than 1:5 with a minimum of two adults at all times.

b. Clients shall be under direct supervision at all times.

i. Onsite, staff shall be readily available at all times, preferably within eyesight or hearing distance. If clients are not within eyesight, staff shall conduct visual checks at least once every hour, including bed checks.

ii. Offsite, clients shall be within eyesight at all times.

2. Educational Resources. Programs for school age children shall provide Department of Education-approved opportunity for clients to maintain grade level and continuity of education during any treatment lasting longer than 14 days unless treatment occurs during school vacation.

3. Physical Plant

a. Residential facilities shall have separate bedrooms and bathrooms for adults and adolescents and for males and females.

b. Adults and adolescents shall not be housed in the same area.

4. Family Communications. The facility shall allow regular communication between an adolescent client and the client's family and shall not arbitrarily restrict any communications without clear, written, individualized clinical justification documented in the client record.

D. Dependent Care. A program that designed to provide substance abuse treatment to mothers with dependant children who remain with parent while the parent is in treatment.

1. Treatment Services

a. Weekly individual and group counseling or family therapy shall be conducted by qualified professional with appropriate experience.

b. Parenting classes shall be provided weekly. Attendance is required.

c. The program shall address the specialized needs of the parent and include services for children.

d. Education, counseling, and rehabilitation services shall address:

i. the effects of chemical dependency on a woman's health and pregnancy;

ii. parenting skills; and

iii. health and nutrition.

e. The program shall have a procedure to regularly assess parent-child interactions. Any identified needs shall be addressed in treatment.

f. Program staff shall provide access to family planning services.

2. Staffing. All requirements are in addition to §7431.

a. Qualified trained professionals shall provide constant supervision appropriate to age of each child.

b. The program shall provide or arrange for child care with a qualified provider while the parent participates in treatment activities. Before supervising children independently, the provider shall have infant CPR certification and at least eight hours training in the following areas:

- i. chemical dependency and its impact on the family;
- ii. child development and age-appropriate activities;
- iii. child health and safety;
- iv. universal precautions;
- v. appropriate child supervision techniques; and
- vi. signs of child abuse.

c. Every children's program shall have an employee or consultant who is available to provide staff training, evaluate effectiveness of direct care staff, and plan activities, etc. for at least one hour per week per child. This employee shall meet the following educational requirements:

- i. ninety clock hours of education and training in child development and/or early childhood education; and
- ii. one year of documented experience providing services to children.

d. When staff are responsible for children, the staff-to-child ratio shall not exceed 1:3 for infants (18 months and younger) and 1:6 for toddlers and children. Clients shall not supervise another parent's children without written consent from the legal guardian and staff approval.

3. Special Considerations

a. Staff shall not allow anyone except the legal guardian or a person authorized by the legal guardian to take a child away from the facility. If an individual shows documentation of legal custody, staff shall record the person's identification before releasing the child.

b. Facility shall have written policy/procedure regarding parent abuse and/or neglect of a child.

c. Residential programs shall not accept dependents over the age of 12 without specific variance approval of OAD and HSS.

d. Children over the age of 6 shall not share a bedroom with a member of the opposite sex who is not in the child's immediate family.

e. The program shall ensure that children are directly supervised by parents or qualified providers at all times.

f. The program shall have a written policy and a current schedule showing who is responsible for the children at all times.

g. The daily activity schedule shall include a variety of structured and unstructured age-appropriate activities.

h. The program shall provide a variety of age-appropriate equipment, toys, and learning materials.

i. School age children shall have access to school.

j. Standards protecting the health, safety, and welfare of clients also apply to their children.

k. Behavior management shall be fair, reasonable, consistent, and related to the child's behavior. Physical discipline is prohibited.

4. Safety Practices

a. The evacuation procedures shall include provisions for children approved by the fire marshal.

b. The program shall not allow children to use:

- i. climbing equipment or swings on or near concrete or asphalt;
- ii. toys that explode or shoot things;
- iii. other sharp or dangerous items; or
- iv. toys and equipment in disrepair.

c. The program shall have safeguards to prevent children from using toys that are dangerous because they are not age-appropriate.

d. The program site shall meet the additional physical plant requirements as required for children.

5. Health Practices

a. The program shall have procedures for isolating parents and children who have communicable diseases and providing them with appropriate care and supervision.

b. The program shall keep current immunization records for each child at the program site.

c. The program shall obtain a consent to obtain emergency medical care for each child at admission.

d. Each child shall have an assessment by a medical doctor and/or advanced practice registered nurse within 96 hours of admission. Copies of an assessment performed up to seven days before admission are deemed to meet this requirement.

e. The program shall provide potty chairs for small children and sanitize them after each use.

f. The program shall provide age-appropriate bathing facilities. Infants shall not be bathed in sinks.

g. Staff, volunteers, and parents shall use universal precautions when caring for children other than their own.

h. The program shall ensure that children are clean and appropriately dressed.

i. Staff shall check all diapers frequently, change without delay, and dispose of the diapers in a sealed container and sanitize the changing area.

j. The program shall provide an adequate diet for childhood growth and development, including two snacks per day.

k. Children's medication shall be given according to the label by the parent or a licensed health professional. The facility shall obtain written consent from the parent to administer the medication, as required. The facility shall assume full responsibility for the proper administration and documentation of medication.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1057.1-9, redesignated R.S. 40:1058.1-9.

HISTORICAL NOTE: Promulgated by Health and Human Resources Administration, LR 2:154 (May 1976), amended by the Department of Health and Human Resources, Office of Hospitals, Bureau of Substance Abuse, LR 3:16 (January 1977), amended by the Department of Health and Human Resources, Office of the Secretary, Division of Licensing and Certification, LR 12:26 (January 1986), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 26:1473 (July 2000).

**§7447. In-patient Detoxification Programs**

A. Types. All requirements are in addition to core requirements.

1. Medically Supported. Professional medical and nursing coverage available as determined by the needs of clients admitted for detoxification in a non-hospital residential setting.

2. Non-medical. Semi-skilled observation, monitoring and treatment by trained para-professionals, for those clients who have been medically approved, and whose detoxification process can be predicted.

NOTE: Medical detoxification is not covered under this licensure as it involves professional level continuous observation, monitoring and treatment for those clients whose detoxification process cannot be predicted due to unstable physical condition or other relevant conditions. Louisiana has only hospital-affiliated medical detoxification programs.

B. Staffing. All requirements are in addition to §7431 unless otherwise noted.

1. Medically Supported Detoxification. Facility shall have qualified professional medical, nursing, and other support staff necessary to provide services appropriate to the needs of clients being admitted to the program.

a. QPS: 10 hours per week per 10 clients.

b. QPC: 40 hours per week per 10 clients-may be combination of two or more professional disciplines.

2. Non-medical Detoxification-personnel shall consist of professional and other support staff who are adequate to meet the needs of the clients admitted to the facility.

a. QPS: available by telephone for consultation.

b. QPC: 40 hours per week per 25 clients-may be combination of two or more professional disciplines.

3. Designated medical director may be consultative only.

C. Emergency Admissions. The admission assessment process may be delayed only until the client can be interviewed, but no longer than 24 hours unless seen by a physician. Facilities are required to orient direct care employees to monitor, observe and recognize early symptoms of serious illness and to access emergency services promptly.

D. Minimum Standards of Practice

1. History. The program shall obtain enough medical and psycho-social information about the client to provide a clear understanding of the client's present status. Exceptions shall be documented in client record.

2. Medical Clearance/Screening

a. Medically Supported. Medical history and physical examination completed during the 24 hours preceding admission is acceptable, if it is approved by the program's physician or advanced practice nurse. A medical history shall be completed within 24 hours and a physician's examination within 72 hours, unless emergency occurs.

b. Non-medical. Medical screening upon arrival, by First Responder, or equal as reflected in §7423, "Health and Safety," with telephone access to RN or MD for instructions for the care of the client.

3. Toxicology/Drug Screening

a. Medically Supported. Physician may waive drug screening if and when client signs list of drugs being abused and understands that his/her dishonesty could result in severe medical reactions during detoxification process.

b. Non-medical. Clients who require drug screening shall be transferred to Medically Supported or Medical Detoxification Program until stabilized.

4. Stabilization Plan. Qualified professional shall identify the client's short term needs based on the detoxification history, the medical history, and the physical examination, if available and prepare a plan of action until client becomes physically stable.

5. Detoxification Plan

a. Medically Supported. The detoxification plan shall be reviewed and signed by the physician and the client, and shall be filed in the client's record within 24 hours of admission with updates as needed.

b. Non-medical. The detoxification plan shall be reviewed and signed by the counselor and the client, and shall be filed in the client's record within 24 hours of admission with updates as needed.

6. Detoxification Notes. The program shall implement the detoxification plan and document the client's response to and/or participation in scheduled activities. Notes shall include:

a. the client's physical condition, including vital signs;

b. the client's mood and behavior;

c. client statements about the client's condition and needs; and

d. information about the client's progress or lack of progress in relation to detoxification goals; and

e. additional notes shall be documented as needed.

7. Physicians' Orders. When applicable.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1057.1-9, redesignated R.S. 40:1058.1-9.

HISTORICAL NOTE: Promulgated by Health and Human Resources Administration, LR 2:154 (May 1976), amended by the Department of Health and Human Resources, Office of Hospitals, Bureau of Substance Abuse, LR 3:16 (January 1977), amended by the Department of Health and Human Resources, Office of the Secretary, Division of Licensing and Certification, LR 12:26 (January 1986), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 26:1476 (July 2000).

**§ 7449. Primary Residential Treatment Programs**

A. General. All requirements are in addition to core requirements. Programs shall include:

1. continuous monitoring, observation, and treatment modalities using the 12-step program design;

2. at least 25 hours of structured treatment activities per week including counseling and educational activities. At least three additional hours must be organized social and/or recreational activities.

B. Staffing. All requirements are in addition to §7431, with the exception of a pharmacist.

1. QPS shall be on duty as needed, but at least 10 hours per week to assure close supervision and individualized treatment.

2. QPC shall be on-duty whenever counseling is being provided. If counseling is needed after customary hours, counselor shall be available to be on-duty.

3. Caseload shall not exceed 1:15. Size of counseling groups shall be determined by the needs of clients, but shall not exceed 12 clients.

C. Client Functional Status. Client shall be medically/mentally stable and/or without conditions other

than AA/DD that require daily or more frequent monitoring, medications or treatments.

D. Special Requirements. Weekly treatment plan review with documentation by all appropriate disciplines at least once during the first two weeks of treatment.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1057.1-9, redesignated R.S. 40:1058.1-9.

HISTORICAL NOTE: Promulgated by Health and Human Resources Administration, LR 2:154 (May 1976), amended by the Department of Health and Human Resources, Office of Hospitals, Bureau of Substance Abuse, LR 3:16 (January 1977), amended by the Department of Health and Human Resources, Office of the Secretary, Division of Licensing and Certification, LR 12:26 (January 1986), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 26:1476 (July 2000).

#### **§7451. Inpatient Primary Treatment**

A. General. All requirements are in addition to core requirements. Programs shall include:

1. continuous monitoring, observation, and treatment modalities using the twelve-step program design or other models by appropriate medical and psychiatric support personnel;

2. at least 25 hours of structured treatment activities per week including counseling and educational activities. At least three additional hours must be organized social and/or recreational activities; and

3. non-acute therapeutic regime including medical and psychiatric care, as needed.

B. Staffing. All requirements are in addition to §7431.

1. QPS: 15 hours per week per 25 clients to also provide therapy.

2. QPC: 40 hours per week per 15 clients.

3. Caseload shall not exceed 1:12 unless prior approved by OAD and HSS.

4. Nursing. Registered nurse is required at least 40 hours per week per 50 clients. Additionally, nursing functions may be supplemented by licensed practical nurses, if a registered nurse or physician is on-duty/on-call in accordance with §7401.

C. Client Functional Status. Clients may require psychiatric and/or medical/nursing care in addition to substance abuse services. Facility may utilize tiered system with client progression to Residential Treatment level of care, however, client must meet the functional status requirements and the facility must designate.

D. Special Requirements

1. Weekly treatment plan review shall be documented by all disciplines involved in care of client to assure continuity of care.

2. Emergency Power. Facilities with capacity greater than 50 clients shall have a reliable, adequately sized emergency power system. The emergency power system is powered by a generator set or battery system, where permitted, to provide power during an interruption of normal electrical service.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1057.1-9, redesignated R.S. 40:1058.1-9.

HISTORICAL NOTE: Promulgated by Health and Human Resources Administration, LR 2:154 (May 1976), amended by the Department of Health and Human Resources, Office of Hospitals, Bureau of Substance Abuse, LR 3:16 (January 1977), amended by the Department of Health and Human Resources, Office of the Secretary, Division of Licensing and Certification, LR 12:26

(January 1986), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 26:1477 (July 2000).

#### **§7453. Community-Based Programs**

A. General. All requirements are in addition to core requirements. Programs shall include:

1. transitional living, support and counseling, room and board, social and recreational activities and vocational opportunities;

2. structured, drug-free environment to allow client to maintain or to improve upon the gains made during prior treatment or currently being made in treatment;

3. opportunities for the client to focus on re-socialization and to gradually resume responsibilities associated with independent living; and

4. provision of services in halfway and three quarter houses.

B. Staffing. All requirements are in addition to §7431.

1. QPS: available by telephone for consultation.

2. QPC: counselor must be on-duty when majority of clients are awake and on-site.

Caseload shall not exceed 1:25 unless prior approved by OAD and HSS.

3. House Manager. non-treatment, direct care person who supervises activities of the facility when the professional staff is on call, but not on duty. This person is required to have adequate orientation and skills to assess situations related to relapse and to provide access to appropriate medical care when needed.

C. Client Functional Status. Clients shall be capable of increasing life responsibilities or be additionally enrolled in primary treatment. If clients are admitted who are also receiving primary treatment, then facility shall meet requirements of Residential Treatment and facility is expected to employ additional professional staff as needed.

D. Special Considerations. Treatment plan review shall be documented in progress notes monthly by all disciplines involved in care of client to assure continuity of care.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1057.1-9, redesignated R.S. 40:1058.1-9.

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#### **§7455. Therapeutic Community (Long Term Residential)**

A. General. All requirements are in addition to core requirements. Facilities shall provide:

1. highly structured environments designed to treat those clients who have demonstrated a pattern of recidivism or a need for long term residential treatment;

2. graduated levels of increasing responsibility, functional capacity, autonomy, privilege, and authority to promote emotional and interpersonal growth through experience or expectation, accountability, support, evaluation, and both favorable and unfavorable consequences for behavior.

B. Staffing. All requirements are in addition to §7431.

1. QPS: additionally, five hours per week to provide supervision and individual treatment as indicated.
2. QPC: 40 hours per week per 20 clients.
3. Caseload-not to exceed 1:20 unless prior approval granted by OAD and HSS.
4. Senior Clients may be utilized as volunteers to assist in the recovery process, provided that facility staff is on-site and immediately available if needed.

C. Client Functional Status. Upon admission, client must require constant supervision and monitoring to maintain stability.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1057.1-9, redesignated R.S. 40:1058.1-9.

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David W. Hood  
Secretary

0007#047

## RULE

### Department of Health and Hospitals Office of Management and Finance

#### Health Care Services Provider Fees (LAC 48:I.4001-4011)

The Department of Health and Hospitals, Office of Management and Finance adopts LAC 48.I.Chapter 40 pursuant to R.S. 46:2601-2605 and the Administrative Procedure Act, R.S. 49:950 et seq. This rule amends and repromulgates regulations pertaining to the administration of fees; and the rights and obligations of those on whom such fees are imposed as previously published in the *Louisiana Register* (Vol.19No.3, Vol.20No.1 and Vol.20No.10). The department is adding a procedure to be used in estimating the amount of fees due in cases of failure to report, and is revising the procedures for collecting delinquent fees to insure more prompt collection. The department is also revising the nonsufficient fund check regulation in order to avail itself of the full benefits of R.S. 9:2782.

LAC 48.Chapter 40 is published in its entirety to establish uniformity and to properly codify this Chapter for inclusion in the Louisiana Administrative Code and supersedes all previous rules adopted in connection with the subject of provider fees.

#### Title 48

#### PUBLIC HEALTHB GENERAL

#### Part I. General Administration

#### Subpart 1. General

#### Chapter 40. Provider Fees

#### §4001. Specific Fees

##### A. Definition

*Quarter*C for purposes of this Chapter, *quarters* shall be constituted as follows:

First Quarter	December, January, February
Second Quarter	March, April, May
Third Quarter	June, July, August
Fourth Quarter	September, October, November

##### B. Nursing Facility Services

1. A bed fee shall be paid by each facility licensed as a nursing home in accordance with R.S. 40:2009.3 et seq., for each bed utilized for the provision of care on a daily basis. The fee shall be imposed for each bed per day utilized for the provision of care. A bed shall be considered in use, regardless of physical occupancy, based on payment for nursing services available or provided to any individual or payer through formal or informal agreement. For example, a bed reserved and paid for during a temporary absence from a nursing facility shall be subject to the fee. Likewise, any bed or beds under contract to a Hospice shall be subject to the fee for each day payment is made by the Hospice. Contracts, agreements, or reservations, whether formal or informal, shall be subject to the fee only where payment is made for nursing services available or provided. Nursing facilities subject to the bed fee shall provide documentation quarterly, on a form provided by the department, of utilization for all licensed beds in conjunction with payment of the fee.

2. The provider fee imposed for nursing facility services shall not exceed 6 percent of the average revenues received by providers of that class of services and shall not exceed \$10 per occupied bed per day. The fee amount shall be calculated annually in conjunction with updating provider reimbursement rates under the Medical Assistance Program. Notice to providers subject to fees shall be given in conjunction with the annual rate setting notification by the Bureau of Health Services Financing.

##### C. Intermediate Care FacilityCmentally Retarded (ICF-MR) Services

1. A bed fee shall be paid by each facility licensed as an intermediate care facility for the mentally retarded in accordance with R.S. 28:421 et seq., for each bed utilized for the provision of care on a daily basis. The fee shall be imposed for each bed per day utilized for the provision of care. A bed shall be considered in use, regardless of physical occupancy, based on payment for ICF-MR facility services available or provided to any individual or payer through formal or informal agreement. For example, a bed reserved and paid for during a temporary absence from a facility shall be subject to the fee. Likewise, any bed or beds under contract to a Hospice shall be subject to the fee for each day payment is made by the Hospice. Contracts, agreements, or reservations, whether formal or informal, shall be subject to the fee only where payment is made for ICF-MR facility services available or provided. ICF-MR facilities subject to bed fees shall provide documentation quarterly, on a form provided by the department, of utilization for all licensed beds in conjunction with payment of the fee.

2. The provider fees imposed for ICF-MR facility services shall not exceed 6 percent of the average revenues received by providers of that class of service and shall not exceed \$30 per occupied bed per day. The fee amount shall be calculated annually in conjunction with updating provider reimbursement rates under the Medical Assistance Program. Notice to providers subject to fees shall be given in

conjunction with the annual rate setting notification by the Bureau of Health Services Financing.

D. Pharmacy Services. A prescription fee shall be paid by each pharmacy and dispensing physician for each out-patient prescription dispensed. The fee shall be \$.10 per prescription dispensed by a pharmacist or dispensing physician. Where a prescription is filled outside of Louisiana and not shipped or delivered in any form or manner to a patient in the state, no fee shall be imposed. However, out-of-state pharmacies or dispensing physicians dispensing prescriptions which are shipped, mailed or delivered in any manner inside the state of Louisiana shall be subject to the \$.10 fee per prescription. The fee only applies to prescriptions which are dispensed and sold for human use. Pharmacies and dispensing physicians subject to prescription fees shall provide documentation quarterly, on a form provided by the department, of utilization for all medications dispensed in conjunction with payment of fees.

E. Transportation Services. The fee for transportation services shall be set at \$0.00 pending federal designation of transportation services as a medical provider grouping under P.L. 102-234. Medical transportation providers shall not be required to provide utilization data under this rule.

AUTHORITY NOTE: Promulgated in accordance with Chapter 45 of Title 46 as enacted in 1992, 46:2601-2605, redesignated as Chapter 47 of Title 46, containing R.S. 46:2621 to 46:2625 and PL 102-234.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of Management and Finance, LR 19:347 (March 1993), amended LR 20:51 (January 1994), LR 26:1478 (July 2000).

#### **§4003. Due Date for Submission of Reports and Payment of Fees**

A. The department will mail a Quarterly Utilization Report to each licensed provider covered under the scope of this statute at the address given in the last report filed pursuant to the provisions of R.S. 46:2601-2605. The provider shall promptly notify the department of any change of address. Quarterly Utilization Reports and fees shall be submitted to the department and shall be due on the twentieth calendar day of the month following the close of the quarter and shall be deemed delinquent on the thirtieth calendar day of that month. Even if no fee is due, submission of the report is still mandatory.

AUTHORITY NOTE: Promulgated in accordance with Chapter 45 of Title 46 as enacted in 1992, 46:2601-2605, redesignated as Chapter 47 of Title 46, containing R.S. 46:2621 to 46:2625 and P.L. 102-234.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of Management and Finance, LR 19:347 (March 1993), amended LR 26:1479 (July 2000).

#### **§4005. Delinquent and/or Unfiled Reports**

A. Penalty Assessment. In the case a report has been determined delinquent, the specific penalty shall be 5 percent of the total fee due on the report for every 30 days or fraction thereof that the report is not filed, not to exceed 150 days. When a report is not received within 150 days from due date, the report shall be deemed not filed and there shall be cause for an audit, investigation or examination to be made by the department.

B. Estimation of Provider Fee Due. In those cases in which a health care provider fails to file the Quarterly Utilization Report, the department will estimate the provider fee due. The department will, by certified mail, notify the

provider of the estimated fee due, the method used to calculate the estimate and the department's intent to collect the delinquent fee. The provider shall have 10 days from the date of receipt of the notice to file a provider fee report with the department. Any provider who fails to file the Quarterly Utilization Report within 10 days of the date of receipt of the department's estimated provider fee notice shall waive any and all rights to appeal the department's action and to contest payment of the estimated fee.

C. Incorrect Reporting. If a provider submits a report required by the provisions of this Chapter and the report made and filed does not correctly compute the liability of the provider there shall be cause for an audit, investigation or examination to be made by the department.

D. False or Fraudulent Reporting. When a provider files a report that is false or fraudulent or grossly incorrect and the circumstances indicate that the provider had intent to defraud the state of Louisiana of any fee due under this Chapter, there shall be imposed, in addition to any other penalties provided, a specific penalty of 50 percent of the fee due.

E. Reimbursement of Audit, Hearing, and Witness Costs. If actions by a provider cause the department to examine books, records, or documents, or undertake an audit thereof, and/or conduct a hearing, and/or subpoena witnesses, then the provider shall be assessed an amount as itemized by the department to compensate for all costs incurred in making such examination or audit, and/or in holding such hearing, and/or in subpoenaing and compensating witnesses.

AUTHORITY NOTE: Promulgated in accordance with Chapter 45 of Title 46 as enacted in 1992, 46:2601-2605, redesignated as Chapter 47 of Title 46, containing R.S. 46:2621 to 46:2625 and P.L. 102-234.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of Management and Finance, LR 19:347 (March 1993), amended LR 26:1479 (July 2000).

#### **§4007. Delinquent and/or Unpaid Fees**

A. Interest on Unpaid Provider Fees. When the provider fails to pay the fee due, or any portion thereof, on or before the date it becomes delinquent, interest at the rate of 12 percent per month compounded daily shall be assessed on the unpaid balance until paid. In the case of interest on a penalty assessed, such interest shall be computed beginning 15 days from the date of notification of assessment until paid.

##### **B. Collection of Delinquent Provider Fee**

1. For those enrolled as health care providers in the Louisiana Medical Assistance Program (Medicaid) collection of delinquent provider fees will be as follows.

a. The department will withhold from the provider's Medicaid reimbursement check, an amount equal to 50 percent of the reimbursement check or the actual amount of the delinquent provider fee, including interest and penalty, whichever is less.

b. By enrolling and participating in the Louisiana Medical Assistance Program (Medicaid) a provider agrees that during the period of time delinquent provider fees are being collected, no additional provider fee delinquency will occur. If the provider becomes further delinquent, the department will withhold 100 percent of the Medicaid reimbursement or the actual amount of the delinquent provider fees, including interest and penalty, whichever is less.

2. For those health care providers not enrolled in the Louisiana Medical Assistance Program (Medicaid), the department will avail itself of any and all appropriate legal and judicial remedies in the collection of delinquent provider fees.

C. Nonsufficient Fund (NSF) Checks in Payment of Fee. A specific service charge, in accordance with R.S. 9:2782(B) as it may be amended from time to time, shall be imposed on all NSF checks. The tender of three NSF checks shall be cause for an audit, investigation or examination to be made by the department, and the provider will be required to make payment thereafter by certified check or money order.

D. The department shall refund any overpayment to the provider.

AUTHORITY NOTE: Promulgated in accordance with Chapter 45 of Title 46 as enacted in 1992, 46:2601-2605, redesignated as Chapter 47 of Title 46, containing R.S. 46:2621 to 46:2625 and P.L. 102-234.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of Management and Finance, LR 19:347 (March 1993), LR 20:1114 (October 1994) amended LR 20:1114 (October 1994), LR 26:1479 (July 2000).

**§4009. Appeals**

A. Any provider aggrieved pursuant to the provisions determined herein shall have the right to administrative appeal as specified in R.S. 46:107.

AUTHORITY NOTE: Promulgated in accordance with Chapter 45 of Title 46 as enacted in 1992, 46:2601-2605, redesignated as Chapter 47 of Title 46, containing R.S. 46:2621 to 46:2625 and P.L. 102-234.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of Management and Finance, LR 19:347 (March 1993), re promulgated LR 26:1480 (July 2000).

**§4011. Exceptions**

A. The secretary may exempt any assessment of penalty and interest described in this Chapter.

AUTHORITY NOTE: Promulgated in accordance with Chapter 45 of Title 46 as enacted in 1992, 46:2601-2605, redesignated as Chapter 47 of Title 46, containing R.S. 46:2621 to 46:2625 and P.L. 102-234.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of Management and Finance, LR 19:347 (March 1993), amended LR 26:1480 (July 2000).

David W. Hood  
Secretary

0007#049

**RULE**

**Department of Health and Hospitals  
Office and Management and Finance**

**Medicare Rural Hospital Flexibility Program (MRHF)  
Critical Access Hospitals (LAC 48:I.7601 and 7609)**

The Department of Health and Hospitals, Office of Management and Finance, Division of Research and Development is amending the rule in the Medicare Rural Hospital Flexibility Program (MRHF) as authorized by the Balanced Budget Act of 1997 (Public Law 105-33) and pursuant to Title XVIII of the Social Security Act. This rule is in accordance with the Medicare, Medicaid, State Children's Health Insurance Programs (SCHIP) Balanced

Budget Refinement Act of 1999. This rule is in accordance with the Administrative Procedure Act, R.S. 49:950 et seq.

This emergency rule will amend the rule published in the *Louisiana Register*, Vol. 25, No. 8, pp. 1478-1480, August 20, 1999 by expanding the definition of "rural," and changing other criteria to allow additional hospitals to participate in the Medicare Rural Hospital Flexibility Program (MRHF). The Program assists rural communities in improving access to essential care through the establishment of Critical Access Hospitals (CAH) which are limited service hospitals eligible for Medicare certification and cost based reimbursement.

This action is necessary to avoid imminent peril to the public welfare served by small rural hospital facing closure due to financial problems.

**Rule**

Effective July 20, 2000, the Department of Health and Hospitals, Division of Research and Development, will expand the criteria for participation in the Medicare Rural Hospital Flexibility Program (MRHF) which will make additional rural hospitals eligible to participate as limited service hospitals eligible for Medicare certification and reimbursement. To qualify as a CAH, the small rural hospital must complete the following designation, licensing, and certification processes.

**Title 48**

**PUBLIC HEALTHC GENERAL**

**Part I. General Administration**

**Subpart 3. Licensing and Certification**

**Chapter 76. Medicare Rural Hospital Flexibility Program (MRHF)**

**Subchapter A. Critical Access Hospitals**

**§7601. Definitions**

A. ...

*Rural* may be in a rural census tract in a Metropolitan Statistical Area (MSA) as determined under the Goldsmith Modification, originally published in the *Federal Register* on February 27, 1992; or

a. has no more than 60 hospital beds as of July 1, 1994; and

(i). is located in a parish with a population of less than 50,000; or

(ii). is located in a municipality with a population of less than 20,000; or

b. meets the qualifications of a sole community hospital under 42 CFR 412.92(a); or

c. has no more than 60 hospital beds as of July 1, 1999, and is located in a parish with a population, as measured by the 1990 census, of less than 17,000.

AUTHORITY NOTE: Promulgated in accordance with the Balanced Budget Act of 1997 (P.L. 105-33) and Title XVIII of the Social Security Act; amended by Medicare, Medicaid, SCHIP Balanced Budget Refinement Act of 1999.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of Management and Finance, Division of Research and Development, LR 25:1478 (August 1999), amended LR 26:1480 (July 2000).

**§7603. Criteria for Designation as a CAH**

A. ...

1. be a licensed hospital;

2.-4.b. ...

c. Provides not more than 15 acute care inpatient beds, meeting such standards as the secretary may establish,

for providing inpatient care that does not exceed, as determined on an annual, average basis, 96 hours per patient.

AUTHORITY NOTE: Promulgated in accordance with the Balanced Budget Act of 1997 (P.L. 105-33) and Title XVIII of the Social Security Act; amended by Medicare, Medicaid, SCHIP Balanced Budget Refinement Act of 1999.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of Management and Finance, LR 25:1479 (August 1999), amended LR 26:1480 (July 2000).

**§7609. Application Submission and Review**

A.-B. ...

C. The supporting information to be included with the application is:

1. documentation of ownership, including names of owners and percent of ownership;

2.-4. ...

AUTHORITY NOTE: Promulgated in accordance with the Balanced Budget Act of 1997 (P.L. 105-33) and Title XVIII of the Social Security Act; amended by Medicare, Medicaid, SCHIP Balanced Budget Refinement Act of 1999.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of Management and Finance, Division of Research and Development, LR 25:1479 (August 1999), amended LR 26:1481 (July 2000).

David W. Hood  
Secretary

0007#083

**RULE**

**Department of Health and Hospitals  
Office of Public Health**

**Sanitary Code Plumbing (Chapter XIV)**

The Department of Health and Hospitals, Office of Public Health (DHH-OPH) hereby amends Chapter XIV (Plumbing) of the Sanitary Code, State of Louisiana. This rule change will replace in its entirety Chapter XIV (Plumbing) of the Sanitary Code, State of Louisiana, promulgated September 20, 1992. The new Chapter XIV (Plumbing) of the Sanitary Code, State of Louisiana is to be comprised of the 1994 edition of the Standard Plumbing Code<sup>8</sup> as modified by the 1999 Louisiana Amendments to the 1994 Standard Plumbing Code<sup>8</sup>. The 1994 Standard Plumbing Code<sup>8</sup> is a copyrighted document published by the Southern Building Code Congress International, Inc. (SBCCI) and is recognized as one of several national model plumbing codes. The SBCCI will incorporate the 1999 Louisiana Amendments into the text of their 1994 Standard Plumbing Code<sup>8</sup> and will print a separate copyrighted document called the "Louisiana State Plumbing Code." The SBCCI will sell the "Louisiana State Plumbing Code" at the same price as they currently sell the 1994 Standard Plumbing Code<sup>8</sup>, i.e., \$38 to a SBCCI member and \$57 to a SBCCI non-member.

This rule is to be adopted by the state health officer in accordance with R.S. 40:4, approved by the secretary of the Department of Health and Hospitals in accordance with R.S. 40:2, under the general powers and jurisdiction of the state health officer and the Office of Public Health in accordance with R.S. 40:5, and promulgated in accordance with R.S. 49:950 et seq. This rule has no known impact on family

formation, stability, or autonomy, as described in R.S. 49:972.

The rule is as follows.

**Sanitary Code, State Of Louisiana**

**Chapter XIV (Plumbing)**

**14:001 Adoption of Louisiana State Plumbing Code**

The Department of Health and Hospitals, Office of Public Health hereby adopts Chapter XIV (Plumbing) of the Sanitary Code, State of Louisiana to be comprised of the 1994 edition of the Standard Plumbing Code<sup>8</sup> as modified by the 1999 Louisiana Amendments to the 1994 Standard Plumbing Code<sup>8</sup>. The 1994 Standard Plumbing Code<sup>8</sup> is a copyrighted document published by the Southern Building Code Congress International, Inc. (SBCCI) and is recognized as one of several national model plumbing codes. The SBCCI will incorporate the 1999 Louisiana Amendments into the text of their 1994 Standard Plumbing Code<sup>8</sup>. After the Office of Public Health has proofread and approved the combined document to ensure accuracy and consistency with the 1999 Louisiana Amendments, SBCCI will print a separate copyrighted document entitled the "Louisiana State Plumbing Code." The "Louisiana State Plumbing Code" shall be synonymous to "Chapter XIV (Plumbing) of the Sanitary Code, State of Louisiana."

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:4.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Office of Health Services and Environmental Quality, LR 10:210 (March 1984), amended by the Department of Health and Hospitals, Office of Public Health, LR 18:618 (June 1992), LR 26:1481 (July 2000).

**14:002 Availability**

Information concerning purchasing copies of the Louisiana State Plumbing Code may be obtained by contacting the Southern Building Code Congress International, Inc., 900 Montclair Road, Birmingham, Alabama 35213-1206, (205) 591-1853 or by contacting the Chief Sanitarian, Office of Public Health, 6867 Bluebonnet Boulevard, Box 9, Baton Rouge, LA 70810, telephone (225) 763-5553 or fax (225) 763-5552.

In addition, the Office of Public Health will purchase at least 33 copies of the Louisiana State Plumbing Code to be given to the Office of the State Library for distribution to various libraries designated as a recorder of state documents. Copies will be provided to the following libraries: LSU-BR, La Tech, UNO, LSU-Shreveport, McNeese, USL, NE La Univ., N.O. Public, NW La Univ., Nicholls, SE La Univ., Jefferson Parish Public (E & W), La College, Nunez Comm., Loyola, Southern-BR, Southern Univ. Law, SUNO, Shreve Memorial, Loyola Law, LSU Medical, Delgado, La Supreme Court, E.B.R. Public, Legislative Library, Grambling, Tulane, Library of Congress, State Library-BR, and the Recorder of State Documents in the Office of State Library. This will enable the general public to review and otherwise have accessibility to the document without the need to individually purchase a copy.

Copies of the Louisiana State Plumbing Code will also be provided to and may be reviewed (pursuant to a request to review public record) at the Office of Public Health's Division of Environmental Health's Central Office in Baton Rouge, any of the 9 Regional Engineering/Sanitarian offices, or any of the 64 Parish Health Unit sanitarian offices

generally between the hours of 8:00 a.m. and 4:30 p.m. on regular work days.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:4.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Office of Health Services and Environmental Quality, LR 10:210 (March 1984), amended by the Department of Health and Hospitals, Office of Public Health, LR 18:618 (June 1992), LR 26:1481 (July 2000).

**14:003 Effective Date**

This rule shall become effective on October 20,2000.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:4.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Office of Health Services and Environmental Quality, LR 10:210 (March 1984), amended by the Department of Health and Hospitals, Office of Public Health, LR 18:618 (June 1992), LR 26:1482 (July 2000).

**14:004 1999 Louisiana Amendments**

The 1999 Louisiana Amendments to the 1994 Standard Plumbing Code<sup>8</sup> are attached as follows (numerical citations comport with 1994 Standard Plumbing Code<sup>8</sup> format):

These amendments can be viewed at any Office of Public Health regional office or at the Division of Environmental Health's central office. (See addresses in the following Summary paragraph.)

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:4.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Office of Health Services and Environmental Quality, LR 10:210 (March 1984), amended by the Department of Health and Hospitals, Office of Public Health, LR 18:618 (June 1992), LR 26:1482 (July 2000).

Copies of the 1999 Louisiana Amendments to the 1994 Standard Plumbing Code<sup>8</sup> may be obtained by contacting the Chief Sanitarian, Office of Public Health, 6867 Bluebonnet Boulevard, Box 9, Baton Rouge, LA 70810, telephone (225) 763-5553 or fax (225)763-5552.

David Hood  
Secretary

0007#0045

**RULE**

**Department of Insurance  
Office of the Commissioner**

**Regulation 70C Replacement of Life Insurance and Annuities (LAC 37:XIII.Chapter 89)**

Editor's Note: This section is being reprinted to correct a typographical error. The rule may be viewed in its entirety in the July 20, 2000 edition of the *Louisiana Register*.

Under the authority of R.S. 22:3 et seq., R.S. 22:644.1 and in accordance with the Administrative Procedure Act, R.S. 49:950 et seq., the Department of Insurance adopts the following proposed regulation, with the exception of §8909, to become effective July 1, 2000. This intended action complies with the statutory law administered by the Department of Insurance.

**§8921. Appendix A**

**IMPORTANT NOTICE:**

**REPLACEMENT OF LIFE INSURANCE OR ANNUITIES**

(Note: This document must be signed by the applicant and the producer, if there is one, and a copy left with the applicant)

You are contemplating the purchase of a life insurance policy or annuity contract. In some cases this purchase may involve discontinuing or changing an existing policy or contract. If so, a replacement is occurring. Financed purchases are also considered replacements.

A *replacement* occurs when a new policy or contract is purchased and, in connection with the sale, you discontinue making premium payments on an existing policy or contract, or an existing policy or contract is surrendered, forfeited, assigned to the replacing insurer, or otherwise terminated or used in a financed purchase.

A *financed purchase* occurs when the purchase of a new life insurance policy involves the use of funds obtained by the withdrawal or surrender of or by borrowing some or all of the policy values, including accumulated dividends, of an existing policy to pay all or part of any premium or payment due on the new policy. A financed purchase is a replacement.

You should carefully consider whether a replacement is in your best interest. You will pay acquisition costs and there may be surrender costs deducted from your policy or contract. You may be able to make changes to your existing policy or contract to meet your insurance needs at less cost. A financed purchase will reduce the value of your existing policy and may reduce the amount paid upon the death of the insured.

We want you to understand the effects of replacements before you make your purchase decision and ask that you answer the following questions and consider the questions on the back of this form.

1. Are you considering discontinuing making premium payments, surrendering, forfeiting, assigning to the insurer, or otherwise terminating your existing policy or contract?  YES  NO

2. Are you considering using funds from your existing policies or contracts to pay premiums due on the new policy or contract?  YES  NO

If you answered "yes" to either of the above questions, list each existing policy or contract you are contemplating replacing (include the name of the insurer, the insured or annuitant, and the policy or contract number if available) and whether each policy or contract will be replaced or used as a source of financing:

- | INSURER NAME | CONTRACT OR POLICY # | INSURED OR ANNUITANT | REPLACED (R) OR FINANCING (F) |
|--------------|----------------------|----------------------|-------------------------------|
| 1.           |                      |                      |                               |
| 2.           |                      |                      |                               |
| 3.           |                      |                      |                               |

Make sure you know the facts. Contact your existing company or its agent for information about the old policy or contract. If you request one, an in force illustration, policy summary or available disclosure documents must be sent to you by the existing insurer. Ask for and retain all sales material used by the agent in the sales presentation. Be sure that you are making an informed decision.

The existing policy or contract is being replaced because

I certify that the responses herein are, to the best of my knowledge, accurate:

Applicant's Signature and Printed Name Date

Producer's Signature and Printed Name Date

I do not want this notice read aloud to me. \_\_\_\_\_ (Applicants must initial only if they do not want the notice read aloud.)

A replacement may not be in your best interest, or your decision could be a good one. You should make a careful comparison of the costs and benefits of your existing policy or contract and the proposed policy or contract. One way to do this is to ask the company or agent that sold you your existing policy or contract to provide you with information concerning your existing policy or contract. This may include an illustration of how your existing policy or contract is working now and how it would perform in the future

based on certain assumptions. Illustrations should not, however, be used as a sole basis to compare policies or contracts. You should discuss the following with your agent to determine whether replacement or financing your purchase makes sense:

**PREMIUMS:**

C Are they affordable?

C Could they change?

C You're older—are premiums higher for the proposed new policy?

C How long will you have to pay premiums on the new policy? On the old policy?

**POLICY VALUES:**

C New policies usually take longer to build cash values and to pay dividends.

C Acquisition costs for the old policy may have been paid; you will incur costs for the new one.

C What surrender charges do the policies have?

C What expense and sales charges will you pay on the new policy?

C Does the new policy provide more insurance coverage?

**INSURABILITY:**

C If your health has changed since you bought your old policy, the new one could cost you more, or you could be turned down.

C You may need a medical exam for a new policy.

C Claims on most new policies for up to the first two years can be denied based on inaccurate statements.

C Suicide limitations may begin anew on the new coverage.

**IF YOU ARE KEEPING THE OLD POLICY AS WELL AS THE NEW POLICY:**

C How are premiums for both policies being paid?

C How will the premiums on your existing policy be affected?

C Will a loan be deducted from death benefits?

C What values from the old policy are being used to pay premiums?

**IF YOU ARE SURRENDERING AN ANNUITY OR INTEREST SENSITIVE LIFE PRODUCT:**

C Will you pay surrender charges on your old contract?

C What are the interest rate guarantees for the new contract?

C Have you compared the contract charges or other policy expenses?

**OTHER ISSUES TO CONSIDER FOR ALL TRANSACTIONS:**

C What are the tax consequences of buying the new policy?

C Is this a tax free exchange? (See your tax advisor.)

C Is there a benefit from favorable "grand-fathered" treatment of the old policy under the federal tax code?

C Will the existing insurer be willing to modify the old policy?

C How does the quality and financial stability of the new company compare with your existing company?

**AUTHORITY NOTE:** Promulgated in accordance with R.S. 22:3 and R.S. 22:644.1.

**HISTORICAL NOTE:** Promulgated by the Department of Insurance, Office of the Commissioner, LR 26:1482 (June 2000).

James H. "Jim" Brown  
Commissioner of Insurance

0007#013

**RULE**

**Department of Natural Resources  
Office of the Secretary**

Oyster Lease Relocation Program (LAC 43:I.875-895)

In accordance with the laws of the state of Louisiana, and with reference to the provisions of Title 56 of the Louisiana Revised Statutes of 1950, the secretary of the Department of Natural Resources hereby adopts LAC 43:I.875 as follows.

**Title 43**

**NATURAL RESOURCES**

**Part I. Office Of The Secretary**

**Chapter 8. Coastal Restoration**

**Subchapter C. Rules Governing Davis Pond Oyster Relocation Program**

**§875. Purpose**

A. These special rules are adopted pursuant to R.S. 56:432.1, et seq. to provide for the filing and processing of applications for, and for the fair and expeditious relocation of, oyster beds in the Davis Pond Oyster Influence Area (the program). These rules supercede the provisions of Subchapter B insofar as Subchapter B may otherwise apply to the Davis Pond Oyster Influence Area.

B. Pursuant to R.S. 56:432.1E., these rules are intended to implement federal plans, programs and requirements regarding the Davis Pond Freshwater Diversion Project Feature of the Mississippi Delta Region Project, (Project) constructed pursuant to the Flood Control Act of 1928, public law 391 of the 70<sup>th</sup> Congress, as amended by the Flood Control Act of 1965, public law 89-298, the Water Resources Development Act of 1986, public law 99-662, Section 365 of the Water Resources Development Act of 1996, Public Law 104-303, and the Water Resources Development Act of 1999, public law 106-53 and shall so be interpreted.

**AUTHORITY NOTE:** Promulgated in accordance with R.S. 56:432.1 et seq.

**HISTORICAL NOTE:** Promulgated by the Department of Natural Resources, Office of the Secretary, LR 26:1483 (July 2000).

**§877. Definitions**

**Active Lease** Any oyster lease currently on record with the Louisiana Department of Wildlife and Fisheries located in whole or part within the Davis Pond Oyster Influence Area for which all fees have been paid for the current term of the lease.

**Affected Lease** Can active lease determined pursuant to these rules to be productive.

**Davis Pond Oyster Influence Area** That area of the Barataria Bay estuary north of the five parts per thousand isohaline line delineated in Volume 1, Plate 10 of the Louisiana Coastal Area Feasibility Study, dated September, 1984.

**Coastal Restoration Project Area** Geographical extent of a Coastal Restoration Project as delineated by the responsible government agency or agencies for that Project.

**Department** the Louisiana Department of Natural Resources, its secretary, or the secretary's designee.

**Department of Wildlife and Fisheries** the Louisiana Department of Wildlife and Fisheries, its secretary, or the secretary's designee.

**Exchange Lease(s)** a lease or leases, located entirely outside of any Coastal Restoration Project Area and entirely outside Davis Pond Oyster Influence Area, received by a leaseholder in exchange for an affected lease pursuant to §883.

**Leaseholder** the lessee of an oyster lease granted by the Department of Wildlife and Fisheries pursuant to La. R.S. 56:425 et seq., as appears on records provided and maintained by the Department of Wildlife and Fisheries.

**Replacement Lease(s)** a lease or leases located entirely outside any Coastal Restoration Project Area, and outside Davis Pond Oyster Influence Area, selected by the leaseholder in accordance with §885.E.

**Relocation Cultch Material** the quantity of material allowed by the department to substitute for the reef and shell/cultch substrate areas on an affected lease and comparable to those amounts used by the Department of Wildlife and Fisheries in establishing the public seed ground areas.

**Productive Lease** An active lease found by the secretary to have a suitable substrate that is capable of sustaining commercial oyster production, and is in a location on the Melancon maps as having an appropriate salinity regime to sustain oyster production and is not in a Louisiana Department of Health and Hospitals "prohibited area" as delineated according to applicable statutes and regulations in effect on the date the election is made. If an active lease does not meet these criteria, the leaseholder may submit to the secretary within 60 days after the date the election is made additional information to substantiate in accordance with the requirements of §895, that the particular lease is capable of sustaining commercial oyster production, and on the basis of such information and any other information, the secretary shall determine whether or not the lease is productive for the purposes of this regulation. Melancon, E. J., Jr. et al. 1998 *Journal of Shellfish Research*. 17(4):1143-1148.

**Secretary** the secretary of the Department of Natural Resources or the secretary's designee.

**AUTHORITY NOTE:** Promulgated in accordance with R.S. 56:432.1 et seq.

**HISTORICAL NOTE:** Promulgated by the Department of Natural Resources, Office of the Secretary, LR 26:1483 (July 2000).

### **§879. Notification of Leaseholders**

A. The secretary shall make a reasonable effort to provide notice of the program to all affected leaseholders.

B. The secretary shall send to leaseholders of affected leases a notice including the following:

1. a description and map of the Davis Pond Oyster Influence Area;
2. a copy of these regulations;
3. a statement informing the leaseholder that the leaseholder's desire to participate in the program must be confirmed in writing and delivered by certified mail to the secretary within 30 days of the date of receipt of the notice. The statement shall also inform the leaseholder that, if such confirmation not be received timely, the leaseholder shall be deemed to have elected not to participate in the program;

4. a statement informing the leaseholders that limited funding is available, and that available funds used to implement the program shall be distributed to participating leaseholders in the manner determined by the secretary pursuant to §891; and

5. a response form to be completed and returned to the department, which form shall provide information confirming the leaseholder's mailing address and the leaseholder's selection of a relocation option. The forms shall include an authorization granting the department or its contractors the right to enter the affected lease for the purpose of surveying and making an assessment of each affected lease.

C. Notice shall be deemed to have been made if sent by United States certified mail, return receipt requested, to the last address furnished to the Louisiana Department of Wildlife and Fisheries by the leaseholder.

D. The department will publish a list of all the leaseholders of affected leases in the official State Journals of the parishes where affected leases are located, notifying the leaseholders of the program.

**AUTHORITY NOTE:** Promulgated in accordance with R.S. 56:432.1 et seq.

**HISTORICAL NOTE:** Promulgated by the Department of Natural Resources, Office of the Secretary, LR 26: 1484 (July 2000).

### **§881. Leaseholder Options**

A. Leaseholder(s) of affected lease(s) may select one option from those available in §883, 885, 887, and 889, except as otherwise provide in §887.B. Notwithstanding any other provision in these regulations to the contrary, any obligation of the department to expend funds shall be subject to the availability of funds as described in the provisions of §891.

**AUTHORITY NOTE:** Promulgated in accordance with R.S. 56:432.1 et seq.

**HISTORICAL NOTE:** Promulgated by the Department of Natural Resources, Office of the Secretary, LR 26:1484 (July 2000).

### **§883. Exchange Option**

A. The exchange of an affected lease, including the department's responsibility for payment of application and survey costs, shall be subject to the availability of funds as described in the provisions of §891.

B. A leaseholder may elect to exchange the affected lease for an exchange lease or leases as described in Subpart C. below which is acceptable to both the leaseholder and the Department of Wildlife and Fisheries. Lease exchanges shall be in accordance with R.S. 56:432.1.B.(1). Exchange leases shall begin a new term. Subject to the provisions of §883.A, the department shall reimburse the applicants for all application and survey costs.

C. If the leaseholder elects this option, the department shall notify the department of Wildlife and Fisheries. affected leases shall be exchanged for a maximum number of exchange leases as follows provided that the combined acreage of the exchange lease or leases shall not exceed the acreage of the affected lease by more than 10 percent.

1. affected leases between 0 and 20 acres in size shall be exchanged for no more than one exchange lease;

2. affected leases between 21 and 200 acres in size shall be exchanged for no more than two exchange leases; and

3. affected leases between 201 and 500 acres in size shall be exchanged for no more than three exchange leases;

4. affected leases between 501 and 1000 acres in size shall be exchanged for no more than four exchange leases.

D. Within 30 days of the department's receipt of the leaseholder's response required in accordance with §879.B, the leaseholder shall submit to the Department of Wildlife and Fisheries an application for an exchange lease or leases. Applications for exchange lease locations shall be submitted by the leaseholder and processed by the Department of Wildlife and Fisheries in accordance with the provisions of LAC Title 76, Chapter 5, §501, Oyster Leases, and subparts §883.B and C above.

E. Applications for exchange lease or leases shall be accompanied by a written request from the leaseholder to cancel the affected lease on December 31 of the calendar year immediately following the calendar year of application for the exchange lease. In the event that the term of the affected lease will expire prior to December 31 of the calendar year immediately following the calendar year of application for the exchange lease, the department shall request that the Department of Wildlife and Fisheries, in accordance with the provisions of R.S. 56:428.1, issue a one-year lease for that affected lease.

F. If the leaseholder fails to submit timely application for an exchange lease or leases, or fails to receive an exchange lease before the expiration date of the affected lease, the leaseholder shall be deemed to have made an election to retain the affected lease as provided in §887, effective as of December 31 of the calendar year following the last date allowed for submission of the application, and the request for cancellation of the affected lease shall be deemed withdrawn.

AUTHORITY NOTE: Promulgated in accordance with R.S. 56:432.1 et seq.

HISTORICAL NOTE: Promulgated by the Department of Natural Resources, Office of the Secretary, LR 26:1484 (July 2000).

### **§885. Relocation Option**

A. The relocation of an affected lease, including the department's responsibility for payment or reimbursement as provided in §885.C, shall be subject to the availability of funds, as described in the provisions of §891.

B. The leaseholder may elect to relocate the affected lease to a replacement lease. The affected lease shall be assessed by the department during the 1999 and 2000 calendar years, by any means, including but not limited to side-scan sonar, to determine the quantity of Relocation Cultch Material allowable to relocate the affected lease. The leaseholder shall cause the placement of that quantity of cultch material on a replacement lease.

C. Subject to the provisions of §885.A above, the secretary shall determine and provide the following:

1. reimbursement of the actual cost of placement of Relocation Cultch Material, but not in excess of the secretary's determination of reasonable and allowable costs made under the provisions of §885.D of this part;

2. reimbursement of the actual cost of relocation of any live seed oysters from the affected lease, but not in excess of the secretary's determination of reasonable and allowable costs made under the provisions of §885.D of this part.

D. The leaseholder of each affected lease shall be notified, in the initial notification, in accordance with §879 B, by certified registered United States Mail, postage pre-paid, or pre-paid receipted express delivery service, of the determination of the Relocation Cultch Material allowable for the existing lease, and the department's determination of the amount in dollars of reimbursement which is reasonable and allowable to:

1. effect the placement of the Relocation Cultch Material on the replacement lease(s) selected by the leaseholder; and

2. effect the relocation of any living seed oysters from the affected lease.

Upon such notification, the leaseholder shall have 30 days to notify the department in writing to either accept the reimbursement offer made by the department, to request purchase of the lease in accordance with §889, or to appeal in accordance with §895.

E. Upon acceptance of the relocation offer, the leaseholder shall have 90 days to notify the department of the date and the replacement lease by which the leaseholder will cause placement of the cultch; such date shall be no later than 12 months from the leaseholder's acceptance of the department's offer made in accordance with §885.D. The secretary may extend this period for good cause shown. Upon placement of the cultch, the leaseholder shall certify to the department, in writing, that such placement has occurred. Such certification shall be accompanied by receipts or invoices for the actual cost of the cultch placement, as well as the location and quantity of such placement. Payment for actual expenses incurred by the leaseholder shall be made pursuant to §891, but not in excess of the secretary's written determination of the level of reasonable and allowable compensation made in accordance with §885.D of this regulation.

F. If on the date the relocation option is made a leaseholder of an affected lease is not then the lessee of a replacement lease on which relocation cultch material can reasonably be placed, as determined by the secretary, reimbursement will be made for application fees and lease survey and marking costs of a new replacement lease for an area not in excess of the area of the affected lease by more than 10 percent. The leaseholder must, by written request, give notice to the Department of Wildlife and Fisheries and the department to cancel the affected lease on December 31 of the calendar year immediately following the calendar year of the department's receipt of the notification letter as provided for in §879. Payment to the leaseholder shall be withheld until the written cancellation notices are received. For good cause shown in writing by the leaseholder, the secretary may request the Department of Wildlife and Fisheries to extend the cancellation date of the affected lease, or may request that the Department of Wildlife and Fisheries to issue a one-year lease pursuant to R.S. 56:428.1.

G. Subject to the limitations of Paragraph G.1., below, the leaseholder shall have one year after the date on which the leaseholder's selection of the relocation option is mailed to the department in accordance with §879.B of this regulation to remove any living oysters, both seed and marketable, from the affected lease, at the sole risk and cost of the leaseholder, except for costs allowed in accordance with §885.C.2.

1. In the event that the department notifies the leaseholder that, due to implementation schedules of the Davis Pond Freshwater Diversion feature of the Mississippi Delta Region Project, less than one year will be available for the removal of living oysters, both seed and marketable, from the affected lease, the leaseholder may request that the department provide compensation for any project impacts, causing the loss of living oysters remaining on the affected lease. Subject to the availability of funds as described in the provisions of §891, the secretary may, at his discretion, determine the reasonable value of oysters not reasonably removable within the time available and offer compensation for reasonable and allowable losses.

2. In the event that the department notifies the leaseholder that due to delays in the Coastal Restoration Project implementation schedules, of the Davis Pond Freshwater Diversion feature of the Mississippi Delta Region Project, more than one year exists for the removal of living oysters from the affected leases, the secretary may, at his discretion, allow the leaseholder, to continue the removal of any living oysters, during the existence of the lease including renewals, provided that the leaseholder shall execute a receipt, release and hold harmless agreement in favor of the United States Government, including the U.S. Army Corps of Engineers, and the State of Louisiana, including the Louisiana Department of Natural Resources and the Louisiana Department of Wildlife and Fisheries, in accordance with the terms and provisions of the release, indemnity and hold harmless agreement set forth in §893 of this Agreement and shall provide that the lease is subservient and subordinate to the Davis Pond Freshwater Diversion feature of the Mississippi Delta Region Project, and to any other Coastal Restoration Project and that the leaseholder accepts the risks of continuing to remove living oysters in the area affected by the Project.

AUTHORITY NOTE: Promulgated in accordance with R.S. 56:432.1, et seq.

HISTORICAL NOTE: Promulgated by the Department of Natural Resources, Office of the Secretary, LR 26:1485 (July 2000).

#### **§887. Retention Option**

A. The leaseholder may elect to retain the affected lease without compensation. If the leaseholder elects to retain the affected lease, he shall execute a written release indemnification and hold harmless agreement in favor of the United States Government, including the U.S. Army Corps of Engineers, and the state of Louisiana, including the Louisiana Department of Natural Resources and the Louisiana Department of Wildlife and Fisheries, in accordance with the terms and provisions of the release, indemnity and hold harmless agreement set forth in §893 of this Agreement and this election shall stipulate that the retained lease is subservient and subordinate to the Davis Pond Freshwater Diversion feature of the Mississippi Delta Region Project, and to any Coastal Restoration Project, past, present or future, and that the leaseholder accepts all risks of operating in the area affected by such projects including, but not limited to all damage which may be sustained by or to the lease or the oysters located therein; however, the hold harmless agreement for the retention option must also provide the right of the leaseholder under §887.B to elect an alternative option within one year from the initial selection of the retention option.

B. Subsequent to an election to retain, and in accordance with the provisions of R.S. 56:432.1.B.(3), a leaseholder may seek to pursue another option specified in §883, §885, or §889. In such event, the leaseholder shall request the secretary's approval to utilize another option. The secretary shall make every reasonable effort to accommodate such requests. However, if all available funds have been previously expended pursuant to §891, such request shall be denied. The election of an additional option under this subpart must be made within one year from the official opening of the Davis Pond Freshwater Diversion Project.

AUTHORITY NOTE: Promulgated in accordance with R.S. 56:432.1, et seq.

HISTORICAL NOTE: Promulgated by the Department of Natural Resources, Office of the Secretary, LR 26:1486 (July 2000).

#### **§889. Purchase Option**

A. The department's purchase of an affected lease shall be subject to the availability of funds as described in provisions of §891.

B. The leaseholder may elect to request that the department purchase the affected lease. The department, at its discretion, may purchase the affected lease, together with all improvements for a purchase price not to exceed the allowable cost determined in §885.C.1, for the placement of cultch. The cost of seed oyster relocation, application fees and surveying and marking of new leases will not be included in the purchase price. Payment of the purchase price shall be subject to the provisions of §891.

C. Upon execution of a mutually agreeable purchase agreement, the affected lease shall be canceled on December 31 of the calendar year of purchase.

D. The leaseholder may, at its sole cost, risk, and expense, remove living oysters, both seed and marketable, from the purchased lease prior to its cancellation in accordance with §889.C, above. If the oysters are not reasonably removable within the time available, the leaseholder may request compensation for lost oysters as provided in §885.G.1.

AUTHORITY NOTE: Promulgated in accordance with R.S. 56:432.1 et seq.

HISTORICAL NOTE: Promulgated by the Department of Natural Resources, Office of the Secretary, LR 26:1486 (July 2000).

#### **§891. Payment**

A. Inasmuch as sufficient funds may not be made available to pay in full all amounts determined by the secretary to be the actual costs, allowable and payable pursuant to these regulations, the secretary may make partial payments to leaseholders as option selections are processed, while maintaining a reserve fund until all timely made selections are processed, to the end that all leaseholders will receive the same ratable payment of the amounts authorized for payment with respect to each affected lease, to the extent reasonably practicable. No interest will be allowed or taken into account. All payments made or proposed to be made under these rules are conditional on the allowance by the secretary of the Army of such payments as a credit to the state of Louisiana toward its non-Federal share of the cost of the Project.

AUTHORITY NOTE: Promulgated in accordance with R.S. 56:432.1 et seq.

HISTORICAL NOTE: Promulgated by the Department of Natural Resources, Office of the Secretary, LR 26:1486 (July 2000).

**§893. Release**

A. In consideration for any benefits or payments received under any of the options set forth in these regulations, specifically §883, 885, 887 and/or 889, each leaseholder of an affected lease and/or any person and/or corporate person holding a property interest in an affected lease shall execute a receipt, release, indemnity and hold harmless agreement in favor of the United States of America, including the U.S. Army Corps of Engineers, the State of Louisiana, including the Louisiana Department of Natural Resources and the Louisiana Department of Wildlife and Fisheries, indicating that full and fair compensation has been made in complete satisfaction of all claims against the State and the United States of America, including the U.S. Army Corps of Engineers, related to past, present or future oyster damages in the affected lease, and related losses and expenses, including all claims in tort, pursuant to contract, or inverse condemnation theories and/or under any other applicable theory of recovery, including, but not limited to, 28 U.S.C. §1497. However, the hold harmless agreement for the retention option must also provide the right of the leaseholder under §887.B to elect an alternative option within one year from the initial selection of the retention option.

AUTHORITY NOTE: Promulgated in accordance with R.S. 56:432.1 et seq.

HISTORICAL NOTE: Promulgated by the Department of Natural Resources, Office of the Secretary, LR 26:1487 (July 2000).

**§895. Appeals**

A. A determination of the level of reasonable and allowable compensation shall be reconsidered by the secretary upon the department's timely receipt of the leaseholder's written notice under §895.C.

B. The reconsideration by the secretary shall be limited to two bases:

1. the leaseholder has substantial technical information evidencing inaccuracies in the measurement of a leases' bottom substrate, or inaccuracies in the assessment of the commercial quantity of living (i.e., live seed and marketable) oysters on the affected lease in applicable cases; or

2. the leaseholder has evidence that the determination of reasonable and allowable compensation is manifestly in error.

C. The leaseholder's request for reconsideration under this subpart shall be made in writing to the secretary, within 30 days of the secretary's determination of reasonable and allowable costs, and shall include, at a minimum:

1. a description of the specific basis for the request for reconsideration; and

2. a written report that includes specific technical information substantiating any alleged inaccuracies in the bottom substrate measurement or in the assessment of the quantity of living oysters on the affected lease.

D. The secretary's decision shall be made to the leaseholder, in writing, within 45 days of the department's receipt of the request for reconsideration.

AUTHORITY NOTE: Promulgated in accordance with R.S. 56:432.1 et seq.

HISTORICAL NOTE: Promulgated by the Department of Natural Resources, Office of the Secretary, LR 26:1487 (July 2000).

Katherine Vaughan  
Deputy Secretary

0007#093

**RULE**

**Department of Public Safety and Corrections  
Liquefied Petroleum Gas Commission**

Requirements; Applications and Sketches of School Bus and Mass Transit Vehicles; Inspections; Installation of Liquefied Petroleum Gas Systems Used as Engine Fuel System for School Bus/Mass Transit Vehicles; Fueling  
(LAC 55:IX.107, 201, 203, 205, 207)

In accordance with the provisions of R.S. 49:950 et seq., the Administrative Procedure Act, and R.S. 40:1846 relative to the authority of the Liquefied Petroleum Gas Commission to make and enforce reasonable rules and regulations governing the storage, sale, and transportation of liquefied petroleum gases, notice is hereby given that the commission amends its rules. The rule changes have no known impact on family formation, stability, and autonomy as described in R.S. 49:972.

**Title 55**

**PUBLIC SAFETY**

**Part IX. Liquefied Petroleum Gas**

**Chapter 1. General Requirements**

**Subchapter A. New Dealers**

**§107. Requirements**

A.-5.b. ...

c. Each location of Class 1, Class 6 and Class 8 dealers, which fill DOT specification cylinders of 100 lbs. or less, liquefied petroleum gas capacity, that are in commerce or transportation, shall provide a suitable weighing device (scales). The commission shall tag, inspect and check for accuracy the weighing device (scales) annually. A weighing device (scales) that have not been tagged, inspected and checked for accuracy shall not be used to determine the quantity of liquefied petroleum gas in cylinders.

6-13. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1846.

HISTORICAL NOTE: Adopted by the Department of public Safety, Liquefied Petroleum Gas Commission, November 1972, amended December 1974, LR 1:315 (July 1975), LR 4:86 (March 1978), LR 7:633 (December 1981), amended by the Department of Public Safety and Corrections, Liquefied Petroleum Gas Commission, LR 11:557 (May 1985), LR 15:854 (October 1989), LR 16:1063 (December 1990), LR 20:1400 (December 1994), LR 24:461 (March 1998), LR 24:2311 (December 1998), LR 25:1262 (July 1999), LR 25:2410 (December 1999), LR 26:1487 (July 2000).

**Chapter 2. School Bus and Mass Transit Installations  
[formerly Chapter 12]**

Editor's Note: This chapter applies to liquefied petroleum gas systems supplying liquefied petroleum gas to propel school buses and mass transit vehicles.

**§201. Applications/Sketches and Approval of School Bus and Mass Transit Vehicles; Final Inspections; Registrations; Renewal Registrations**

A. Prior to the initial installation of a liquefied petroleum gas system used as a motor fuel system on any school bus or mass transit vehicle, either public or private, an application/sketch shall be submitted to a Liquefied Petroleum Gas Commission inspector for review and initial approval. The name of the dealer making the installation must be stated on the application/sketch.

1. Exceptions

a. When an original equipment manufacturer (OEM) made the installation of the liquefied petroleum gas system, the prior to initial installation review and initial approval requirement of Part A is waived; however an application/sketch, registration, and final inspection must be performed prior to placing into service.

b. When the installation of the liquefied petroleum gas system is made out-of-state, the prior to initial installation review and initial approval requirement of Part A is waived; however, the application/sketch, registration, and final inspection must be performed prior to placing into service.

B. After installation of the liquefied petroleum gas system but prior to placing into service, the vehicle(s) will be registered with the Liquefied Petroleum Gas Commission, by means of the application/sketch and evidenced by a registration decal affixed to the vehicle.

C. A renewal registration shall be made annually by the owner, between February 1 and April 30. Renewal registration forms will be mailed from the Liquefied Petroleum Gas Commission office to the previous year's registrants.

D. After installation of the liquefied petroleum gas system but prior to placing into service, a final inspection shall be made by a Liquefied Petroleum Gas Commission inspector.

E. A liquefied petroleum gas dealer or owner shall not fuel any school bus/mass transit vehicle with liquefied petroleum gas to which a current registration decal is not permanently affixed.

F. It shall be a violation of the commission rules and regulations for an owner to operate any school bus/mass transit vehicle which is propelled by liquefied petroleum gas, to which a current registration decal is not permanently affixed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1846.

HISTORICAL NOTE: Promulgated by the Department of Public Safety and Corrections, Liquefied Petroleum Gas Commission, LR 18:866 (August 1992), amended LR 24:471 (March 1998), LR 26:1488 (July 2000).

**§203. Inspections**

A. A final inspection by a Liquefied Petroleum Gas Commission inspector is required on all newly installed liquefied petroleum gas systems.

B. The Liquefied Petroleum Gas Commission reserves the right to make an inspection of a liquefied petroleum gas system at any time.

C. All school bus/mass transit vehicles with renewal registrations shall be inspected between May 1 and July 31 by a Liquefied Petroleum Gas Commission inspector. It shall

be a violation of the Liquefied Petroleum Gas Commission rules and regulations to operate a school bus/mass transit vehicle without the required annual inspection.

D. A liquefied petroleum gas dealer shall not fuel any school bus/mass transit vehicle which has been condemned or placed out-of-service by the Liquefied Petroleum Gas Commission and notification published in an all dealer letter (A. D.).

E. No liquefied petroleum gas system shall be placed into service on any school bus/mass transit vehicle which does not comply with this Chapter and Chapter 8 of NFPA 58, that the commission has adopted.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1846.

HISTORICAL NOTE: Promulgated by the Department of Public Safety and Corrections, Liquefied Petroleum Gas Commission, LR 18:866 (August 1992), amended LR 24:471 (March 1998), amended LR 26:1488 (July 2000).

**§205. Installation of Liquefied Petroleum Gas Systems Used as Engine Fuel Systems for School Bus/Mass Transit Vehicles**

A. Installation of a liquefied petroleum gas system used as an engine fuel system for school bus/mass transit vehicles shall be in accordance with the applicable sections of NFPA 58, Chapter 8, that the commission has adopted.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1846.

HISTORICAL NOTE: Promulgated by the Department of Public Safety and Corrections, Liquefied Petroleum Gas Commission, LR 18:866 (August 1992), amended LR 24:471 (March 1998), amended LR 26:1488 (July 2000).

The effective date of these rule changes is August 1, 2000.

Charles M. Fuller  
Director

0007#021

**RULE**

**Department of Social Services  
Office of Rehabilitation Services  
Commission for the Deaf**

State Sign Language Interpreter and Cued  
Speech Transliterator Certification Standards  
(LAC 67:VII.Chapter 13)

Editor's Note: §1303 contained information which was valid for one year. That time has expired and this outdated section has been deleted.

In accordance with the provisions of R.S. 49:950, et seq., the Administrative Procedure Act, the Department of Social Services, Louisiana Rehabilitation Services (LRS), Louisiana Commission for the Deaf has adopted revisions to the rules affecting the certification of sign language interpreters and cued speech transliterators.

The purpose of this Rule is to provide revisions to the rules governing the procedures/standards used in the evaluation and certification of sign language interpreters and cued speech transliterators and list the qualifications of individuals who are eligible for certification at various skill levels.

**Title 67**  
**SOCIAL SERVICES**

**Part VII. Rehabilitation Services**

**Chapter 13. State Sign Language Interpreter and Cued Speech Transliterator Certification Standards**

**§1301. Certification Standards**

A. Certification Statement. All individuals who use the title Sign Language Interpreter must be certified by and registered with the Louisiana Commission for the Deaf.

1. Recognition of situational specialties will require action of the appropriate subcommittees of the Interpreter Certification Board.

a. Qualifications for certification:

- i. be at least 18 years of age; and
- ii. possess a high school diploma/GED; and
- iii. submit completed application forms and required documentation; and
- iv. pass appropriate examination(s); and
- v. possess no felony or misdemeanor convictions

for offenses which directly relate to the duties and responsibilities of an interpreter/transliterator; and

- vi. abide by state laws, rules and regulations; and
- vii. abide by the Registry of Interpreters for the Deaf, Inc. (RID) Code of Ethics; and

b. in addition, applicants shall agree to:

i. sign a release of information form allowing LCD to gain examination results from examining agency(ies); and

ii. pay membership and related application fees to contracted examining agency(ies).

c. Application. An individual interested in certification must contact the Louisiana Commission for the Deaf (LCD).

B. Examinations. The State Interpreter/Transliterator Certification Program includes the following.

1. Screening. To begin the certification process, the candidate must successfully pass a screening instrument which will be determined by the ICB as approved by the LCD.

2. Written/Verbal/Performance Components. Upon successful completion of screening, the candidate will be eligible for the written examination(s), which will assess knowledge of the general field of deafness including deaf culture; the profession of interpreting/transliterating for persons who are deaf, deaf-blind or hard of hearing and application of the RID Code of Ethics.

a. Upon successful completion of the written examination(s), the candidate will be eligible for the verbal and/or performance examination(s).

b. The verbal examination(s) may include but not be limited to assessing knowledge of the general field of deafness including deaf culture, the profession of interpreting/transliterating and application of the RID Code of Ethics.

c. The performance examination will assess the candidate's ability to interpret and/or transliterate in the appropriate mode(s).

3. Examination Instrument. The Interpreter Certification Board will determine the examination(s) to be administered as approved by the Louisiana Commission for the Deaf.

4. Examination Dates. Administration of examination(s) will be scheduled by the Interpreter Certification Board.

5. Notification of Examination(s) Results. Individual candidates will be notified of results. Results of any part of the examination(s) will be maintained in confidential files, however, successful completion of the interpreting/transliterating certification program will be a matter of public record.

6. Re-Application. Persons who do not successfully pass any section(s) of the examination may apply for re-examination of said section(s) after a waiting period as outlined in the State Interpreter/Transliterator Certification Program Procedures Manual.

7. No Shows. Failure to appear at an examination site at the appropriate time, for other than just cause as determined by ICB, will result in being placed at the bottom of the waiting list for the next available date.

C. Certificates

1. Certificate Criteria. The candidate:

a. must successfully complete the written examination(s); and

b. must successfully complete the verbal and/or performance examination(s);

c. must successfully complete a performance examination;

d. will be awarded various levels as outlined in the procedure manual of the Interpreter Certification Board.

2. Certificate Duration/Maintenance. Certificates shall be continuous as long as the individual interpreter meets certificate maintenance requirements as outlined in the State Interpreter/Transliterator Certification Program Procedures Manual. Certificate maintenance requirements shall include but not be limited to professional growth and development, and field work.

a. Certificates shall be terminated when maintenance requirements are not met, but may be restored as outlined in the State Interpreter/Transliterator Certification Program Procedures Manual.

3. Recognition. Recognition of interpreting/transliterating certificates shall be approved as outlined in the State Interpreter/Transliterator Certification Program Procedures Manual.

4. Appeals. Individuals who disagree with the examination procedure and/or decisions of the Interpreter Certification Board have the right of appeal as outlined in the State Interpreter/Transliterator Certification Program Procedures Manual.

AUTHORITY NOTE: Promulgated in accordance with R.S. 46:2351-2354 and 46:2361-2374.

HISTORICAL NOTE: Promulgated by the Department of Social Services, Louisiana Rehabilitation Services, Louisiana Commission for the Deaf, LR 17:389 (April 1991), amended LR 18:968 (September 1992), LR 19:304 (March 1993), LR 19:905 (July 1993), LR 21:838 (August 1995), LR 26:1489 (July 2000).

**§1303. Repealed**

J. Renea Austin-Duffin  
Secretary

0007#092

## RULE

### Department of the Treasury Board of Trustees of the State Employees' Retirement System

Retiree Election, Purchase of Military Service,  
Disability Eligibility and Spousal Consent,  
Excess Benefit Plan and Optional Retirement Plan  
(LAC 58:I.503, 701, 2513, 2903,  
3101-3115, and 3501-3519)

Under the authority of R.S. 11:515 and in accordance with R.S. 49:951, et seq., the Department of the Treasury, Board of Trustees of the Louisiana State Employees' Retirement System ("LASERS") is amending LAC 58.I.503, 701, 2513, 2903, and enacting LAC 58.I.3101-3115 and 3501-3519. Chapter 31 is being redesignated as Chapter 35. The amendments change the election rules for retired member trustees, the purchase of military service, certification of continuing eligibility for disability, and instances where spousal consent is required. The enactments establish rules for the excess benefit arrangement and the optional retirement plan. The amendments and enactments have no impact on family formation, stability, and autonomy as set forth in R.S. 49:972.

#### Title 58 RETIREMENT

##### Part 1. State Employees' Retirement

#### Chapter 5. Election of Retired Member Trustees

##### §503. Election Rules

A. A candidate for a position of retired member trustee on the board of trustees must be a retired member of the system (not including retired status under the Deferred Retirement Option Plan) by the date on which nominations close. The board of trustees shall accept the name and social security number of every candidate nominated by petition of 25 or more retired members of the system and shall place the name of such candidates on the ballot, provided each such candidate meets the requirements for trustee. The petitioning retired members' signatures must be accompanied by their social security numbers. All nominations for the board of trustees election must be in the office of the Retirement System no later than the second Tuesday in July, close of business (4:30 p.m. Central Daylight Savings Time).

B.-K. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:511 and R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 22:373 (May 1996), amended LR 23:996 (August 1997), LR 25:1278 (July 1999), LR 26:1490 (July 2000).

#### Chapter 7. Purchase of Military Service

##### §701. Purchase of Military Service

A. A maximum of four years of credit for military service may be purchased by active members who rendered military service in accordance with R.S. 29:411, 412, and 415.1, provided the active member received a discharge other than dishonorable. This provision shall not be applicable to DROP participants (R.S. 29:415.1).

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:515 and R.S. 11:153.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 22:373 (May 1996), amended LR 26:1490 (July 2000).

#### Chapter 25. Procedures for Processing Disability Applications

##### §2513. Certification of Continuing Eligibility

A. LASERS may require a disability retiree to undergo a medical examination once each year during the first five years following the disability retirement, and once in every three-year period thereafter until the retiree has reached the equivalent age of regular retirement.

B. LASERS shall schedule the appointment with a state medical board or appointed alternate physician and notify the disability retiree of the appointment time and place in writing. LASERS must pay the cost of this examination. If the retiree fails to appear for this examination and the physician charges a cancellation fee, the retiree shall be responsible for this fee.

C.-D. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 22:373 (May 1996), amended LR 24:1959 (October 1998), LR 26:1490 (July 2000).

#### Chapter 29. Spousal Consent

##### §2903. Instances where Spousal Consent is Not Required

A. The following list sets out those instances where spousal consent is not necessary and will not be required:

1. the spouses are divorced, in which case LASERS needs a certified copy of a judgment of divorce;

2.-3.c. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 22:373 (May 1996), amended LR 26:1490 (July 2000).

#### Chapter 31. Excess Benefit Arrangement

##### §3101. Participation

A. All retired members and beneficiaries of the system whose retirement or survivor or beneficiary benefits from the system for a plan year have been limited by IRC Section 415 are participants in this plan. Participation in the plan is determined for each plan year. Participation in the plan will cease for any plan year in which the retirement benefit of a member of the system or a survivor or beneficiary is not limited by IRC Section 415.

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:511 and R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 26:1490 (July 2000).

##### §3103. Benefit

A. A participant in the plan shall receive a monthly benefit equal to the difference between the participant's monthly retirement benefit otherwise payable from the system prior to any reduction or limitation of IRC Section 415 and the actual monthly retirement benefit payable from the system as limited by IRC Section 415. The monthly benefit shall be subject to withholding for any applicable income or employment taxes. The form of the benefit paid to a participant from the plan shall be the same as otherwise selected by the participant and payable by the system.

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:511 and R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 26:1490 (July 2000).

### **§3105. Contributions**

A. The system shall determine the required contribution to pay plan benefits for each plan year. The required contribution for each plan year shall be the total amount of benefits payable to all participants and their survivors or beneficiaries and such amount as determined by the system to pay the administrative expenses of the plan and the employer's share of any employment taxes on the benefits paid from the plan.

B. The required contributions as determined in the preceding subsection shall be paid into the plan fund from an allocation of the employer contributions paid to the system.

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:511 and R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 26:1491 (July 2000).

### **§3107. Excess Plan Fund**

A. Contributions to the plan shall be deposited on a monthly basis in a separate fund established and administered by the system. This fund is intended to be exempt from federal income tax under IRC Sections 115 and 415(m)(1).

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:511 and R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 26:1491 (July 2000).

### **§3109. Funding Assets**

A. The benefit liabilities of the plan shall be funded on a month to month basis. The fund established hereunder shall not be accumulated to pay benefits payable in future months. Any assets of the fund not used for paying benefits for a current month shall be used, as determined by the system, for the payment of administrative expenses of the plan for future months or paid to the system as an additional employer contribution.

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:511 and R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 26:1491 (July 2000).

### **§3111. Non-Assignability of Benefits**

A. The benefits payable under the plan may not be assigned or alienated by a participant, except as otherwise permitted for benefits payable by the system.

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:511 and R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 26:1491 (July 2000).

### **§3113. Plan Administration**

A. The system shall have the authority to administer the plan as provided at R.S. 11:454.

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:511 and R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 26:1491 (July 2000).

### **§3115. Retirement Benefit**

A. Any and all payments made pursuant to this plan shall be considered part of a retirement benefit as provided for any member, survivor or beneficiary of the system.

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:511 and R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 26:1491 (July 2000).

## **Chapter 35. Optional Retirement Plan**

### **§3501. Plan Year**

A. The Plan Year for the Optional Retirement Plan (ORP) shall be July 1 through June 30.

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:511 and R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 26:1491 (July 2000).

### **§3503. Participation**

A. Any unclassified state employee who is appointed by a statewide elected official and whose appointment is subject to confirmation by the Louisiana Senate and any unclassified state employee who is a member of the immediate staff of any such employee, and the chief executive officer of the State Group Benefits Program are eligible to participate in the ORP.

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:511 and R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 26:1491 (July 2000).

### **§3505. Election to Participate**

A. An irrevocable election to participate in the ORP must be made in writing and filed with system within 60 days after the eligible employee begins work. Elections shall be effective as of the date of appointment. If an eligible employee fails to make an election to participate in the ORP within 60 days of appointment, he shall become a member of the defined benefit plan as of the date of appointment.

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:511 and R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 26:1491 (July 2000).

### **§3507. Employee Contributions**

A. Each participant in the ORP shall contribute monthly the same amount that a regular member would have contributed under R.S. 11:62(5)(e). This amount shall be forwarded to the ORP provider, less an administrative cost that shall be established by LASERS. The initial administrative cost shall be set at one percent of employee earnings but may be adjusted annually in writing to reflect the actual cost incurred by LASERS to perform this function, but shall not exceed 1 percent without an amendment to this rule.

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:511 and R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 26:1491 (July 2000).

### **§ 3509. Employer Contributions**

A. Each employer agency shall contribute to LASERS on behalf of each participant in the ORP the same amount that would have been contributed to the defined benefit plan. LASERS shall pay over to the ORP provider an amount

equal to the employer's portion of the normal cost contributions as set forth in the actuarial valuation of the retirement system. LASERS shall maintain that portion of the employer's contribution, which applies to the unfunded accrued liability, which exceeds the employer's portion of the normal cost contribution. LASERS may also retain an additional portion of the employer contributions for any adverse actuarial impact as a result of employees participating in the ORP in accordance with R.S. 11:502.3 B.(3).

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:511 and R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 26:1491 (July 2000).

#### **§3511. ORP Provider**

A. The system shall provide no more than three providers, selected by a competitive process, for participants to utilize in selecting investment options for the employee and employer contributions that are provided for by the preceding sections.

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:511 and R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 26:1492 (July 2000).

#### **§3513. Investment Options**

A. The investment options available to participants shall be those as established by the ORP provider and selected by the ORP participant.

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:511 and R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 26:1492 (July 2000).

#### **§3515. Benefit Obligations**

A. All benefits payable to participants under the ORP shall be the sole obligation of the ORP provider to which contributions are made, and shall not be the obligation of LASERS. Payments to participants or their beneficiaries shall be made by the ORP provider and not LASERS in accordance with the contracts approved for use in the ORP. Participants in the ORP shall not be entitled to any benefits under the defined benefit plan, and once a choice is made by a participant to participate in the ORP, that individual will be ineligible to participate in the defined benefit plan.

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:511 and R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 26:1492 (July 2000).

#### **§3517. Distribution**

A. Distribution from the ORP to participants shall only be made after termination of employment with the state of Louisiana in accordance with applicable Internal Revenue Code provisions.

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:511 and R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 26:1492 (July 2000).

#### **§3519. Sunset**

A. Currently the law provides that the authority to enroll eligible employees in the ORP shall terminate on July 1, 2001. Those eligible employees who enroll or transfer prior

to that date shall continue participation in the ORP in accordance with the provisions of the ORP even if the plan actually sunsets.

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:511 and R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 26:1492 (July 2000).

### **Chapter 35. Repeal of Prior Rules**

#### **§3501. Repeal of Prior Rules**

A. All rules and regulations adopted by LASERS prior to the effective date of this rule are hereby repealed in their entirety.

AUTHORITY NOTE: Promulgated in accordance with R.S. 11:515.

HISTORICAL NOTE: Promulgated by the Department of Treasury, Board of Trustees of the State Employees' Retirement System, LR 22:373 (May 1996), amended LR. 26:1492 (July 2000).

Glenda Chambers  
Executive Director

0007#002

### **RULE**

#### **Department of Wildlife and Fisheries Wildlife and Fisheries Commission**

#### **Alligator Regulations (LAC 76:V.701)**

The Wildlife and Fisheries Commission does amend the regulations governing the Alligator Regulations (LAC 76:V.701).

### **Title 76**

#### **WILDLIFE AND FISHERIES**

#### **Part V. Wild Quadrupeds and Wild Birds**

#### **Chapter 7. Alligators**

#### **§701. Alligator Regulations**

1.-3.h ...

i. No person, firm, or corporation shall transport into this state or possess whole alligator(s) with skin on, alligator parts or alligator skins/hides unless that person, firm or corporation is a Louisiana licensed alligator parts dealer or fur dealer and is in immediate possession of an alligator parts dealer's license or fur dealer's license, except that a copy of such license shall be sufficient during transportation only. Persons, firms or corporations violating this Subparagraph shall be subject to the penalties as provided in Title 56:34, a Class Four violation; except that when such a violation involves alligator parts only, such offenses shall be subject to the penalties as provided in Title 56:32, a Class Two violation.

3.j.-3.o. ...

p. For the purpose of bonafide 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.-5.h. ...

6. Alligator Hide Tag Procurement and Tagging Requirements

6.a. ...

b. Landowners, Land Managers and Hunters. upon application to the Department on forms provided for tag issuance. Applications for alligator tag allotments will be taken annually beginning July 15th and ending the day before the season opens. Tags will not be issued after close of business on the day prior to the season opening date.

6.b.i.-8.f. ...

9. Importation, Exportation, Purchase and Sale

a. Live alligators may be brought into the state only if the person, firm or corporation bringing the alligators into the state has obtained written permission from the Department. Violation of this Subparagraph is a class 4 violation as described in Title 56.

9.b.-11.e.ii.(a). ...

(b). Official shipping manifest including total length in inches (or feet and inches) referenced to CITES tag number of each skin in shipment. A fully executed (filled out) shipping manifest containing all information required in the buyer/dealer record may be substituted with department approval for the buyer/dealer record requirement on farm raised alligator skins.

11.e.ii.(c).-14.i. ...

j. The alligator egg collection permittee and the landowner are responsible for the return of the percentage of live alligators to the wild described on the alligator egg collection permit. This requirement is nontransferable. Minimum return rates will be based upon the state average hatching success which is 78 percent. In no case shall the return rate be less than 14 percent at 48 inches total length. Each alligator shall be returned to the original egg collection area within a maximum time of two years from date of hatching. Each alligator shall be a minimum of 36" and a maximum of 60" (credit will not be given for inches above 60") in size and the returned sex ratio should contain at least 50 percent females. The alligator egg collection permittee/landowner are responsible for and must compensate in kind for alligator mortality which occurs for Department-authorized return to the wild alligators while being processed, stored, or transported. The department shall be responsible for supervising the required return of these alligators. A department transfer authorization permit is not required for return to the wild alligators which are delivered to the farm of origin no more than 48 hours prior to being processed for wild release. Releases back to the wild will only occur between March 15 and August 25 of each calendar year provided that environmental conditions as determined by the Department are favorable for survival of the released alligators. Any farmer who owes 1000 or more alligators at 48" must release at least 1/4 of the total owed for that year by April 30; at least another quarter by June 15, at least another quarter by July 31; and the remainder by August 25. A farmer may do more than the required one-fourth of his releases earlier if available

unscheduled days allow. Should an alligator egg collection permittee be unable to release the required number of alligators to the wild from his own stock, he shall be required to purchase additional alligators from another farmer to meet compliance with the alligator egg collection permit and these regulations, as supervised by the department. Department-sanctioned participants in ongoing studies involving survivability and return rates are exempt from these requirements during the period of the study. Violation of this Subparagraph is a Class Four violation as described in Title 56.

14.k.-17.c. ...

AUTHORITY NOTE: Promulgated in accordance with RS. 56:115, R.S. 56:259, R. S. 56:262, R.S. 56:263 and R.S. 56:280.

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).

Thomas M. Gattle, Jr.  
Chairman

0007#042

**RULE**

**Department of Wildlife and Fisheries  
Wildlife and Fisheries Commission**

**Flotation Devices (LAC 76:XI.103)**

The Wildlife and Fisheries Commission does hereby amend the regulations on Type IV Personal Flotation Devices (PFDs).

**Title 76**

**WILDLIFE AND FISHERIES**

**Part XI. Boating**

**Chapter 1. Flotation Devices, Fire Extinguishers, Flame Arrestors and Ventilation**

**§103. Flotation Devices**

A. ...

B. Regulations prescribed by the commission as to the type and number of personal flotation devices required on recreational boats while a watercraft is in use on the waters of this state are as follows.

1. Class A Watercraft (less than 16 feet in length). Shall carry at least one, type I, II, or III personal flotation device for each person on board. The P.F.D. must bear the U.S. Coast Guard approval number and must be of the appropriate sizes and serviceable.

B.2.-7.D. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 34:851.24.

HISTORICAL NOTE: Promulgated by the Department of Wildlife and Fisheries, Wildlife and Fisheries Commission, LR 11:705 (July 1985), amended LR 26:1493 (July 2000).

Thomas M. Gattle, Jr.  
Chairman

0007#041

## RULE

### Department of Wildlife and Fisheries Wildlife and Fisheries Commission

#### General and WMA Hunting (LAC 76:XIX.111)

The Wildlife and Fisheries Commission does hereby amend the rules and regulations governing the hunting of resident game birds and game quadrupeds.

#### Title 76

#### WILDLIFE AND FISHERIES

#### Part XIX. Hunting and WMA Regulations

#### Chapter 1. Resident Game Hunting Seasons

#### §111. General and Wildlife Management Area

#### Hunting Rules and Regulations

##### A. Hunting Seasons and Wildlife Management Area Regulations

1. The rules and regulations contained within this digest have been officially approved and adopted by the Wildlife and Fisheries Commission under authority vested by Sections 115 and 116 of Title 56 of the Louisiana Revised Statutes of 1950 and are in full force and effect in conjunction with all applicable statutory laws. The secretary of the Department of Wildlife and Fisheries has the authority to close or alter seasons in emergency situations in order to protect fish and wildlife resources.

2. Pursuant to Section 40.1 of Title 56 of the Louisiana Revised Statutes of 1950, the Wildlife and Fisheries Commission has adopted monetary values which are assigned to all illegally taken, possessed, injured or destroyed fish, wild birds, wild quadrupeds and other wildlife and aquatic life. Anyone taking, possessing, injuring or destroying fish, wild birds, wild quadrupeds and other wildlife and aquatic life shall be required to reimburse the Department of Wildlife and Fisheries a sum of money equal to the value of the wildlife illegally taken, possessed, injured or destroyed. This monetary reimbursement shall be in addition to any and all criminal penalties imposed for the illegal act.

##### B. Resident Game Birds and Animals

1. Shooting hours: one-half hour before sunrise to one-half hour after sunset.

##### C. Other Season Dates

1. Turkey. Please refer to separate pamphlet.

2. Raccoon and Opossum. No closed season. Raccoon and opossum can be taken at night by one or more licensed hunters with one or more dogs and one .22 rimfire firearm. A licensed hunter may take raccoon or opossum with .22 rimfire, muzzleloader rifle .36 caliber or smaller or shotgun during daylight hours during the open rabbit season. Hunting from boats or motor vehicles is prohibited. No bag limit for nighttime or daytime raccoon or opossum hunting during the open trapping season except on certain WMAs as listed. The remainder of the year, the raccoon and opossum bag limit for daytime or nighttime is one per person per day or night. No one who hunts raccoons or opossums as prescribed above shall pelt during the closed trapping season nor sell skins or carcasses of raccoons and opossums taken during the open trapping season unless he is the holder of a valid trapping license which shall be required in addition to his basic

hunting license. Pelting or selling carcasses is illegal during closed trapping season.

3. Blackbirds and crows. All blackbirds, cowbirds, grackles and crows are considered crop depredators in Louisiana and may therefore be taken year round during legal shooting hours with no limit. Shooting hours are 30 minutes before sunrise to sunset.

##### 4. Pheasant

a. Bag limit: 2 (males only). Possession limit: 4.

b. Pheasant season restricted to the following portion of Calcasieu and Cameron parishes: That portion west of Choupique Bayou south of U.S. 90 and La. 27, west of La. 27 to north boundary of Sabine NWR, north of Sabine NWR north boundary to Sabine River, east of Sabine River to Intracoastal waterway, south of Intracoastal waterway to Gum Cove, east of Gum Cove Road to La. 108, north and east of La. 108 from Gum Cove Road to U.S. 90, and south of U.S. 90 from Vinton to Choupique Bayou.

5. Falconry. Special permit required. Resident and migratory game species except turkeys may be taken. Seasons and bag limits are the same as for statewide and WMA regulations except squirrels may be taken by licensed falconers until the last day of February. Refer to LAC 76:V.301 for specific Falconry Rules.

6. Licensed Hunting Preserve. October 1-April 30. Pen-raised birds only. No limit entire season. Refer to LAC 76:V.305 for specific Hunting Preserve Rules.

7. Deer Management Assistance Program (DMAP). Land enrolled in the voluntary program will be assessed a \$25 registration fee and \$0.05/acre fee. Deer management assistance tags must be in the possession of the hunter and attached and locked to antlerless deer (including those taken on either-sex days and those taken with bow and muzzleloader) through the hock in a manner that it cannot be removed before the deer is moved from the site of the kill. Failure to do so is a violation of R.S. 56:115. Failing to follow DMAP rules and regulations may result in immediate cancellation of the program on those lands involved. Refer to LAC 76:V.111 for specific DMAP Rules.

8. Farm Raised White-tailed Deer and Exotics on Licensed Supplemented Shooting Preserves

##### a. Definitions

*Exotics* for purposes of this rule means any animal of the family Bovidae (except the Tribe Bovini [cattle]) or Cervidae which is not indigenous to Louisiana and which is confined on a Supplemented Hunting Preserve. Exotics shall include, but are not limited to, fallow deer, red deer, elk, sika deer, axis deer, and black buck antelope.

*Hunting* in its different tenses and for purposes of this rule means to take or attempt to take, in accordance with R.S. 56:8.

*Same as Outside* for purposes of this rule means hunting on a Supplemented Hunting Preserve must conform to applicable statutes and rules governing hunting and deer hunting, as provided for in Title 56 of the Louisiana Revised Statutes and as established annually by the Wildlife and Fisheries Commission (LWFC).

*Supplemented Hunting Preserve* for purposes of this rule means any enclosure for which a current Farm-Raising License has been issued by the Department of Agriculture and Forestry (LDAF) with concurrence of the Department of Wildlife and Fisheries (LDWF) and is

authorized in writing by the LDAF and LDWF to permit hunting.

*White-Tailed Deer* for purposes of this rule means any animal of the species *Odocoileus virginianus* which is confined on a Supplemented Hunting Preserve.

b. Seasons

i. Farm-Raised White-tailed Deer: consult the regulations pamphlet.

ii. Exotics: year round.

c. Methods of Take

i. White-tailed Deer. Same as outside.

ii. Exotics. Exotics may be taken with longbow (including compound bow) and arrow; shotguns not larger than 10-gauge, loaded with buckshot or rifled slug; handguns and rifles no smaller than .22 caliber centerfire; or muzzleloading rifles or pistols, .44 caliber minimum, or shotguns 10-gauge or smaller, all of which must load exclusively from the muzzle or cap and ball cylinder, using black powder or an approved substitute only, and using ball or bullet projectile, including sabot bullets only.

d. Shooting Hours

i. White-tailed Deer. Same as outside.

ii. Exotics: one-half hour before sunrise to one-half hour after sunset.

e. Bag Limit

i. Farm-Raised White-tailed Deer: Same as outside.

ii. Exotics: No limit.

f. Hunting Licenses

i. White-tailed Deer: Same as outside.

ii. Exotics: No person shall hunt any exotic without possessing a valid basic and big game hunting license.

g. Tagging. White-tailed Deer and Exotics: Each animal shall be tagged in the left ear or left antler immediately upon being killed and before being moved from the site of the kill with a tag provided by the LDAF. The tag shall remain with the carcass at all times.

D. Hunting-General Provisions

1. A basic resident or non-resident hunting license is required of all persons to hunt, take, possess or cause to be transported by any other person any wild bird or quadruped. See information below for exceptions.

2. No person born on or after September 1, 1969 shall hunt with a firearm unless that person has first been issued a certificate of satisfactory completion of a firearm and hunter education course taught or approved by the Department of Wildlife and Fisheries. However, a person younger than 16 years of age may hunt without such certificate if he is accompanied by and is under the direct and immediate supervision of a person 18 years of age or older.

3. A big game license is required in addition to the basic hunting license to hunt, take, possess or cause to be transported any deer or turkey. A separate wild turkey stamp is required in addition to the basic hunting license and the big game license to hunt, take, possess or cause to be transported any turkey.

4. Taking game quadrupeds or birds from aircraft or participating in the taking of deer with the aid of aircraft or from automobiles or other moving land vehicles is prohibited.

5. Methods of taking resident game birds and quadrupeds.

a. Use of a longbow (including compound bow) and arrow or a shotgun not larger than a 10 gauge fired from the shoulder without a rest shall be legal for taking all resident game birds and quadrupeds. Also, the use of a handgun, rifle and falconry (special permit required) shall be legal for taking all game species except turkey and migratory game birds. It shall be illegal to hunt or take squirrels or rabbits at any time with a breech-loaded rifle or handgun larger than a .22 caliber rimfire or a muzzleloader rifle larger than .36 caliber. During closed deer gun season, it shall be illegal to possess shotgun shells loaded with slugs or shot larger than BB lead or F steel shot while small game hunting.

b. Still hunting is defined as stalking or stationary stand hunting without the use of dog(s). Pursuing, driving or hunting deer with dogs is prohibited when or where a still hunting season or area is designated, and will be strictly enforced. Shotguns larger than 10-gauge or capable of holding more than three shells shall be prohibited. Plugs used in shotguns must be incapable of being removed without disassembly. Refer to game schedules contained within these regulations for specific restrictions on the use of firearms and other devices.

6. Nuisance Animals. Landowners or their designees may remove beaver and nutria causing damage to their property without a special permit. Water set traps and firearms may be used to remove beaver; nutria may be removed by any means except that nutria cannot be taken by the use of headlight and gun between the hours of sunset and sunrise. With a special permit issued by the department, beavers may be taken between one-half hour after official sunset to one-half hour before official sunrise for a period of three consecutive calendar evenings from the effective date of the permit. For specific details contact a regional office near you. Any nuisance beaver or nutria trapped or shot outside open trapping season cannot be pelted or sold. A trapping license is required to possess, sell or pelt nuisance beavers or nutria taken during open trapping season. Squirrels found destroying commercial crops of pecans may be taken year-round by permit issued by the department. This permit shall be valid for 30 days from the date of issuance. Contact the local regional office for details.

7. Threatened and Endangered Species. Louisiana black bear, Louisiana pearl shell (mussel), sea turtles, gopher tortoise, ringed sawback turtle, brown pelican, bald eagle, peregrine falcon, whooping crane, Eskimo curlew, piping plover, interior least tern, ivory-billed woodpecker, red-cockaded woodpecker, Bachman's warbler, West Indian manatee, Florida panther, pallid sturgeon, Gulf sturgeon, Attwater's greater prairie chicken, whales and red wolf. Taking or harassment of any of these species is a violation of state and federal laws.

8. Unregulated Quadrupeds. Holders of a legal hunting license may take coyotes, unmarked hogs where legal, and armadillos year round during legal daylight shooting hours. The running of coyotes with dogs is prohibited in all turkey hunting areas during the open turkey season. Coyote hunting is restricted to "chase only" during still hunting segments of the firearm and archery only season for deer. Foxes and bobcats are protected quadrupeds and may be taken only by licensed trappers during the trapping

season. Remainder of the year "chase only" permitted by licensed hunters.

9. Hunting and/or Discharging Firearms on Public Roads. Hunting, standing, loitering or shooting game quadrupeds or game birds with a gun during open season while on a public highway or public road right-of-way is prohibited. Hunting or the discharge of firearms on roads or highways located on public levees or within 100 feet from the centerline of such levee roads or highways is prohibited. Spot lighting or shining from public roads is prohibited by state law. Hunting from all public roads and rights-of-way is prohibited and these provisions will be strictly enforced.

10. Tags. Any part of the deer or wild turkey divided shall have affixed thereto the name, date, address and big game license number of the person killing the deer or wild turkey and the sex of that animal. This information shall be legibly written in pen or pencil, on any piece of paper or cardboard or any material, which is attached or secured to or enclosing the part or parts. On lands enrolled in DMAP, deer management assistance tags must be attached and locked through the hock of antlerless deer (including those taken with bow and muzzleloader and those antlerless deer taken on either-sex days) in a manner that it cannot be removed, before the deer is moved from the site of the kill.

11. Sex Identification. Positive evidence of sex identification, including the head, shall remain on any deer taken or killed within the State of Louisiana, or on all turkeys taken or killed during any special gobbler season when killing of turkey hens is prohibited, so long as such deer or turkey is kept in camp or field, or is en route to the domicile of its possessor, or until such deer or turkey has been stored at the domicile of its possessor or divided at a cold storage facility and has become identifiable as food rather than as wild game.

#### E. General Deer Hunting Regulations

1. One antlered and one antlerless (when legal on private lands) deer per day except on Wildlife Management Areas, Federal Refuges and National Forest Lands where the daily limit shall be one deer per day. Six per season (all segments included) by all methods of take.

2. A legal buck is a deer with visible antler of hardened bony material, broken naturally through the skin. Killing bucks without at least one visible antler as described above and killing does is prohibited except where specifically allowed.

3. Deer hunting restricted to legal bucks only, except where otherwise allowed.

4. Either-sex deer is defined as male or female deer. Taking or possessing spotted fawns is prohibited.

5. It is illegal to hunt or shoot deer with firearms smaller than .22 caliber centerfire or a shotgun loaded with anything other than buckshot or rifled slug. Handguns may be used for hunting.

6. Taking game quadrupeds or birds from aircraft, participating in the taking of deer with the aid of aircraft or from automobiles or other moving land vehicles is prohibited.

7. Still hunting is defined as stalking or stationary stand hunting without the use of dog(s). Pursuing, driving or hunting deer with dogs or moving vehicles, including ATVs, when or where a still hunting season or area is designated, is prohibited and will be strictly enforced. The training of deer

dogs is prohibited in all still hunting areas during the gun still hunting and archery only season. Deer hunting with dogs is allowed in all other areas having open deer seasons that are not specifically designated as still hunting only. Use of dogs to trail wounded deer is expressly prohibited in still hunting areas.

8. Areas not specifically designated as open are closed.

9. Muzzleloader Segment. (Special license and muzzleloader firearms specifications apply only to the special state, WMA, National Forest and Preserves, and Federal Refuge seasons.) Still hunt only. Specific WMAs will also be open, check WMA schedule for specific details. Muzzleloader license required for resident hunters between the ages of 16 and 59 inclusive and non-residents 16 years of age and older. Either sex deer may be taken in all deer hunting areas except Area 5 and as specified on Public Areas. It is unlawful to carry a gun, including those powered by air or other means, while hunting during the special muzzleloader segment. Except, it is lawful to carry a .22 caliber rimfire pistol loaded with #12 shot (ratshot only).

a. Legal Muzzleloader Firearms For Special Season. Rifles or pistols, .44 caliber minimum, or shotguns 10 gauge or smaller, all of which must load exclusively from the muzzle or cap and ball cylinder, use black powder or approved substitute only, take ball or bullet projectile only, including sabot bullets and be fitted only with iron sights or non-magnifying scopes except persons 60 years of age or older may use magnified scopes. This includes those muzzleloaders known as "inline" muzzleloaders.

10. Archery Segment. Consult regulations pamphlet. WMA seasons are the same as outside except as noted below. Archery license required for resident bow hunters between the ages of 16 and 59 inclusive and non-residents 16 years of age and older. Residents 60 years of age and older may use a crossbow without a special permit or license. Either sex deer may be taken in all areas open for deer hunting except when a bucks only season is in progress for gun hunting, archer's must conform to the bucks only regulations. Either sex deer may be taken on WMAs at anytime during archery season except when bucks only seasons are in progress on the respective WMA. Also, archery season restricted on Atchafalaya Delta, Salvador, Pass-a-Loutre and Point-au-Chien WMAs (see schedule).

a. Bow and arrow regulations. Hunting arrows for deer must have well-sharpened metal broadhead blades not less than 7/8 inch in width. Bow and arrow fishermen must have a sport fishing license and not carry any arrows with broadhead points unless a big game season is in progress.

i. It is unlawful:

(a). to carry a gun, including those powered by air or other means, while hunting with bow and arrow during the special bow and arrow deer season except it is lawful to carry a .22 caliber rimfire pistol loaded with #12 shot (ratshot) only.

(b). to have in possession or use any poisoned or drugged arrow, arrows with explosive tips, or any bow drawn, held or released by mechanical means except that hand held releases are lawful.

(c). to hunt deer with a bow having a pull less than 30 pounds.

(d). to hunt with a bow or crossbow fitted with an infrared or laser sight.

11. Hunter Orange. Any person hunting deer shall display on his head, chest and/or back a total of not less than 400 square inches of "hunter orange" during the open deer gun season including muzzleloader season. Persons hunting on privately owned, legally posted land may wear a cap or a hat that is completely covered with hunter orange material in lieu of the 400 square inches. These provisions shall not apply to persons hunting deer from elevated stands on property that is privately owned and legally posted or to archery deer hunters hunting on legally posted lands where firearm hunting is not allowed by agreement of the landowner or lessee. Warning: deer hunters are cautioned to watch for persons hunting other game or engaged in activities not requiring "hunter orange."

12. Special Handicapped Either-Sex Deer Season on Private Land. See regulations pamphlet for dates. Restricted to individuals with Physically Challenged Hunter Permit.

13. Special Youth Deer Hunt. See regulations pamphlet for dates.

#### F. Description of Areas

##### 1. Area 1

a. All of the following parishes are open: Catahoula, East Feliciana, St. Helena, Concordia, Franklin, Tensas, East Baton Rouge, Madison, Washington.

b. Portions of the following parishes are also open.

i. Avoyelles-North of La. 1.

ii. Catahoula-All except that portion lying north and east of the Ouachita River to the Boeuf River. West of Boeuf River north to Caldwell parish line.

iii. Grant-East of U.S. 165 and south of La. 8.

iv. LaSalle-Portion south of La. 8 from Little River eastward to La. 127 in Jena, east of La. 127 from Jena northward to U.S. 165, east of U.S. 165 from La. 127 northward to Caldwell Parish line.

v. Livingston-North of I-12.

vi. Rapides-East of U.S. 165 and north of Red River.

vii. St. Tammany-All except that portion south of I-12, west of Hwy. 1077 to La. 22, south of La. 22 to Tchefuncte River, west of Tchefuncte River southward to Lake Pontchartrain.

viii. Tangipahoa-North of I-12.

ix. West Feliciana-All except that portion known as Raccourci and Turnbull Island.

c. Still hunting only in all or portions of the following parishes.

i. Avoyelles-That portion surrounding Pomme de Terre WMA, bounded on the north, east, and south by La. 451 and on the west by the Big Bend Levee from its junction at the Bayou des Glaise structure east of Bordelonville, southward to its juncture with La. 451.

ii. Catahoula-South of Deer Creek to Boeuf River, east of Boeuf and Ouachita Rivers to La. 8 at Harrisonburg, west of La. 8 to La. 913, west of La. 913 and La. 15 to Deer Creek.

iii. East Feliciana and East Baton Rouge-East of Thompson Creek from the Mississippi line to La. 10. North of La. 10 from Thompson Creek to La. 67 at Clinton, west of La. 67 from Clinton to Mississippi line. South of Mississippi line from La. 67 to Thompson Creek. Also that portion of

East Baton Rouge Parish east of La. 67 from La. 64 north to Parish Line, south of Parish Line from La. 64 eastward to Amite River. West of Amite River southward to La. 64, north of La. 64 to La. 37 at Magnolia, east of La. 37 northward to La. 64 at Indian Mound, north of La. 64 from Indian Mound to La. 67. Also, that portion of East Feliciana Parish east of La. 67 from parish line north to La. 959, south of La. 959 east to La. 63, west of La. 63 to Amite River, west of Amite River, southward to parish line, north of parish line westward to La. 67.

iv. Franklin. All

v. St. Helena-North of La. 16 from Tickfaw River at Montpelier westward to La. 449, east and south of La. 449 from La. 16 at Pine Grove northward to La. 1045, south of La. 1045 from its junction with La. 449 eastward to the Tickfaw River, west of the Tickfaw River from La. 1045 southward to La. 16 at Montpelier.

vi. Tangipahoa-That portion of Tangipahoa Parish north of La. 10 from the Tchefuncte River to La. 1061 at Wilmer, east of La. 1061 to La. 440 at Bolivar, south of La. 440 to the Tchefuncte River, west of the Tchefuncte River from La. 440 southward to La. 10.

vii. Washington and St. Tammany-East of La. 21 from the Mississippi line southward to the Bogue Chitto River, north of the Bogue Chitto River from La. 21 eastward to the Pearl River Navigation Canal, east of the Pearl River Navigation Canal southward to the West Pearl River, north of the West Pearl River from the Pearl River Navigation Canal to Holmes Bayou, west of Holmes Bayou from the West Pearl River northward to the Pearl River, west of the Pearl River from Holmes Bayou northward to the Mississippi line, south of the Mississippi line from the Pearl River westward to La. 21. Washington and St. Tammany...Also, that portion of Washington Parish west of La. 25 from the Mississippi State Line southward to the Bogue Chitto River, then west of the Bogue Chitto River to its junction with the St. Tammany parish line, north of the St. Tammany parish line to the Tangipahoa parish line, east of the Tangipahoa parish line to the Mississippi state line, south of the Mississippi state line to its junction with La. 25.

viii. West Feliciana-West of Thompson Creek to Illinois-Central Railroad, north of Illinois-Central Railroad to Parish Road #7, east of Parish Road #7 to the junction of U.S. 61 and La. 966, east of La. 966 from U.S. 61 to Chaney Creek, south of Chaney Creek to Thompson Creek.

##### 2. Area 2

a. All of the following parishes are open.

i. Bienville, Jackson, Union, Bossier, Lincoln, Webster, Caddo, Caldwell, Natchitoches, Winn, Claiborne, Red River, DeSoto, Sabine.

ii. Except: Kisatchie National Forest which has special regulations. Caney, Corney, Middlefork tracts of Kisatchie have the same regulations as Area 2, except still hunting only for deer and except National Forest Land within the Evangeline Unit, Calcasieu Ranger District described in Area 2 description shall be still hunting only.

b. Portions of the following parishes are also open.

i. Allen-North of U.S. 190 east of Reeves and east of La. 113.

ii. Avoyelles-That portion west of I-49.

iii. Beauregard-East of La. 113. Also, west of La. 27 north to DeRidder and south and east of U.S. 190 west of DeRidder to Texas line.

iv. Calcasieu-West of La. 27 north of Sulphur and north of U.S. 90 from Sulphur to Texas line.

v. Catahoula-That portion lying north and east of the Ouachita River to the Boeuf River. West of Boeuf River north to Caldwell Parish line.

vi. Evangeline-All except the following portions: east of I-49 to junction of La. 29, east of La. 29 south of I-49 to Ville Platte, and north of U.S. 167 east of Ville Platte.

vii. Grant-All except that portion south of La. 8 and east of U.S. 165.

viii. Jefferson Davis-North of U.S. 190.

ix. LaSalle-All except south of La. 8 from Little River eastward to La. 127 in Jena, east of La. 127 from Jena northward to U.S. 165, east of U.S. 165 from La. 127 northward to Caldwell Parish line.

x. Morehouse-West of U.S. 165 (from Arkansas line) to Bonita, north and west of La. 140 to junction of La. 830-4 (Cooper Lake Road), west of La. 830-4 to Bastrop, west of La. 139 to junction of La. 593, west and south of La. 593 to Collinston, west of La. 138 to junction of La. 134 and north of La. 134 to Ouachita line at Wham Brake.

xi. Ouachita-All except south of U.S. 80 and east of Ouachita River, east of La. 139 from Sicard to junction of La. 134, south of La. 134 to Morehouse line at Wham Brake.

xii. Rapides-All except north of Red River and east of U.S. 165. South of La. 465 to junction of La. 121, west of La. 121 and La. 113 to Union Hill, and north of La. 113 from Union Hill to Vernon Parish line, and that portion south of Alexandria between Red River and U.S. 167 to junction of U.S. 167 with I-49 at Turkey Creek exit, east of I-49 southward to parish line.

xiii. Vernon-East and south of La. 113, north and east of La. 465, west of La. 117 from Kurthwood to Leesville, and north of La. 8 from Leesville to Texas line.

c. Still hunting only in all or portions of the following parishes.

i. Claiborne and Webster-Caney, Corney and Middlefork tracts of Kisatchie National Forest. (See Kisatchie National Forest Regulations).

ii. Ouachita-East of Ouachita River.

iii. Rapides-West of U.S. 167 from Alexandria southward to I-49 at Turkey Creek Exit, west of I-49 southward to Parish Line, north of Parish Line westward to U.S. 165, east of U.S. 165 northward to U.S. 167 at Alexandria. North of La. 465 from Vernon Parish line to La. 121, west of La. 121 to I-49, west of I-49 to La. 8, south and east of La. 8 to La. 118 (Mora Road), south and west of La. 118 to Natchitoches Parish line.

iv. Vernon-East of Mora-Hutton Road from Natchitoches Parish line to Hillman Loop Road, south and east of Hillman Loop Road to Comrade Road, south of Comrade Road to La. 465, east and north of La. 465 to Rapides Parish line.

### 3. Area 3

a. All of Acadia, Cameron and Vermilion Parishes are open.

b. Portions of the following parishes are also open.

i. Allen-South of U.S. 190 and west of La. 113.

ii. Beauregard-West of La. 113. Also east of La. 27 north to DeRidder and north and west of U.S. 190 west of DeRidder to Texas line.

iii. Calcasieu-East of La. 27 north of Sulphur and south of U.S. 90 from Sulphur to Texas line.

iv. Iberia-West of U.S. 90 and north of La. 14.

v. Jefferson Davis-All except north of U.S. 190.

vi. Lafayette-West of I-49 and U.S. 90.

vii. Rapides-South of La. 465 to junction of La. 121, west of La. 121 and La. 112 to Union Hill and north of La. 113 from Union Hill to Vernon Parish line.

viii. St. Landry-West of U.S. 167.

ix. Vernon-West and north of La. 113, south of La. 465, east of La. 117 from Kurthwood to Leesville, and south of La. 8 from Leesville to Texas line.

### 4. Area 4

a. All of East Carroll and Richland parishes are open.

b. Portions of the following parishes are open.

i. Morehouse-East of U.S. 165 (from Arkansas line) to Bonita, south and east of La. 140 to junction of La. 830-4 (Cooper Lake Road), east of La. 830-4 to Bastrop, east of La. 139 at Bastrop to junction of La. 593, east and north of La. 593 to Collinston, east of La. 138 to junction of La. 134 and south of La. 134 to Ouachita line at Wham Brake.

ii. Ouachita-South of U.S. 80 and east of Ouachita River, east of La. 139 from Sicard to junction of La. 134, south of La. 134 to Morehouse line at Wham Brake.

### 5. Area 5

a. All of West Carroll Parish is open.

i. All deer hunting is for bucks only including muzzleloader season.

### 6. Area 6

a. All of Orleans Parish is closed to all forms of deer hunting.

b. All of the following parishes are open: Ascension, Plaquemines, St. John, Assumption, Pointe Coupee, St. Martin, Iberville, St. Bernard, Jefferson, St. Charles, Lafourche, St. James, West Baton Rouge.

c. Portions of the following parishes are also open.

i. Avoyelles-South of La. 1 and also that portion east of I-49.

ii. Evangeline-That portion east of I-49 to junction of La. 29, east of La. 29 south of I-49 to Ville Platte and north of U.S. 167 east of Ville Platte.

iii. Iberia-East of U.S. 90.

iv. Lafayette-East of I-49 and U.S. 90.

v. Livingston-South of I-12.

vi. Rapides-South of Alexandria between Red River and U.S. 167 to the junction of U.S. 167 with I-49 at Turkey Creek Exit, east of I-49 southward to parish line.

vii. St. Landry-East of U.S. 167.

viii. St. Mary-North of U.S. 90.

ix. St. Tammany-That portion south of I-12, west of Hwy. 1077 to La. 22, south of La. 22 to Tchefuncte River, west of Tchefuncte River southward to Lake Pontchartrain.

x. Tangipahoa-South of I-12.

xi. West Feliciana-West of Mississippi River, known as Raccourci and Turnbull Islands.

d. Still hunting only in all of the following parishes.

i. Plaquemines-East of the Mississippi River.

ii. Rapides-South of Alexandria between Red River and U.S. 167 to the junction of U.S. 167 with I-49 at Turkey Creek Exit, east of I-49 southward to parish line.

iii. St. Bernard-All of the parish shall be still hunting only except that portion of St. Bernard known as the spoil area between the MRGO on the east and Access Canal on the west, south of Bayou Bienvenue and north of Bayou la Loutre.

iv. St. John-South of Pass Manchac from Lake Pontchartrain to U.S. 51, east of U.S. 51 from Pass Manchac to La. 638 (Frenier Beach Road). North of La. 638 from U.S. 51 to Lake Pontchartrain. West of Lake Pontchartrain from La. 638 to Pass Manchac.

v. St. Landry-Those lands surrounding Thistlethwaite WMA bounded north and east by La. 359, west by La. 10, and south by La. 103.

#### 7. Area 7

a. The following parish is open: Terrebonne.

b. Portions of the following parishes are open. Iberia and St. Mary Parishes-South of La. 14 and west U.S. Hwy. 90.

#### G Wildlife Management Area Regulations

##### 1. General

a. The following rules and regulations concerning the management, protection and harvest of wildlife have been officially approved and adopted by the Wildlife and Fisheries Commission in accordance with the authority provided in Louisiana Revised Statutes of 1950, Section 109 of Title 56. Failure to comply with these regulations will subject individual to citation and/or expulsion from the management area.

b. Citizens are cautioned that by entering upon a WMA managed by the LDWF they may be subjecting themselves and/or their vehicles to game and/or license checks, inspections and searches.

c. Wildlife management area seasons may be altered or closed anytime by the Department Secretary in emergency situations (floods, fire or other critical circumstances).

d. Hunters may enter the WMA no earlier than 3:00 a.m. unless otherwise specified. On days when Daily permits are required, permit stations will open 2 hours before legal shooting hours. Hunters must exit the WMA no later than two hours after sunset unless otherwise specified.

e. Lands within WMA boundaries will have the same seasons and regulations pertaining to baiting and use of dogs as the WMA within which the lands are enclosed; however, with respect to private lands enclosed within a WMA, the owner or lessee may elect to hunt according to the regular season dates applicable to the geographic area in which the lands are located, provided that the lands are first enrolled in DMAP. Interested parties should contact the nearest LDWF regional office for additional information.

f. Dumping garbage or trash on WMAs except in designated locations is prohibited.

g. Disorderly conduct or hunting under influence of alcoholic beverages, chemicals and other similar substances is prohibited.

h. Commercial activities prohibited without prior approval or unless otherwise specified.

i. Damage to or removal of trees, shrubs, hard mast (acorn, pecans, etc.) and wild plants is prohibited without

prior approval. Gathering and/or removal of soft fruits and berries shall be limited to five gallons per person per day. Persons engaged in commercial activities must obtain a permit from the Region Office.

j. Burning of marshes is prohibited except by permit. Permits may be obtained from the Fur and Refuge Division.

k. Nature trails. Access to trails shall be limited to pedestrians only. No vehicles, ATV's, horses, mules, bicycles, etc. allowed. Removal of vegetation (standing or down) or other natural material prohibited.

l. Deer seasons are for legal buck deer unless otherwise specified.

m. Small game, when listed under the WMA regulations, includes both resident game animals and game birds as well as migratory species of birds.

n. Oysters may not be harvested from any WMA, except that oysters may be harvested from private oyster leases and State Seed Grounds located within a WMA, when authorized by the Wildlife and Fisheries Commission and upon approval by the Department of Health and Hospitals.

##### 2. Permits

a. Daily. Daily permits when required shall be obtained at permit stations on or near each WMA. Hunters must retain permit in possession while hunting. Hunters may enter the area no earlier than two hours before legal shooting time unless otherwise specified. Hunters must checkout daily and exit the area not later than two hours after sunset unless otherwise specified.

b. Self Clearing Permits. On WMAs where Self Clearing Permits are required, all hunters must obtain a WMA Self Clearing Permit from an Information Station. The check in portion must be completed and put in a permit box before each day's hunt on the day of the hunt. The check out portion must be carried by each hunter while hunting and must be completed and put in a permit box after each day's hunt on the day of the hunt unless otherwise specified. A vehicle tag will also be associated with the Self Clearing Permit and must be displayed in the vehicle while on the WMA.

c. Wild Louisiana Stamp. Persons using WMAs or other department administered lands for purposes other than hunting and fishing, such as camping, shooting on rifle ranges, berry picking, hiking, photography, bird-watching and the like, shall be required to possess one of the following: a Wild Louisiana stamp, a valid Louisiana fishing license, or a valid Louisiana hunting license. Persons younger than 16 or older than 60 years of age are exempt from this requirement.

##### 3. Special Seasons

a. Youth deer hunt. Only youths younger than 16 years of age may hunt. All other seasons are closed except Handicapped Seasons. Youths must possess a hunter safety certification or proof of successful completion of a hunter safety course. Each youth must be accompanied by one adult 18 years of age or older. Adults may not possess a firearm. Youths may possess only one firearm while hunting. Legal firearms are the same as described for deer hunting. The supervising adult shall maintain visual and voice contact with the youth at all times. An adult may supervise only one youth during this special hunt. Contact the appropriate region office for special check station locations when daily

permits are required and maps of specific hunting areas. Either-sex deer may be taken on WMAs with youth hunts. Consult the regulations pamphlet for WMAs offering youth hunts.

b. **Handicapped Season.** For hunters possessing a Physically Challenged Hunter Permit only. Participants must possess a Physically Challenged Hunter Permit. Contact region office for permit application and map of specific hunting area. Consult the regulations pamphlet for WMAs offering Handicapped Seasons. Pointe-au-Chien will have an experimental Lottery Handicapped waterfowl hunt. Contact New Orleans Fur and Refuge Division for details.

c. **Deer Lottery Hunts.** Hunts restricted to those persons selected as a result of the pre-application lottery. Consult the regulations pamphlet for deadlines. A non-refundable application fee must be sent with application. Contact region offices for applications. Consult regulations pamphlet for WMAs offering lottery hunts.

d. **Turkey Lottery Hunts.** Hunts restricted to those persons selected by lottery. Consult the regulations pamphlet for deadlines. All turkeys must be reported at Self Clearing station. Contact Region Offices for more details. Consult separate Turkey Hunting Regulations pamphlet for WMAs offering lottery hunts.

e. **Trapping.** Permits to take fur bearers from WMAs may be obtained at appropriate offices when required. Consult Annual Trapping Regulations for specific dates. All traps must be run daily. Traps with teeth are illegal. On WMAs where permits are required, each trapper must submit an annual trapping report to the Region Office where his permit was obtained. Non-compliance will result in forfeiture of trapping privileges on the WMAs. Permits may be obtained only between hours of 8 a.m. to 4:30 p.m. on normal working days at region offices. Hunter orange required when a deer gun season is in progress. A permit is required to carry a firearm outside of the normal hunting season and is available at the Region Office.

f. **Raccoon Hunting.** A licensed hunter may take raccoon or opossum, one per person per day, during daylight hours only, during the open rabbit season on WMAS. Nighttime experimental-Season dates for specific WMAS are for nighttime raccoon hunting and permits may be required. There will be no bag limit for raccoons at night unless specified in the annual regulations pamphlet. Raccoon hunters with dogs must submit an annual report of their kill to the region office for WMAs where permits are required. Non-compliance will result in forfeiture of raccoon or all hunting privileges on WMAs. Permits, when required, may be obtained at region offices only between hours of 8 a.m. to 4:30 p.m. on normal working days.

g. **Commercial fishing.** Permits are required of all commercial fishermen using Grassy Lake, Pomme de Terre and Spring Bayou WMAs. Drag seines (except minnow and bait seines) are prohibited except experimental bait seines permitted on Dewey Wills WMA north of La. 28 in Diversion Canal. Commercial fishing is prohibited during regular waterfowl seasons on Grand Bay, Silver Lake and Lower Sunk Lake on Three Rivers WMA. Commercial fishing is prohibited on Salvador/Timken, Ouachita and Pointe-Au-Chien WMAs except shrimping allowed on Pointe-Au-Chien in Cut Off Canal and Wonder Lake during daytime only. Non-compliance with permit regulations will

result in revocation of commercial fishing privileges for the period the license is issued and one year there after. Commercial fishing is allowed on Pass-a-Loutre and Atchafalaya Delta WMAs. See Pass-a-Loutre for additional commercial fishing regulations on mullet.

h. **Sport Fishing.** Sport fishing, crawfishing and frogging are permitted on WMAs when in compliance with current laws and regulations except nighttime frogging prohibited on Salvador/ Timken and Pointe-Au-Chien.

i. **Additional Department Lands.** The department manages additional lands that are included in the WMA system and available for public recreation. Small tracts are located in Rapides, Vernon, Evangeline and St. Helena parishes. These small tracts have been acquired from the Farmers Home Administration or other sources for conservation purposes. Contact the appropriate Wildlife and Fisheries Region Office for specific information and any additional season dates.

#### 4. Firearms

a. Firearms having live ammunition in the chamber, magazine, cylinder or clip when attached to firearms are not allowed in or on vehicles, boats under power, motorcycles, ATV's, ATC's or in camping areas on WMAS. Firearms may not be carried on any area before or after allowed hours except in authorized camping areas.

b. Firearms and bows and arrows are not allowed on WMAs during closed hunting seasons except on designated shooting ranges or as allowed for trapping. Bows and broadhead arrows are not allowed on WMAs except during deer archery season, turkey season or except as allowed for bowfishing.

c. Encased or broken down firearms and any game harvested may be transported through the areas by the most direct route provided that no other route exists except as specified under Wildlife Management Area listing.

d. Loaded firearms are not allowed near WMA check stations.

e. Centerfire rifles and handguns, arms larger than .22 caliber rimfire, shotgun slugs or shot larger than BB lead or F steel shot cannot be carried onto any WMA except during modern firearm deer season.

f. Target shooting and other forms of practice shooting are prohibited on WMAs except as otherwise specified.

g. Discharging of firearms on or hunting from designated roads, ATV trails or their rights-of-way is prohibited during the modern firearm and muzzleloader deer season.

#### 5. Methods of Taking Game

a. Moving deer or hogs on a WMA with organized drivers and standers, drivers or making use of noises or noise-making devices is prohibited.

b. On Wildlife Management Areas, Federal Refuges and National Forest Lands where the daily limit shall be one deer per day, six per season (all segments included) by all methods of take.

c. Baiting or hunting over bait is prohibited on all WMAs (hogs included). Unmarked hogs may be taken on some WMAs by properly licensed hunters and only with guns or bow and arrow legal for specified seasons in progress. Consult the specific WMA for additional

information. Proper licenses and permits are required for hunting.

d. Hunters who kill deer on WMAs that require daily permits must have deer checked at the check station on same day of kill.

e. Deer hunting on WMAs is restricted to still hunting only. No WMA will be open for deer during early still hunt season unless specified in the regulation pamphlet.

f. Construction of and/or hunting from permanent tree stands or permanent blinds on WMAs is prohibited. Any permanent stand or permanent blind will be removed and destroyed.

g. On Wildlife Management Areas and Refuges, all deer stands must be removed from the area no later than two hours after the end of legal shooting hours each day. Hunting from utility poles, high tension power lines, oil and gas exploration facilities or platforms is prohibited.

h. A permanent blind is any blind using non-natural materials or having a frame which is not dismantled within two hours after the end of legal shooting hours each day. Blinds with frames of wood, plastic, metal, poles, wire, mesh, webbing or any materials may be used but must be removed from the WMA within two hours after the end of legal shooting time each day. Blinds made solely of natural vegetation may be left in place but cannot be used to reserve hunting locations. All decoys must be removed from the WMA daily.

i. It is illegal to save or reserve hunting locations using permanent stands or blinds. Stands or blinds attached to trees with screws, nails, spikes, etc. are illegal.

j. Tree climbing spurs, spikes or screw-in steps are also prohibited.

k. Unattended decoys will be confiscated and forfeited to the Department of Wildlife and Fisheries and disposed of by the Department. This action is necessary to prevent preemption of hunting space.

l. Hunters shall not hunt, take or pursue birds or animals from moving vehicles on any WMA. No person shall take birds or animals from or by any motor boat or sail boat unless the motor has been completely shut off and/or the sail furled and its progress therefrom has ceased.

m. Spot lighting (shining) from vehicles is prohibited on all WMAS.

n. Horses and mules may be ridden on Wildlife Management's Areas except where prohibited and except during gun seasons for deer and turkey. Riding is restricted to designated roads and trails. Hunting and trapping from horses and mules is prohibited except for quail hunting or as otherwise specified.

o. All hunters except waterfowl hunters and dove hunters (including archers and small game hunters) on WMAs must display 400 square inches of "Hunter Orange" and wear a "Hunter Orange" cap during open gun season for deer. Quail and woodcock hunters as well as hunters participating during special dog seasons for rabbit and squirrel are required to wear a minimum of a "Hunter Orange" cap. ALSO all non-hunters afield during hunting seasons are encouraged to display "Hunter Orange."

p. Archery season for deer. The archery season on WMAs is the same as outside and is open to either sex deer except as otherwise specified on individual WMAS. Archery season restricted or closed on certain WMAs when special

seasons for youth or handicapped hunters are in progress. Consult regulations pamphlet for specific seasons.

q. Either sex deer may be taken on WMAs at any time during archery season except when bucks only seasons are in progress on the respective WMAs. Archers must abide by bucks only regulations and other restrictions when such seasons are in progress.

r. Muzzleloader season for deer. See WMA deer schedule.

#### 6. Camping

a. Camping on WMAs, including trailers, houseboats, recreational vehicles and tents, is allowed only in designated areas and for a period not to exceed 16 consecutive days, regardless if the camp is attended or unattended. Houseboats shall not impede navigation. At the end of the 16 day period, camps must be removed from the area for at least 48 hours. Camping area use limited exclusively to outdoor recreational activities.

b. Houseboats are prohibited from overnight mooring within WMAs except on stream banks adjacent to Department-owned designated camping areas. Overnight mooring of vessels that provide lodging for hire are prohibited on WMAs. On Atchafalaya Delta WMA and Pass-a-Loutre, houseboats may be moored in specially designated areas throughout the hunting season. At all other times of the year, mooring period is limited to a period not to exceed 16 consecutive days. Permits are required for camping and overnight mooring of houseboats on Pass-a-Loutre and can be obtained from the WMA headquarters. Houseboat mooring permits are required for Atchafalaya Delta Wildlife Management Area. Permits may be obtained from headquarters on respective WMAs or from the New Iberia office for Atchafalaya Delta WMA.

c. Discharge of human waste onto lands or waters of any WMA is strictly prohibited by state and federal law. In the event public restroom facilities are not available at a WMA, the following is required. Anyone camping on a WMA in a camper, trailer, or other unit (other than a houseboat or tent) shall have and shall utilize an operational disposal system attached to the unit. Tent campers shall have and shall utilize portable waste disposal units and shall remove all human waste from the WMA upon leaving. Houseboats moored on a WMA shall have a permit or letter of certification from the Health Unit (Department of Health and Hospitals) of the parish within which the WMA occurs verifying that it has an approved sewerage disposal system on board. Further, that system shall be utilized by occupants of the houseboats when on the WMA.

d. No refuse or garbage may be dumped from these boats.

e. Firearms may not be kept loaded or discharged in a camping area.

f. Campsites must be cleaned by occupants prior to leaving and all refuse placed in designated locations when provided or carried off by campers.

g. Non-compliance with camping regulations will subject occupant to immediate expulsion and/or citation, including restitution for damages.

h. Swimming prohibited within 100 yards of boat launching ramps.

#### 7. Restricted Areas

a. All oil and gas production facilities (wells, pumping stations and storage facilities) are off limits.

b. No unauthorized entry or hunting in restricted areas or refuges.

8. Dogs. All use of dogs on WMAs, except for bird hunting and duck hunting, is experimental as required by law. Except for nighttime experimental raccoon hunting, squirrel hunting, rabbit hunting, bird hunting, duck hunting and bird dog training when allowed, having or using dogs on any WMA is prohibited. Dogs running at large are prohibited on WMAs. The owner or handler of said dogs shall be held liable. Only recognizable breeds of bird dogs and retrievers are allowed for quail and migratory bird hunting. Only beagle hounds which do not exceed 15 inches at the front shoulders and which have recognizable characteristics of the breed may be used on WMAs having experimental rabbit seasons.

9. Vehicles

a. Vehicles having wheels with a wheel-tire combination having a radius of 17 inches or more from the center of the hub (measured horizontal to ground) are prohibited.

b. The testing, racing, speeding or unusual maneuvering of any type of vehicle is prohibited within wildlife management areas due to property damages resulting in high maintenance costs, disturbance of wildlife and destruction of forest reproduction.

c. Tractor implement tires with farm tread designs R1, R2 and R4 known commonly as spade or lug grip types are prohibited on all vehicles. ATV tires are restricted to those with maximum allowable tire pressure of 5 psi, as indicated on the tire by the manufacturer.

d. Airboats, aircraft, personal water craft and hover craft are prohibited on all WMAs and Refuges. Personal water craft are defined as a vessel which uses an inboard motor powering a water jet pump as its primary source of propulsion and is designed to be operated by a person sitting, standing or kneeling on the vessel rather than in the conventional manner of sitting or standing inside the vessel. Personal water craft allowed on designated areas of Alexandria State Forest WMA.

e. No internal combustion engines allowed in certain Greentree reservoir.

f. Driving or parking vehicles on food or cover plots and strips is prohibited.

g. Blocking the entrance to roads and trails is prohibited.

h. Motorized vehicles, including ATVs, ATCs and motorcycles, are restricted entirely to designated roads and ATV trails as indicated on WMA maps, except on Atchafalaya Delta WMA where ATVs, ATCs and motorcycles are prohibited. WMA maps available at all region offices. This restriction does not apply to bicycles.

i. Use of special ATV trails for handicapped persons restricted to special ATV handicapped permittees. Handicapped ATV permittees restricted to handicapped ATV trails or other ATV trails only as indicated on WMA maps. Persons 60 years of age and older, with proof of age, are also allowed to use special handicapped trails and need not obtain a permit. However, these persons must abide by all rules in place for these trails. Handicapped persons should make

application for a Physically Challenged Hunter Program Permit with the Department.

j. Entrances to ATV trails will be marked with peach colored paint. Entrances to handicapped-only ATV trails will be marked with blue colored paint. Routes of all trails are as indicated on WMA maps. Deviation from the trails indicated on the map constitutes a violation of WMA rules and regulations.

k. Roads and trails may be closed due to poor condition or construction.

l. ATVs, ATCs and motorcycles cannot be left overnight on WMAs except on designated camping areas. ATVs are prohibited from two hours after sunset to 3:00 AM. All roads including trails and roads designated as ATV trails shall be closed from March 1 through August 31 unless otherwise specified. Certain trails may be open during this time period to provide access for fishing or other purposes. These trails will be marked by signs at the entrance of the trail.

m. Caution: Many department-maintained roadways on WMAs are unimproved and substandard. A maximum 20 mph speed limit is recommended for all land vehicles using these roads.

10. Wildlife Management Areas Basic Season Structure. For season dates, bag limits, shooting hours, special seasons and other information consult the annual regulations pamphlet for specific details.

11. Resident Small Game (squirrel, rabbit, quail, dove, woodcock, snipe, rail and gallinule). Consult regulations pamphlet.

12. Waterfowl (ducks, geese and coots). Consult regulations pamphlet.

13. Archery. Consult regulations pamphlet.

14. Hogs. Consult regulations pamphlet.

15. Outlaw Quadrupeds and Birds. Consult regulations pamphlet.

16. Wildlife Management Areas Hunting Schedule and Regulations.

a. Alexander State Forest. Vehicles restricted to paved and graveled roads. No parking on or fishing or swimming from bridges. No open fires except in recreation areas.

b. Atchafalaya Delta. Water control structures are not to be tampered with or altered by anyone other than employees of the Department of Wildlife and Fisheries at any time. ATVs, ATCs and motorcycles prohibited.

c. Attakapas. Free-ranging livestock prohibited.

d. Bayou Macon. All night activities prohibited except as otherwise provided. Mules are allowed for nighttime raccoon hunting.

e. Bayou Pierre. No ATVs or ATCs allowed on the area. Motorized vehicles are allowed only on parish roads and roads marked on WMA map.

f. Bens Creek. All motorized vehicles restricted to designated roads. Refer to WMA map for location of designated roads. No hunting in restricted areas. (See WMA Map). Horses and mules are specifically prohibited during gun seasons for deer and during the spring turkey season.

g. Big Colewa Bayou. ATVs restricted to designated trails. Refer to WMA map for location of designated trails. All other motorized vehicles prohibited. All nighttime activities prohibited.

- h. Big Lake. Free-ranging livestock prohibited.
- i. Biloxi
- j. Bodcau
- k. Boeuf. Free-ranging livestock prohibited.
- l. Boise-Vernon. Road travel and hunting restrictions: All motorized vehicles restricted to designated roads. Refer to WMA map for location of designated roads. Hunting prohibited on roads designated for motorized vehicle travel.
- m. Buckhorn. Free-ranging livestock prohibited.
- n. Camp Beauregard. Daily military clearance required for all recreational users. Registration for use of Self Clearing Permit required once per year. Free-ranging livestock prohibited. All game harvested must be reported. Retriever training allowed on selected portions of the WMA. Contact the region office for specific details.
- o. Dewey W. Wills. Crawfish: 100 pounds per person per day. Roads may be closed during wet weather conditions.
- p. Elm Hall. No ATVs allowed.
- q. Fort Polk. Daily military clearance required to hunt or trap. Registration for use of Self Clearing Permit required once per year. Special regulations apply to ATV users.
- r. Georgia-Pacific. Except as otherwise provided, all nighttime activities prohibited.
- s. Grassy Lake. Commercial Fishing: Permitted except on Smith Bay, Red River Bay and Grassy Lake proper on Saturday and Sunday and during waterfowl season. Permits available from area supervisor at Spring Bayou headquarters or Opelousas Region Office. Free-ranging livestock prohibited. No hunting in restricted area.
- t. Jackson-Bienville. ATVs are allowed on non-public maintained gravel roads and timber management roads and trails. However, all ATVs/ATCs prohibited March 1 through September 15.
- u. Joyce. Swamp Walk: Adhere to all WMA rules and regulations. No firearms or hunting allowed within 100 yards of walkways. Check hunting schedule and use walkway at your own risk.
- v. Lake Boeuf
- w. Lake Ramsay. Foot traffic only-all vehicles restricted to Parish Roads.
- x. Little River. Roads may be closed during wet conditions.
- y. Loggy Bayou
- z. Manchac. Crabs: No crab traps allowed. Attended lift nets are allowed.
- aa. Ouachita. Waterfowl Refuge: North of La. Hwy. 15 closed to all hunting, fishing and trapping during waterfowl season. Crawfish: 100 pounds per person per day limit. Night crawfishing prohibited. No traps or nets left overnight. Commercial Fishing: Closed. All nighttime activities prohibited except as otherwise provided.
- ab. Pass-a-Loutre. Commercial Fishing: Same as outside. Commercial mullet fishing open only in: South Pass, Pass-a-Loutre, North Pass, Southeast Pass, Northeast Pass, Dennis Pass, Johnson Pass, Loomis Pass, Cadro Pass, Wright Pass, Viveats Pass, Cognevich Pass, Blind Bay, Redfish Bay, Garden Island Bay, Northshore Bay, East Bay (west of barrier islands) and oil and gas canals as described

on the Department Pass-a-Loutre WMA map. ATVS, ATCs and motorcycles prohibited on this area.

ac. Pearl River. All roads closed 8 p.m. to 4:30 a.m. to all vehicles. Old Hwy. 11 will be closed when river gauge at Pearl River, Louisiana, reaches 16.5 feet. All hunting will be closed when the river stage at Pearl River reaches 16.5 feet except waterfowl hunting south of Hwy. 90. No hunting in the vicinity of Nature Trail. Observe "No Hunting" signs. Rifle range open noon until 4 p.m. Friday, and 8 a.m. to 4:30 p.m. Saturday and Sunday with a fee.

ad. Peason Ridge. Daily military clearance required to hunt or trap. Registration for use of Self Clearing Permit required once per year. Special federal regulations apply to ATV users.

ae. Pointe-au-Chien. Hunting until 12 noon on all game, except for dove hunting as specified in regulation pamphlet. Point Farm: Gate will be open during opening weekend of the second split of dove season and all weekends during month of February. No motorized vessels allowed in the drainage ditches. Recreational Fishing: Shrimp may be taken by the use of cast nets only. During the inside open shrimp season, 25 pounds per boat per day (heads on) shall be allowed. Size count to conform with open season requirements. During the inside closed season, 10 pounds per boat per day (heads on) may be taken for bait. Fish may be taken by rod and reel or hand lines for recreational purposes only. Crabs may be taken through the use of hand lines or nets; however, none are to remain set overnight. 12 dozen crabs are allowed per boat or vehicle per day. Crawfish may be harvested in unrestricted portions of the wildlife management area and shall be limited to 100 pounds per boat or group. Fishing gear used to catch crawfish shall not remain set overnight. The harvest of all fish, shrimp, crabs and crawfish are for recreational purposes only and any commercial use is prohibited. Mudboats or vessels with engines larger than 25 h.p. prohibited in the Montegut and Grand Bayou marsh management units. Public is allowed to travel anytime through the WMA for access purposes only, in the waterways known as Grand Bayou, Humble Canal, Little Bayou Blue and Grand Bayou Blue. Vehicles prohibited on Point Farm properties unless authorized by the department. ATVS, ATCs and motorcycles prohibited on this area.

af. Pomme de Terre. Commercial Fishing: allowed Monday through Friday, except closed during duck season. Commercial Fishing permits available from area supervisor, Opelousas Region Office or Spring Bayou headquarters. Sport Fishing: Same as outside except allowed after 2 p.m. only during waterfowl season. Crawfish: April 1-July 31, 100 lbs. per person per day limit. No traps or nets left overnight. Free-ranging livestock prohibited.

ag. Red River. Free-ranging livestock prohibited. Crawfishing prohibited on Wetland Restoration Areas.

ah. Russell Sage. Transporting trash or garbage on WMA roads is prohibited. All nighttime activities prohibited except as otherwise provided.

Note: All season dates on Chauvin Tract (U.S. 165 North) same as outside, except still hunt only and except deer hunting restricted to archery only. Waterfowl hunting after 2 p.m. prohibited. All vehicles including ATVs prohibited.

ai. Sabine

aj. Sabine Island. Sabine Island boundaries are Sabine River on the west, Cut-Off Bayou on the north, and Old River and Big Bayou on the south and east.

ak. Salvador/Timken. Hunting until 12 noon only for all game. All nighttime activities prohibited, including frogging. Recreational Fishing: Shrimp may be taken by the use of cast nets only. During the inside open shrimp season, 25 pounds per boat per day (heads on) shall be allowed. Size count to conform with open season requirements. During the inside closed season, 10 pounds per boat per day (heads on) may be taken for bait. Fish may be taken by rod and reel or hand lines for recreational purposes only. Crabs may be taken through the use of hand lines or nets; however, none of the lines are to remain set overnight. Twelve dozen crabs maximum are allowed per boat or vehicle per day. Crawfish may be harvested in unrestricted portions of the wildlife management area and shall be limited to 100 pounds per boat or group. Fishing gear used to catch crawfish shall not remain set overnight. The harvest of all fish, shrimp, crabs and crawfish are for recreational purposes only and any commercial use is prohibited. Boats powered by internal combustion engines having horsepower ratings above 25 H.P. are allowed only in oil company access canals, Louisiana Cypress Canal, the Netherlands Pond including the West Canal, Lakes-"Baie Des Chactas" and "Baie du Cabanage" and the Rathborne Access ditch. Operation of the above described internal combustion engines in interior ditches is prohibited except by experimental permit to be obtained from the New Orleans Office, Fur and Refuge Division, Room 217. Pulling boats over levees, dams or water control structures or any other activities which cause detriment to the integrity of levees, dams and water control structures is prohibited. Special Use Permits may be issued for persons interested in clearing existing ditches (trenasses). Permits will be considered on a case-by-case basis. Contact New Orleans Region Office-Fur and Refuge Division. ATVS, ATCs and motorcycles prohibited on this area.

al. Sandy Hollow. Bird Dog Training: Consult regulation pamphlet. Wild birds only (use of pen-raised birds prohibited). Bird Dog Field Trials: Permit required from Baton Rouge Region Office. Horseback Riding: Organized trail rides prohibited. Horses and mules are specifically prohibited during turkey and gun season for deer except as allowed for bird dog field trials. No horses and mules on green planted areas. No motorized vehicles allowed off designated roads. Free-ranging livestock prohibited.

am. Sherburne. Crawfishing: Recreational crawfishing only on the North and South Farm Complexes. Crawfish harvest limited to 100 pounds per vehicle or boat per day. NO traps or nets left overnight. No motorized watercraft allowed on farm complex. Commercial crawfishing allowed on the remainder of the area. Permit is required. Free-ranging livestock prohibited. Retriever training allowed on selected portions of the WMA. Contact the Region Office for specific details. Vehicular traffic prohibited on east Atchafalaya River Basin levee road within Sherburne WMA boundaries. Rifle and Pistol Range open daily. Skeet ranges open by appointment only, contact

Hunter Education Office. No trespassing in restricted area behind ranges. Note: Atchafalaya National Wildlife Refuge, and U.S. Army Corps of Engineers land holdings adjacent to the Sherburne Wildlife Management Area will have the same rules and regulations as Sherburne WMA. No hunting or trapping in restricted area. No commercial activity on ANWR, except trapping.

an. Sicily Island Hills. Firearms and any game harvested cannot be transported through the area except during the corresponding open season on area. Free-ranging livestock prohibited.

ao. Soda Lake. Entire area is walk-in only-no motorized vehicles allowed. Access into the area is allowed only from south end of the area off of Hwy. 173 at Twelve Mile Bayou. All trapping and hunting prohibited except archery hunting for deer.

ap. Spring Bayou. Commercial Fishing: allowed Monday through Friday except slat traps and hoop nets allowed any day. Permits available from area supervisor or Opelousas Region Office. Closed until after 2 p.m. during waterfowl season. Sport Fishing: Same as outside except allowed only after 2 p.m. during waterfowl season. Crawfish: 100 lbs. per person per day limit. Permit required from area supervisor. No hunting allowed in headquarters area. Only overnight campers allowed in the improved Boggy Bayou Camping area. Rules and regulations posted at camp site. A fee is assessed for use of this camp site. Water skiing allowed only in Old River and Grand Lac.

aq. Thistlethwaite. No hunting or trapping in restricted area (See WMA Map). All motorized vehicles restricted to improved roads only. All users must enter and leave through main gate only. No entry into restricted areas.

ar. Three Rivers. Free-ranging livestock prohibited in area.

as. Tunica Hills. All vehicles restricted to Parish roads. ATV's restricted to designated trails. Driving on food plots prohibited. Access to restricted areas is unauthorized. Refer to WMA map. Camping prohibited on area. North of Highway 66 (Angola Tract) closed to the general public March 1-September 30 except spring turkey hunting access allowed for those individuals drawn for special lottery hunt.

at. Union. All nighttime activities prohibited except as otherwise provided.

au. West Bay. Road Travel and Hunting Restrictions: All motorized vehicles restricted to designated roads. Refer to WMA map for location of designated roads. Hunting prohibited on roads designated for motorized vehicular travel.

av. Wisner

AUTHORITY NOTE: Promulgated in accordance with R.S. 56:115 and R.S. 56:116.

HISTORICAL NOTE: Promulgated by the Department of Wildlife and Fisheries, Wildlife and Fisheries Commission, LR 25:1279 (July 1999), amended LR 26:1494 (July 2000).

Thomas M. Gattle, Jr.  
Chairman

0007#084

**RULE**

**Department of Wildlife and Fisheries  
Wildlife and Fisheries Commission**

**Jewfish and Nassau Grouper Taking and Possession Prohibited (LAC 76:VII.337)**

The Wildlife and Fisheries Commission does hereby amend a Rule, LAC 76:VII.337, prohibiting the take and possession of Nassau grouper (*Epinephelus striatus*). Authority for adoption of this Rule is included in R.S. 56:325.1 and R.S. 56:326.3

**Title 76**

**WILDLIFE AND FISHERIES**

**Part VII. Fish and Other Aquatic Life**

**Chapter 3. Saltwater Sport and Commercial Fishery**

**§337. Taking and Possession of Jewfish and Nassau Grouper Prohibited**

A. The Wildlife and Fisheries Commission hereby prohibits the taking and possession of jewfish (*Epinephelus itajara*) and Nassau grouper (*Epinephelus striatus*) from within or without Louisiana waters.

B. No person shall take, transport or possess within the territorial jurisdiction of the state of Louisiana jewfish (*Epinephelus itajara*) and Nassau grouper (*Epinephelus striatus*).

AUTHORITY NOTE: Promulgated in accordance with R.S. 56:325.1 and R.S. 56:326.3.

HISTORICAL NOTE: Promulgated by the Department of Wildlife and Fisheries, Wildlife and Fisheries Commission, LR 16:1070 (December 1990), amended LR 19:1442 (November 1993), LR 26:1505 (July 2000).

Thomas M. Gattle, Jr.  
Chairman

0007#039

**RULE**

**Department of Wildlife and Fisheries  
Wildlife and Fisheries Commission**

**King and Spanish Mackerel and Cobia Size Limits (LAC 76:VII.323)**

The Wildlife and Fisheries Commission does hereby amend a Rule, LAC 76:VII.323, changing the minimum size limit and measurement requirements for the harvest of cobia, Spanish mackerel, and king mackerel. Authority for adoption of this Rule is included in R.S. 56:326.1 and R.S. 56:326.3.

**Title 76**

**WILDLIFE AND FISHERIES**

**Part VII. Fish and Other Aquatic Life**

**Chapter 3. Saltwater Sport and Commercial Fishery**

**§323. Size Limits of King and Spanish Mackerel and Cobia**

A. The Wildlife and Fisheries Commission does hereby adopt the following rules and regulations establishing size limits.

1. The minimum legal size for possession of Spanish mackerel (*Scomberomorus maculatus*) shall be 12 inches fork length and king mackerel (*Scomberomorus cavalla*)

shall be 24 inches fork length whether caught within or without the territorial waters of Louisiana. No person shall possess, sell, barter, trade or exchange or attempt to sell, barter, trade or exchange Spanish mackerel or king mackerel less than the minimum size requirements.

2. The minimum legal size for possession of cobia (*Rachycentron canadum*) whether caught within or without the territorial waters of Louisiana shall be 33 inches fork length. No person shall possess, sell, barter, trade or exchange or attempt to sell, barter, trade or exchange cobia less than the minimum size requirements.

AUTHORITY NOTE: Promulgated in accordance with 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 13:502 (September 1987), amended LR 17:207 (February 1991), LR 26:1505 (July 2000).

Thomas M. Gattle, Jr.  
Chairman

0007#040

**RULE**

**Department of Wildlife and Fisheries  
Wildlife and Fisheries Commission**

**Reef Fish Daily Take, Possession and Size Limits (LAC 76:VII.335)**

The Wildlife and Fisheries Commission does hereby promulgate a Rule, LAC 76:VII.335, changing the minimum size limits and recreational bag limits for the harvest of reef fish and adding, deleting, or reorganizing list. Authority for adoption of this Rule is included in R.S. 56:6(25)(a), 56:326.1, and 56:326.3.

**Title 76**

**WILDLIFE AND FISHERIES**

**Part VII. Fish and Other Aquatic Life**

**Chapter 3. Saltwater Sport and Commercial Fishery**

**§335. Reef Fish-Daily Take, Possession and Size Limits Set by Commission**

A. The Louisiana Wildlife and Fisheries Commission does hereby adopt the following rules and regulations regarding the harvest of triggerfishes (excluding queen triggerfish), amberjacks, grunts, wrasses, snappers, groupers, sea basses, tilefishes, and porgies within and without Louisiana's territorial waters:

<u>Species</u>	<u>Recreational Bag Limits</u>
1. Red Snapper	Four fish per person per day
2. Queen, mutton, schoolmaster, blackfin, cubera, gray, dog, mahogany, silk, yellowtail snappers, and wenchman	10 fish per person per day (in aggregate)
3. Vermilion snapper, lane snapper, gray triggerfish, almaco jack, goldface tilefish, tilefish, blackline tilefish, anchor tilefish, blueline tilefish	20 per person per day (in aggregate)
4. All groupers	Five fish per person per day (in aggregate) excluding jewfish and Nassau grouper and with not more than one speckled hind and one warsaw grouper per vessel
5. Greater amberjack	One fish per person per day
6. Banded rudderfish and	Five fish per person per day

lesser amberjack (in aggregate)  
 7. Hogfish 5 fish per person per day

\* \* \*

H. Species	Minimum Size Limits
1. Red Snapper	16 inches total length (Recreational) 15 inches total length (Commercial)
2. Gray, yellowtail, cubera, dog, mahogany snapper, and schoolmaster	12 inches total length
3. Lane snapper	8 inches total length
4. Mutton snapper	16 inches total length
5. Vermilion snapper	10 inches total length
6. Red, gag, black and yellowfin grouper	20 inches total length
7. Scamp	16 inches total length
8. Greater amberjack	28 inches fork length (Recreational) 36 inches fork length (Commercial)
9. Black seabass	8 inches total length
10. Hogfish	12 inches fork length
11. Banded rudderfish and lesser amberjack	14 inches fork length (minimum size); 22 inches fork length (maximum size)
12. Gray triggerfish	12 inches total length

\* \* \*

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 16:539 (June 1990), amended LR 19:1442 (November 1993), LR 20:797 (July 1994), LR 21:1267 (November 1995), LR 22:860 (September 1996), LR 24:1138 (June 1998), LR 24:1139 (June 1998), LR 24:1972 (October 1998), LR 26:000 (March 2000), LR 26:1505 (July 2000).

Thomas M. Gattle, Jr.  
 Chairman

0007#085

**RULE**

**Department of Wildlife and Fisheries  
 Wildlife and Fisheries Commission**

**Resident Game Hunting Season C2000-2001  
 (LAC 76:XIX.101 and 103)**

The Wildlife and Fisheries Commission does hereby promulgate rules and regulations governing the hunting of resident game birds and game quadrupeds.

**Title 76**

**WILDLIFE AND FISHERIES**

**Part XIX. Hunting and WMA Regulations**

**Chapter 1. Resident Game Hunting Season**

**§101. General**

The Resident Game Hunting Season, 2000-2001 regulations are hereby adopted by the Wildlife and Fisheries Commission. A complete copy of the Regulation Pamphlet may be obtained from the Department.

AUTHORITY NOTE: Promulgated in accordance with R.S. 56:115.

HISTORICAL NOTE: Promulgated by the Department of Wildlife and Fisheries, Wildlife and Fisheries Commission, LR 21:707 (July 1995), amended LR 22:585 (July 1996), LR 23:871

(July 1997), LR 24:1324 (July 1998), LR 25:1290 (July 1999), LR 26:1506 (July 2000).

**§103. Resident Game Birds and Animals 2000-2001**

A. Shooting hours. One-half hour before sunrise to one-half hour after sunset.

B. Consult Regulation Pamphlet for seasons or specific regulations on Wildlife Management Areas or specific localities.

Species	Season Dates	Daily Bag Limit	Possession Limit
Quail	Nov. 18-Feb. 28	10	20
Rabbit	Oct. 7-Feb. 28	8	16
Squirrel	Oct. 7-Feb. 11	8	16
Pheasant	Nov. 18-Jan. 31	2 (Cock Only)	4
Deer	See Schedule	1 antlered and 1 antlerless (when legal on private lands)	6/season

**C. Deer Hunting Schedule**

Area	Archery	Muzzleloader (All Either Sex)	Still Hunt	With or Without Dogs
1	Oct. 1-Jan. 31	Nov. 11-Nov. 17 Jan. 22-Jan. 28	Nov. 18-Dec. 3 Jan. 8-Jan. 21	Dec. 9-Jan. 7
2	Oct. 1-Jan. 31	Oct. 28-Nov. 3 Jan. 13-Jan. 19	Nov. 4-Dec. 8	Dec. 9-Jan. 12
3	Sept. 16-Jan. 16	Oct. 7-Oct. 13 Dec. 11-Dec. 15	Oct. 14-Dec. 10 Dec. 16-Jan. 1	
4	Oct. 1-Jan. 31	Nov. 11-Nov. 17 Jan. 13-19	Nov. 18-Jan. 12	
5	Oct. 1-Jan. 31	Nov. 11-Nov. 17 Jan. 13-19 Bucks Only	Nov. 18-26	
6	Oct. 1-Jan. 31	Nov. 11-Nov. 17 Jan. 22-Jan. 28	Nov. 18-Dec. 3	Dec. 9-Jan. 21
7	Oct. 1-Jan. 31	Oct. 7-Oct. 13 Jan. 15-Jan. 21	Oct. 14-Oct. 29 Nov. 18-Dec. 3	Dec. 9-Jan. 14

**D. Modern Firearm Schedule (Either Sex Seasons)**

Parish	Modern Firearm Either-Sex Days
Acadia	Oct. 14-15, 21-22, 28-29, Nov. 4-5, 18-19, 24-26
Allen	Area 2: Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10 Area 3: Oct. 14-15, 21-22, 28-29, Nov. 4-5, 18-19, 24-26
Ascension	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
Assumption	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
Avoyelles	Area 1: Nov. 18-19, 24-26, Dec. 9-10 Area 2: Nov. 4-5, 24-26, Dec. 9-10 Area 6: Nov. 18-19, 24-26, Dec. 9-10
Beauregard	Area 2: Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10 Area 3: Oct. 14-15, 21-22, 28-29, Nov. 4-5, 18-19, 24-26
Bienville	Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10
Bossier	Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10
Caddo	Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10
Calcasieu	Area 2: Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10 Area 3: Oct. 14-15, 21-22, 28-29, Nov. 4-5, 18-19, 24-26
Caldwell	Nov. 4-5, 24-26, Dec. 2-3
Cameron	Oct. 14-15, 21-22, 28-29, Nov. 4-5, 18-19, 24-26

Catahoula	Area 1: Nov. 18-19, 24-26, Dec. 9-10
	Area 2: Nov. 4-5, 24-26, Dec. 2-3
Claiborne	Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 2-3
Concordia	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
DeSoto	Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10
East Baton Rouge	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
East Carroll	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17 East of mainline Mississippi River Levee and south and east of La. 877 from West Carroll Parish line to La. 580, south of La. 580 to U.S. 65, west of U.S. 65 to Madison parish line.
	Nov. 18-19, 24-26, the remainder of the parish.
East Feliciana	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
Evangeline	Area 2: Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10
	Area 6: Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
Franklin	Nov. 18-19, 24-26
Grant	Area 1: Nov. 18-19, 24-26, Dec. 2-3, 9-10
	Area 2: Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10
Iberia	Area 3: Oct. 14-15, 21-22, 28-29, Nov. 4-5, 18-19, 24-26
	Area 6: Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
	Area 7: Oct. 14-15, Nov. 18-19, 24-26, Dec. 9-10
Iberville	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
Jackson	Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10
Jefferson	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
Jefferson Davis	Area 2: Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10
	Area 3: Oct. 14-15, 21-22, 28-29, Nov. 4-5, 18-19, 24-26
Lafayette	Area 3: Oct. 14-15, 21-22, 28-29, Nov. 4-5, 18-19, 24-26
	Area 6: Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
Lafourche	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
LaSalle	Area 1: Nov. 18-19, 24-26, Dec. 9-10
	Area 2: Nov. 4-5, 24-26, Dec. 9-10
Lincoln	Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10
Livingston	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
Madison	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
Morehouse	Area 2: Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10
	Area 4: Nov. 18-19, 24-26
Natchitoches	Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10
Orleans	Closed to all deer hunting
Ouachita	Area 2: Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10
	Area 4: Nov. 18-19, 24-26
Plaquemines	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
Pointe Coupee	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
Rapides	Area 1: Nov. 18-19, 24-26, Dec. 2-3, 9-10
	Area 2: Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10
	Area 3: Oct. 14-15, 21-22, 28-29, Nov. 4-5, 18-19, 24-26
	Area 6: Nov. 18-19, 24-26, Dec. 2-3, 9-10
Red River	Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10
Richland	Nov. 18-19, 24-26
Sabine	Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10

St. Bernard	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
St. Charles	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
St. Helena	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
St. James	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
St. John	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
St. Landry	Area 3: Oct. 14-15, Nov. 24-26, Dec. 9-10
	Area 6: Nov. 18-19, 24-26, Dec. 9-10
St. Martin	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
St. Mary	Area 6: Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
	Area 7: Oct. 14-15, Nov. 18-19, 24-26, Dec. 9-10
St. Tammany	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
Tangipahoa	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
Tensas	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
Terrebonne	Oct. 14-15, Nov. 18-19, 24-26, Dec. 9-10
Union	Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10
Vermillion	Oct. 14-15, 21-22, 28-29, Nov. 4-5, 18-19, 24-26
Vernon	Area 2: Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10
	Area 3: Oct. 14-15, 21-22, 28-29, Nov. 4-5, 18-19, 24-26
Washington	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
Webster	Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10
West Baton Rouge	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
West Carroll	Closed
West Feliciana	Nov. 18-19, 24-26, Dec. 2-3, 9-10, 16-17
Winn	Nov. 4-5, 11-12, 18-19, 24-26, Dec. 2-3, 9-10

E. Farm Raised White-tailed Deer on Supplemented Shooting Preserves

Archery	Modern Firearm	Either Sex	Muzzleloader
Oct. 1-Jan. 31 (Either Sex)	Nov. 1-Dec. 6 Dec. 21-23 Dec. 26-Jan.31	Nov. 1-3 Dec. 21-23 Dec. 26-30	Dec. 7-20 (Either Sex)

F. Exotics on Supplemented Shooting Preserves: Either Sex, no closed season.

AUTHORITY NOTE: Promulgated in accordance with R.S. 56:115.

HISTORICAL NOTE: Promulgated by the Department of Wildlife and Fisheries, Wildlife and Fisheries Commission, LR 21:707 (July 1995), amended LR 22:585 (July 1996), LR 23:871 (July 1997), LR 24:1324 (July 1998), LR 25:1290 (July 1999), repromulgated LR 25:1526 (August 1999), LR 26:1506 (July 2000).

Thomas M. Gattle, Jr.  
Chairman

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