Agency 28

Department of Health and Environment

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Article 1.—DISEASES

28-1-27. HIV screening guidelines. (a) Adoption by reference. The HIV screening guidelines for each pregnant woman and newborn child whose HIV status is unknown shall be the section titled “recommendations for pregnant women” on pages 11 through 14 in the centers for disease control and prevention’s document titled “revised recommendations for HIV testing of adults, adolescents, and pregnant women in health-care settings,” dated September 22, 2006. This section is hereby adopted by reference, except as specified in subsection (b).

(b) Deletions. In the portion titled “universal opt-out screening,” the following text shall be deleted:

1. The words “oral or” in the following sentence: “Pregnant women should receive oral or written information that includes an explanation of HIV infection, a description of interventions that can reduce HIV transmission from mother to infant, and the meanings of positive and negative test results and should be offered an opportunity to ask questions and to decline testing”; and

2. the following sentence: “No additional process or written documentation of informed con-
sent beyond what is required for other routine prenatal tests should be required for HIV testing.”
(Authorized by and implementing K.S.A. 2010 Supp. 65-6018; effective Feb. 25, 2011.)

28-1-30. Definitions. For the purposes of this article, the following definitions shall apply:
(a) “College designee” and “university designee” mean a person determined by the administration at a postsecondary educational institution to be responsible for the oversight and implementation of that institution’s TB prevention and control plan.
(b) “Department” means Kansas department of health and environment.
(c) “Health care provider” means any of the following licensed persons: medical doctor, doctor of osteopathy, doctor of podiatric medicine, advanced registered nurse practitioner as defined in K.S.A. 65-1113 and amendments thereto, and physician assistant.
(d) “High-risk student” means a student who meets any of the following conditions:
   (1) Has signs and symptoms of active TB;
   (2) has been in contact with a person who has been diagnosed with active TB; or
   (3) has traveled, resided in for more than three months, or was born in any country where TB is endemic as determined by the secretary and consistent with guidance provided by the centers for disease control and prevention.
(e) “Postsecondary educational institution” has the meaning specified in K.S.A. 65-129e and amendments thereto.
(f) “Secretary” means secretary of health and environment or the secretary’s designee.
(g) “Student” means an individual who has been admitted to a postsecondary educational institution where the course of studies will require physical attendance in a classroom setting with one or more persons.
(h) “TB” means tuberculosis.
(i) “TB prevention and control plan” means the policies and procedures adopted pursuant to K.S.A. 65-129f, and amendments thereto, used at a postsecondary educational institution to reduce the risk of tuberculosis transmission and derived from pages 32 through 42 of the guidelines in “controlling tuberculosis in the United States: recommendations from the American thoracic society, CDC, and the infectious diseases society of America,” published in morbidity and mortality weekly report (MMWR) on November 4, 2005, vol. 54, no. RR-12. The pages specified in this subsection are hereby adopted by reference.
(j) “Tuberculosis” has the meaning specified in K.S.A. 65-116a, and amendments thereto. For the purposes of these regulations, the term “active TB” shall mean a person diagnosed with tuberculosis by a health care provider, and the term “latent TB infection” shall mean a person who is determined by a health care provider to have the bacterium that causes tuberculosis but has not been diagnosed with active TB. (Authorized by and implementing K.S.A. 2010 Supp. 65-129e and 65-129f; effective April 15, 2011.)

28-1-31. TB prevention and control plan. (a) Each college designee and university designee shall implement a TB prevention and control plan.
(1) The TB prevention and control plan shall include a TB evaluation component for each student determined to be a high-risk student, which shall include the following as necessary:
   (A) Tuberculin skin testing;
   (B) interferon gamma release assay;
   (C) chest radiograph;
   (D) sputum evaluation;
   (E) physical exam; and
   (F) review of signs of symptoms.
(2) The TB prevention and control plan shall provide notification to the department if a student has been found to have latent TB infection or active TB, in accordance with K.A.R. 28-1-2.
(b) Each postsecondary educational institution shall be in compliance with this regulation within 12 months after the beginning of the academic year following the effective date of this regulation. (Authorized by and implementing K.S.A. 2010 Supp. 65-129e and 65-129f; effective April 15, 2011.)

28-1-32. Health services at colleges and universities; submission of a TB prevention and control plan; monitoring of compliance.
(a) Each college designee and university designee shall submit to the department a TB prevention and control plan and any revisions that have been developed in consultation with the department, to ensure that the TB prevention and control plan includes evaluation criteria that are in compliance with the best practice standards as recommended by the division of tuberculosis elimination of the centers for disease control and prevention.
(b) Each postsecondary educational institution that provides health services and that performs
infection or disease evaluations, or both, shall keep internal TB evaluation records for each high-risk student.

(c) Each postsecondary educational institution that does not have health services to perform infection or disease evaluations, or both, shall maintain the data on the form provided by the department for each individual considered to be a high-risk student.

(d) Each postsecondary educational institution shall be in compliance with this regulation within 12 months after the beginning of the academic year following the effective date of this regulation. (Authorized by and implementing K.S.A. 2010 Supp. 65-129e and 65-129f; effective April 15, 2011.)

**Article 4.—MATERNAL AND CHILD HEALTH**

28-4-92. License fees. When an applicant or licensee submits an application for a license or for the renewal of a license, the applicant or licensee shall submit to the secretary the appropriate nonrefundable license fee specified in this regulation:

(a) For each maternity center as defined in K.S.A. 65-502 and amendments thereto, $75;

(b) for each child placement agency as defined in K.S.A. 65-503 and amendments thereto, $75;

(c) for each child care resource and referral agency as defined in K.S.A. 65-503 and amendments thereto, $75;

(d) for each of the following child care facilities, $75 plus $1 times the maximum number of children to be authorized under the license:

(1) Day care home or group day care home, as defined in K.A.R. 28-4-113; and

(2) child care center, as defined in K.A.R. 28-4-420; and

(e) for each of the following child care facilities with a license capacity of 13 or more children, $35 plus $1 for each child included in the license capacity, with the total not to exceed $75, and for each of the following child care facilities with a license capacity of 12 or fewer children, $15:

(1) Attendat care facility, as defined in K.A.R. 28-4-285;

(2) detention center or secure care center, as defined in K.A.R. 28-4-350;

(3) preschool, as defined in K.A.R. 28-4-420;

(4) psychiatric residential treatment facility, as defined in K.A.R. 28-4-1200;

(5) residential center or group boarding home, as defined in K.A.R. 28-4-268; and


28-4-93. Online information dissemination system. This regulation shall apply to the department’s online information dissemination system for child care facilities, as defined in K.S.A. 65-503 and amendments thereto. (a) Definitions. The following terms shall have the meanings specified in this regulation:

(1) “Applicant” means a person who has applied for a license to operate a child care facility but who has not yet been granted the license.

(2) “Applicant with a temporary permit” means a person who has been granted a temporary permit to operate a child care facility.

(3) “Department” means Kansas department of health and environment.

(4) “Licensee” means a person who has been granted a license to operate a child care facility.

(5) “Online information dissemination system” means the electronic database of the department that is accessible to the public.

(b) Identifying information. Each applicant, each applicant with a temporary permit, and each licensee that wants the department to display the address and the telephone number of the child care facility on the online information dissemination system shall notify the department on a form provided by the department. (Authorized by and implementing K.S.A. 2010 Supp. 65-534; effective Feb. 3, 2012.)

28-4-113. Definitions. (a) “Applicant” means a person who has applied for a license but who has not yet been granted a license to operate a facility.

(b) “Applicant with a temporary permit” means a person who has been granted a temporary permit to operate a facility.

(c) “Care provider” and “provider” mean an individual who cares for and supervises children in a facility and has responsibility for the health, safety, and well-being of children, including the following:
(1) A primary care provider;
(2) an individual who is at least 16 years of age and who is working in the facility; and
(3) a substitute.

(d) “Day care home” means the premises on which care is provided for a maximum of 10 children under 16 years of age, with a limited number of children under five years of age in accordance with K.A.R. 28-4-114 (e).

(e) “Department” means Kansas department of health and environment.

(f) “Emergency care” means care for a period not to exceed two weeks for children not regularly enrolled in a facility.

(g) “Evening care” means care after 6:00 p.m. and before 1:00 a.m. the following day for children enrolled at a facility and present during operating hours.

(h) “Extended absence” means time away from a facility for a period of more than three hours in a day.

(i) “Facility” means a day care home or a group day care home.

(j) “Fire inspector” means a person approved by the state fire marshal to conduct fire safety inspections.

(k) “Group day care home” means the premises on which care is provided for a maximum of 12 children under 16 years of age, with a limited number of children under five years of age in accordance with K.A.R. 28-4-114 (f).

(l) “Large motor activity” means any movement involving the arms, legs, feet, or entire body, including crawling, running, and jumping.

(m) “License capacity” means the maximum number of children who are authorized to be on the premises at any one time.

(n) “Licensed physician” means an individual who is licensed to practice either medicine and surgery or osteopathy in Kansas by the Kansas state board of healing arts or who practices either medicine and surgery or osteopathy in another state and is licensed under the licensing statutes of that state.

(o) “Licensee” means a person who has been granted a license to operate a facility.

(p) “Overnight care” means care after 1:00 a.m. for children enrolled at a facility and present during operating hours.

(q) “Primary care provider” means an applicant with a temporary permit, a licensee, or the designee of an applicant with a temporary permit or a licensee. Each applicant with a temporary permit, each licensee, and each designee shall be at least 18 years of age and shall meet the requirements for a primary care provider specified in K.A.R. 28-4-114a.

(r) “Professional development training” means training approved by the secretary that is related to working with children in care.

(s) “Substitute” means an individual who supervises children in the temporary absence or extended absence of the primary care provider and who meets the following requirements:

(1) In the temporary absence of the primary care provider, the substitute shall be at least 16 years of age and shall meet all of the requirements for a provider specified in K.A.R. 28-4-114a (a)(2), (b)(4)(C), and (c).

(2) In the extended absence of the primary care provider, the substitute shall be at least 18 years of age and shall meet all of the requirements for a primary care provider specified in K.A.R. 28-4-114a.

(t) “Temporary absence” means time away from a facility for a period not to exceed three hours in a day.

(u) “Use zone” means the surface under and around a piece of equipment onto which a child falling from or exiting the equipment would be expected to land.

(v) “Weapons” means any of the following:

1. Firearms;
2. ammunition;
3. air-powered guns, including BB guns, pellet guns, and paint ball guns;
4. hunting and fishing knives;
5. archery equipment; or

28-4-114. Applicant; licensee. (a) Application process.

(1) Any person desiring to operate a facility shall apply for a license on forms provided by the department.

(2) Each applicant and each licensee shall submit the fee specified in K.A.R. 28-4-92 for a license or for the renewal of a license. The applicable fee shall be submitted at the time of license
application or renewal and shall not be refundable.

(3) The granting of a license to any applicant or applicant with a temporary permit may be refused by the secretary if the applicant or applicant with a temporary permit is not in compliance with the applicable requirements of the following:

(A) K.S.A. 65-504 through 65-506, and amendments thereto;

(B) K.S.A. 65-508, and amendments thereto;

(C) K.S.A. 65-512, and amendments thereto;

(D) K.S.A. 65-530 and 65-531, and amendments thereto; and

(E) all regulations governing facilities.

(4) Failure to submit the application forms and fee for renewal of a license shall result in an assessment of a late fee pursuant to K.S.A. 65-505, and amendments thereto, and may result in closure of the facility.

(b) Applicant and licensee requirements. Each applicant, if an individual, and each licensee, if an individual, shall meet the following requirements:

(1) Be at least 18 years of age;

(2) not be involved in child care or a combination of child care and other employment for more than 18 hours in a 24-hour period; and

(3) not be engaged in either business or social activities that interfere with the care or supervision of children.

(c) Multiple child care facilities.

(1) Each applicant with a temporary permit and each licensee who operates more than one child care facility, as defined in K.S.A. 65-503 and amendments thereto, shall maintain each child care facility as a separate entity.

(2) A license for an additional child care facility shall not be granted until all existing child care facilities for which the licensee has been granted a license are in compliance with licensing regulations.

(d) Multiple licenses. No licensee shall be licensed concurrently for or provide more than one type of child care or child and adult care on the same premises.

(e) License capacity for day care homes. Each applicant with a temporary permit and each licensee shall ensure that the requirements of this subsection are met.

(1) The maximum number of children for which a day care home may be licensed shall be the following:

<table>
<thead>
<tr>
<th>Age of Children Enrolled</th>
<th>License Capacity</th>
</tr>
</thead>
<tbody>
<tr>
<td>At Least 2½ Years but Under 11 Years of Age</td>
<td>9</td>
</tr>
<tr>
<td>At Least 3 Years but Under 11 Years of Age</td>
<td>10</td>
</tr>
<tr>
<td>At Least 5 Years but Under 11 Years of Age</td>
<td>12</td>
</tr>
</tbody>
</table>

TABLE III—LICENSE CAPACITY, TWO PROVIDERS*

<table>
<thead>
<tr>
<th>Number of Children Under 18 Months</th>
<th>Maximum Number of Children at Least 18 Months but Under 5 Years of Age</th>
<th>Maximum Number of Children at Least 5 Years but Under 11 Years of Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>3</td>
<td>12</td>
</tr>
<tr>
<td>2</td>
<td>4</td>
<td>12</td>
</tr>
<tr>
<td>3</td>
<td>6</td>
<td>12</td>
</tr>
<tr>
<td>4</td>
<td>8</td>
<td>10</td>
</tr>
</tbody>
</table>

* A second provider shall be present when the number of children exceeds the maximum number allowed for one provider. See Table I.

** Children five years of age and over may be substituted for younger children in the license capacity.
TABLE IV—LICENSE CAPACITY, TWO PROVIDERS*

<table>
<thead>
<tr>
<th>Maximum Number of Children Under 18 Months</th>
<th>Maximum Number of Children at Least 2½ Years but Under 11 Years of Age*</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>5</td>
<td>7</td>
</tr>
<tr>
<td>7</td>
<td>12</td>
</tr>
</tbody>
</table>

*A second provider shall be present when the number of children exceeds the maximum number allowed for one provider. See Table I.

**Children five years of age and over may be substituted for younger children in the license capacity.

(2) Children at least 11 years of age but under 16 years of age unrelated to the provider shall be included in the license capacity if child care for this age group as a whole exceeds three hours a week.

(g) Developmental levels. Any child who does not function according to age-appropriate expectations shall be counted in the age group that reflects the developmental age level of the child.

(h) License capacity not exceeded. Each applicant with a temporary permit and each licensee shall ensure that the total number of children on the premises, including children under 11 years of age related to the applicant with a temporary permit, or any other provider, does not exceed the license capacity, except for additional children permitted in subsection (j).

(i) Emergency care. Emergency care may be provided if the additional children do not cause the license capacity to be exceeded.

(j) Additional children on the premises. In addition to the number of children permitted under the terms of the temporary permit or the license and specified in subsections (e) and (f), other children may be permitted on the premises.

(1) Not more than two additional children 2½ years of age or older who attend part-day preschool or part-day kindergarten may be present at any time between the hours of 11:00 a.m. and 1:00 p.m. for the noon meal on days that school is in session.

(2) Not more than two additional children at least five years of age but under 11 years of age may be present between the hours of 6:00 a.m. and 6:00 p.m. The additional children may be present as follows:

(A) During the academic school year before and after school, in-service days, school holidays, scheduled or emergency closures, and school breaks not to exceed two consecutive weeks; and

(B) during the two consecutive weeks before the opening of the academic school year in August or September and following the end of the academic school year in May or June.

(3) Not more than two additional children 11 years of age or older, unrelated to the applicant with a temporary permit or the licensee, may be present for not more than two hours a day during child care hours if all of the following conditions are met:

(A) The additional children are not on the premises for the purpose of receiving child care in the facility.

(B) The additional children are visiting the applicant’s or the licensee’s own child or children.

(C) The additional children are supervised by a provider if they have access to the children in care.

(k) Substitute. Each applicant with a temporary permit and each licensee shall arrange for a substitute to care for children in the event of a temporary absence or extended absence of the primary care provider.

(l) Posting of temporary permit or license and availability of regulations. Each applicant with a temporary permit and each licensee shall post any temporary permit or license conspicuously as required by K.S.A. 65-504, and amendments thereto. A copy of the current regulations governing facilities shall be kept on the premises and shall be available to all providers at all times.


28-4-114a. Initial and ongoing professional development. If an applicant, an applicant with a temporary permit, or a licensee is not an individual, the applicant, applicant with a temporary permit, or licensee shall designate an in-
individual to meet the requirements of this regulation.

(a) Orientation.

(1) Each person shall, before applying for a license, complete an orientation program on the requirements for operating a facility, provided by the health department or the secretary’s designee that serves the county in which the facility will be located.

(2) Each applicant, each applicant with a temporary permit, and each licensee shall provide orientation to each individual who will be caring for children about the policies and practices of the facility, including duties and responsibilities for the care and supervision of children. Each provider shall complete the orientation before the provider is given sole responsibility for the care and supervision of children. The orientation shall include the following:

(A) Licensing regulations;
(B) the policies and practices of the facility, including emergency procedures, behavior management, and discipline;
(C) the schedule of daily activities;
(D) care and supervision of children in care;
(E) health and safety practices; and
(F) confidentiality.

(b) Health and safety training. Each applicant, each applicant with a temporary permit, each licensee, and each provider shall complete health and safety training approved by the department.

(1) Each applicant and each applicant with a temporary permit shall complete the training not later than 30 calendar days after submitting an application for a license.

(2) Each provider shall complete the training before the date of employment or not later than 30 calendar days after the date of employment.

(3) Each licensee whose license was issued before the effective date of this regulation shall complete the training within one calendar year after the effective date of this regulation. Each provider who was employed in the facility before the effective date of this regulation shall obtain the certifications within one calendar year after the effective date of this regulation.

(4) Each individual required to obtain the certifications shall maintain current certifications.

(c) Pediatric first aid and pediatric cardiopulmonary resuscitation (CPR) certifications. Each applicant, each applicant with a temporary permit, each licensee, and each provider shall obtain certification in pediatric first aid and pediatric CPR as specified in this subsection.

(1) Each applicant and each applicant with a temporary permit shall obtain the certifications not later than 30 calendar days after submitting an application for a license.

(2) Each provider shall obtain the certifications before the date of employment or not later than 30 calendar days after the date of employment.

(3) Each licensee whose license was issued before the effective date of this regulation shall obtain the certifications within one calendar year after the effective date of this regulation. Each provider who was employed in the facility before the effective date of this regulation shall obtain the certifications within one calendar year after the effective date of this regulation.

(4) Each individual required to obtain the certifications shall maintain current certifications.

(d) Initial professional development requirements. In addition to the professional development requirements in subsections (a), (b), and (c), each applicant, each applicant with a temporary permit, and each primary care provider shall, not later than 30 calendar days following initial application for a license or employment, meet one of the following requirements:

(1) Have a child development associate credential;
(2) complete at least 15 hours of professional development training, which may include the training required in subsections (a), (b), and (c);
(3) have at least three months of previous employment in a facility or in a child care center, as defined in K.A.R. 28-4-420, that has been in continuous operation for three or more years; or
(4) meet the requirements for a program director of a child care center as specified in K.A.R. 28-4-429.

(e) Annual professional development training requirements. In each licensure year, each primary care provider shall meet one of the following requirements:
(1) Complete five clock-hours of professional development training;
(2) maintain current accreditation by the national association for family child care; or
(3) hold a current child development associate credential.

(f) Documentation. Documentation of all orientation, training, and certifications for each individual shall be kept in that individual’s file in the facility. (Authorized by and implementing K.S.A. 2010 Supp. 65-508; effective Feb. 3, 2012.)

28-4-115. Facility. (a) Water supply and sewerage systems. Each applicant, each applicant with a temporary permit, and each licensee shall ensure that public water and sewerage systems, where available, are used. If a nonpublic source for the water supply is used, the water shall be safe for drinking and shall be tested annually by a department-certified laboratory. If a well is used, the well shall be approved by the local authority for private well permitting, the department, or a licensed water well contractor. A copy of the test results and the approval shall be kept on file at the facility. Each private sewerage system shall be maintained in compliance with all applicable state and local laws.

(b) Drinking water for children under 12 months of age. If children under 12 months of age are enrolled in a facility using water from a nonpublic source, including private well water, commercially bottled drinking water shall be purchased and used until a laboratory test confirms that the nitrate content of the private well water is not more than 10 milligrams per liter (10 mg/l) as nitrogen.

(c) General environmental requirements. Each facility shall have 25 square feet of available play space per child and shall be constructed, arranged, and maintained to provide for the health and safety of children in care. Each applicant, each applicant with a temporary permit, and each licensee shall ensure that the facility meets the following requirements:

(1) Has walls that are in good condition;
(2) is skirted and anchored if a mobile home;
(3) has a 2A 10B:C fire extinguisher;
(4) has a working smoke detector on each level of the facility;
(5) is uncluttered, visibly clean, and free from any evidence of vermin infestation and any objects or materials that constitute a danger to children in care;
(6) has kitchen and outdoor trash and garbage in covered containers or in tied plastic bags;
(7) meets all of the following requirements for each heating appliance:
(A) has a protective barrier for each freestanding heating appliance to protect from burns; and
(B) has each heating appliance using combustible fuel vented to the outside;
(8) has each electrical outlet covered or inaccessible to prevent easy access by a child when the outlet is not in use;
(9) has any power strip or extension cord positioned in a manner that prevents a tripping or shock hazard;
(10) has each stairway with more than two stairs railed;
(11) if any children under 2½ years of age are in care, meets all of the following requirements:
(A) Has each stairway equipped with balusters not more than four inches apart or guarded to prevent a child’s head or body from falling through;
(B) has each stairway guarded by a secured door or gated to prevent unsupervised access by the child, including a latching device that an adult can open readily in an emergency;
(C) does not have any accordion gate in use; and
(D) does not have a pressure gate at the top of any stairway;
(12) has a readily available second means of escape from the first floor;
(13) has each lockable interior door designed to permit the door to be unlocked from either side in case of an emergency;
(14) is maintained at a temperature of not less than 65 degrees Fahrenheit and not more than 85 degrees Fahrenheit in the play area;
(15) does not have any window coverings with strings or cords accessible to children in care; and
(16) has at least one bathroom with at least one sink and one flush toilet. All fixtures shall be in working order at all times. An individual towel and washcloth or disposable products shall be provided for each child. Hand soap shall be readily accessible in each bathroom.

(d) Fire safety. Each facility shall be approved for fire safety by a fire inspector.

(e) Basements and other floors. A basement or a second floor used for child care in a facility shall be approved for fire safety by a fire inspector before use. A third floor shall not be used for child care.
(f) Refrigerator. A refrigerator shall be available for the storage of perishable foods. Refrigerated medications shall be in a locked box.

(g) Storage of hazardous items. The following hazardous items shall be safely stored:

1. All household cleaning supplies and all bodily care products bearing warning labels to keep out of reach of children or containing alcohol shall be in locked storage or stored out of reach of children under six years of age. Soap used for hand washing may be kept unlocked and placed on the back of the counter by a bathroom or kitchen sink.

2. Dangerous chemicals, household supplies with warning labels to keep out of reach of children, and all medications shall be in locked storage or stored out of reach of children under 10 years of age.

3. Sharp instruments shall be stored in drawers or cabinets equipped with childproof devices to prevent access by children or stored out of reach of children.

4. Tobacco products, ashtrays, lighters, and matches shall be stored out of reach of children.

(h) Storage of weapons. No child in care shall have access to weapons. All weapons shall be stored in a locked room, closet, container, or cabinet. Ammunition shall be kept in locked storage separate from other weapons.

(i) Outdoor play area. The designated area for outdoor play and large motor activities on the premises shall meet all of the following requirements:

1. The outdoor play area shall be fenced if the play area adjoins that of another child care facility, as defined in K.S.A. 65-503 and amendments thereto, or if the area surrounding, or the conditions existing outside, the play area present hazards that could be dangerous to the safety of the children, which may include any of the following:

   A. A fish pond or a decorative pool containing water;

   B. Railroad tracks; or

   C. A water hazard, including a ditch, a pond, a lake, and any standing water.

2. Outdoor play equipment that is safely constructed and in good repair shall be available and placed in an area free of health, safety, and environmental hazards.

3. The use of a trampoline shall be prohibited during the hours of operation of the facility. If a trampoline is on the premises, the trampoline shall be made inaccessible to children during the facility’s hours of operation.

4. Climbing equipment and swings shall be either anchored in the ground with metal straps or pins or set in cement, to prevent movement of the equipment and swings.

5. All surfaces under and around climbing equipment and swings shall meet the following requirements:

   A. Impact-absorbent surfacing material shall be installed in each use zone and around anchored equipment over four feet in height, including climbing equipment, slides, and swings.

   B. Impact-absorbent surfacing material shall consist of material intended for playground use, including shredded bark mulch, wood chips, fine sand, fine gravel, shredded rubber, unitary surfacing material, or synthetic impact material.

   C. Hard-surfacing materials, including asphalt, concrete, and hard-packed dirt, shall not be used in any use zone. This requirement shall apply regardless of the height of the climbing equipment, slides, and swings.

   D. Surfaces made of loose material shall be maintained by replacing, leveling, or raking the material.

6. Swings shall not have wooden or metal seats.

7. Teeter-totters and merry-go-rounds designed for school-age children shall not be used by children under five years of age.


28-4-115a. Supervision. (a) Supervision plan.

1. Each applicant, each applicant with a temporary permit, and each licensee shall develop a supervision plan for children in care that includes all age ranges of children for whom care will be provided. A copy of the plan shall be available for review by the parents or legal guardians of children in care and by the department. The plan shall include the following:

   A. A description of the rooms, levels, or areas of the facility including indoor and outdoor areas in which the child will participate in activities, have snacks or meals, nap, or sleep;
(B) the manner in which supervision will be provided; and
(C) any arrangements for the provision of evening or overnight care.
(2) Each applicant, each applicant with a temporary permit, and each licensee shall update the supervision plan when changes are made in any of the requirements of paragraph (a)(1).
(3) Each provider shall follow the supervision plan.
(b) General supervision requirements. Each applicant with a temporary permit and each licensee shall ensure that supervision is provided as necessary to protect the health, safety, and well-being of each child in care.
(1) Each child in care shall be under the supervision of a provider who is responsible for the child's health, safety, and well-being.
(2) Each provider shall be aware at all times of the location of each child in that provider's care and the activities in which the child is engaged. Each provider shall perform the following:
(A) Interact with the child and attend to the child's needs;
(B) respond immediately if the child is crying or in distress in order to determine the cause and to provide comfort and assistance;
(C) investigate immediately any change in the activity or noise level of the child; and
(D) respond immediately to any emergency that could impact the health, safety, and well-being of the child.
(3) No provider shall engage in business, social, or personal activities that interfere with the care and supervision of children.
(4) If used, electronic monitoring devices, including infant monitors, shall not replace any of the supervision requirements of this regulation.
(c) Indoor supervision requirements. When any child is indoors, each provider shall ensure that supervision is provided for each child who is napping or sleeping.
(A) Each child who is napping or sleeping shall be within sight of and in proximity to the provider and shall be visually checked on by the provider at least once every 15 minutes.
(B) The provider shall meet all of the requirements of K.A.R. 28-4-116a for any child who is under 12 months of age and is napping or sleeping.
(C) When any child is napping or sleeping in a room separate from the provider, the door to that room shall remain open.
(D) The provider visually checks on the child and responds as necessary to meet the needs of the child.
(3) Each applicant with a temporary permit and each licensee shall ensure that supervision is provided for each child who is in care.
(a) Outdoor supervision requirements. When any child is outdoors, each provider shall ensure that all of the following requirements are met in addition to the requirements of subsection (b):
(1) For each child who is under 2½ years of age and who is awake, the provider shall be outdoors at all times and remain within sight of and in proximity to each child, watching and directing the activities of the child. When the provider is attending to personal hygiene needs or engaging in other child care duties and is temporarily unable to remain within sight of the child, the provider shall meet all of the following conditions:
(A) The provider has first ensured the safety of each child.
(B) The provider is able to respond immediately to any child in distress.
(C) The provider remains within hearing distance of each child.
(2) For each child 2½ years of age and older who is awake, the provider may permit the child to go unattended to another room within the facility to engage in activities if all of the following conditions are met:
(A) The provider determines, based on observations of the child's behavior and information from the parent or legal guardian, that the child can go unattended to another room within the facility.
(B) The door to each room remains open.
(C) The provider remains within hearing distance of the child.
(D) The provider visually checks on the child and responds as necessary to meet the needs of the child.
(3) Each applicant with a temporary permit and each licensee shall ensure that supervision is provided for each child who is in care.
(d) Outdoor supervision requirements. When any child is outdoors, each provider shall ensure that all of the following requirements are met, in addition to the requirements of subsection (b):
(1) For each child under five years of age, the provider shall be outdoors at all times and remain within sight of and in proximity to each child, watching and directing the activities of the child.
(2) For each child five years of age and older, the provider may permit the child to go unattended to the facility's designated outdoor play area on the premises if all of the following conditions are met:
(A) The designated play area on the premises is enclosed with a fence.
(B) The provider determines that the area is
free of any potential hazards to the health and safety of the child.

(C) The provider remains within hearing distance of the child.

(D) The provider visually checks on the child and responds as necessary to meet the needs of the child.

e) Evening care and overnight care. Each applicant with a temporary permit and each licensee who provide evening care or overnight care shall ensure that the following requirements are met:

(1) All requirements of subsections (a) through (d) shall be met.

(2) When overnight care is provided in a day care home, at least one provider shall remain awake at all times.

(3) When overnight care is provided in a group day care home, a second provider shall remain awake at all times if the number of children who are awake exceeds the requirements of K.A.R. 28-4-114 (e), table I. (Authorized by and implementing K.S.A. 2010 Supp. 65-508; effective Feb. 3, 2012.)

28-4-116. Daily care of children. (a)

Daily activities.

(1) Each applicant with a temporary permit and each licensee shall provide daily activities that promote healthy growth and development, take into consideration the cultural background and traditions that are familiar to the children, and incorporate both indoor and outdoor activities that are appropriate for the ages and developmental levels of the children in care.

(2) Each child shall be offered a choice of activities and the opportunity to participate. Age-appropriate toys, play equipment, books, and other learning materials shall be available in sufficient quantities to allow each child a choice of activities.

(3) The activities, supplies, and equipment shall be designed to promote the following:

(A) Large motor and small motor development, which may include running, climbing, jumping, grasping objects, drawing, buttoning, and tying;

(B) creative expression, which may include dramatic play, music, and art;

(C) math and science skills, which may include sorting, matching, counting, and measuring; and

(D) language development and literacy, which may include reading, singing, finger plays, writing, and stories.

(4) Each child shall be given the opportunity for at least one hour of physical activity daily, either outdoors as described in paragraph (a)(7) or indoors.

(5) Each applicant with a temporary permit and each licensee shall ensure that the following requirements are met if the daily activities include any media viewing:

(A) Each program shall be age-appropriate and, if rated, shall have a rating appropriate for the ages and developmental levels of the children who view the program.

(B) No child shall be required to participate in media viewing. Each child not engaged in media viewing shall be offered a choice of at least one other activity for that time period.

(6) Toys and other items used by children shall meet the following requirements:

(A) Be clean, of safe construction, and in good repair;

(B) be washed and sanitized daily when used by children under 18 months of age; and

(C) be washed and sanitized before being used by another child, if contaminated by saliva or other bodily fluids.

(7) Unless prohibited by the child’s medical condition or extreme weather conditions, each child in care shall be taken outdoors daily. Each child 12 months of age or older shall have the opportunity for at least one hour of outdoor play daily.

(b) Self-help and personal care. Each provider shall ensure that each child is assisted as needed with hand washing, toileting, dressing, and other personal care.

(c) Hand washing. Hands shall be washed using soap and warm running water and dried with a paper towel or a single-use towel. When soap and running water are not readily available, an alcohol-based hand sanitizer may be used only by adults and, under adult supervision, by children two years of age and older.

(1) Each provider shall wash that provider’s hands as needed when hands are soiled and when each of the following occurs:

(A) At the start of the hours of operation or when first arriving at the facility;

(B) returning from being outdoors;

(C) after toileting, diapering, assisting a child with toileting, or handling any bodily fluids;

(D) before preparing each snack and each meal and before and after eating each snack and each meal;
(E) before and after administrating any medication; and
(F) after feeding or handling any pet.

(2) Each child shall wash that child’s hands or be assisted in washing that child’s hands as needed when hands are soiled and when each of the following occurs:

(A) First arriving at the facility;
(B) returning from being outdoors;
(C) after toileting;
(D) before and after eating each snack and each meal; and
(E) after feeding or handling any pet.

(d) Smoking prohibited. No provider shall smoke while providing direct physical care to children. Smoking in any room, enclosed area, or other enclosed space on the premises shall be prohibited when children are in care pursuant to K.S.A. 65-530, and amendments thereto.

(e) Nutrition and food service. Each applicant with a temporary permit and each licensee shall develop and implement menu plans for meals and snacks that contain a variety of healthful foods, including fresh fruits, fresh vegetables, whole grains, lean meats, and low-fat dairy products.

(1) If children under 18 months of age are in care, the following requirements shall be met:

(A) Each child shall be held when bottle-fed until the child can hold the child’s own bottle.
(B) No child shall be allowed to sleep with a bottle in the mouth.
(C) Each bottle that contains prepared formula or breast milk shall be stored in the refrigerator with the nipple covered. The bottle shall be labeled with the child’s name, the contents, and the date received and shall be used within 24 hours of the date on the label.

(D) If a child does not finish a bottle, the contents of the bottle shall be discarded.

(E) No formula or breast milk shall be heated in a microwave oven.

(F) Solid foods shall be offered when the provider and the parent or legal guardian of the child determine that the child is ready for solid foods. Opened containers of solid foods shall be labeled with the child’s name, the contents, and the date opened. Containers shall be covered and stored in the refrigerator.

(2) Each applicant with a temporary permit and each licensee shall serve nutritious meals and snacks based on the amount of time a child is in care.

(A) Each child who is in care at least 2½ hours but under four hours shall be served at least one snack.
(B) Each child who is in care at least four hours but under eight hours shall be served at least one snack and at least one meal.
(C) Each child who is in care at least eight hours but under 10 hours shall be served at least two snacks and one meal or at least one snack and two meals.
(D) Each child who is in care for 10 or more hours shall be served at least two meals and at least two snacks.

(3) Each applicant with a temporary permit and each licensee shall include the following items in meals and snacks:

(A) Breakfast shall include the following:

(i) A fruit, vegetable, full-strength fruit juice, or full-strength vegetable juice;
(ii) bread or grain product; and
(iii) milk.

(B) Noon and evening meals shall include one item from each of the following:

(i) Meat or a meat alternative;
(ii) two vegetables or two fruits, or one vegetable and one fruit;
(iii) bread or a grain product; and
(iv) milk.

(C) Midmorning and midafternoon snacks shall include at least two of the following:

(i) Milk;
(ii) fruit, vegetable, full-strength fruit juice, or full-strength vegetable juice;
(iii) meat or a meat alternative; or
(iv) bread or grain product.

(D) For snacks, juice shall not be served when milk is served as the only other item.

(4) A sufficient quantity of food shall be prepared for each meal to allow each child to have a second portion of bread, milk, and either vegetables or fruits.

(5) Drinking water shall be available to each child at all times when the child is in care.

(6) Only pasteurized milk products shall be served.

(7) Milk served to any child who is two years of age or older shall have a fat content of one percent or less, unless a medical reason is documented in writing by a licensed physician.

(8) If a fruit juice or a vegetable juice is served, the juice shall be pasteurized and full-strength.

(9) If any child has a food allergy or special dietary need, the provider and the parent or legal
guardian of the child shall make arrangements for the provision of alternative foods or beverages.

(10) Meals and snacks shall be served to each child using individual tableware that is appropriate for the food or beverage being served. Food shall be served on tableware appropriate for that food and shall not be served directly on a bare surface, including a tabletop.

(11) Tableware shall be washed, rinsed and air-dried or placed in a dishwasher after each meal.

(12) Sanitary methods of food handling and storage shall be followed.

(13) A washable or disposable individual cup, towel, and washcloth shall be provided for each child.

(f) Recordkeeping. Each applicant with a temporary permit and each licensee shall ensure that a file is maintained for each child, including each child enrolled for emergency care. Each file shall include the following information:

(1) The full name, home and business addresses, and telephone numbers of the child’s parent or parents or legal guardian and the name, address, and telephone number of the individual to notify in case of emergency;

(2) the full name and telephone number of each individual authorized to pick up the child and to provide transportation to and from the facility;

(3) a medical record as required by K.A.R. 28-4-117(a), except that each child enrolled for emergency care shall be exempt from K.A.R. 28-4-117 (a)(2); and


28-4-116a. Napping and sleeping. (a) Rest period. Each child shall have a daily, supervised rest period as needed. Each child who does not nap or sleep shall be given the opportunity for quiet play.

(b) Safe sleep practices for children in care.

(1) Each applicant with a temporary permit and each licensee shall develop and implement safe sleep practices for children in care who are napping or sleeping.

(2) Each applicant with a temporary permit and each licensee shall ensure that the safe sleep practices are discussed with the parent or legal guardian of each child before the first day of care.

(3) Each provider shall follow the safe sleep practices of the facility.

(4) Each child who is 12 months of age or older shall nap or sleep on a bed, a cot, the lower bunk of a bunk bed, or a pad over a carpet or area rug on the floor.

(5) Each applicant with a temporary permit and each licensee shall ensure that all of the following requirements are met for each child in care who is under 12 months of age.

(A) The child shall nap or sleep in a crib or a playpen. Stacking cribs or bassinets shall not be used. Cribs with water-bed mattresses shall not be used.

(B) If the child falls asleep on a surface other than a crib or playpen, the child shall be moved to a crib or playpen.

(C) The child shall not nap or sleep in the same crib or playpen as that occupied by another child at the same time.

(D) The child shall be placed on the child’s back to nap or sleep.

(E) When the child is able to turn over independently, the child shall be placed on the child’s back but then shall be allowed to remain in a position preferred by the child. Wedges or infant positioners shall not be used.

(F) The child shall sleep in a crib or a playpen that is free of any soft items, which may include pillows, quilts, heavy blankets, bumpers, and toys.

(G) If a lightweight blanket is used, the blanket shall be tucked along the sides and foot of the mattress. The blanket shall not be placed higher than the child’s chest. The head of the child shall remain uncovered. The child may nap or sleep in sleep clothing, including sleepers and sleep sacks, in place of a lightweight blanket.

(c) Napping or sleeping surfaces. Each applicant with a temporary permit and each licensee shall ensure that the following requirements are met for all napping or sleeping surfaces:

(1) Clean, individual bedding shall be provided for each child.

(2) Each surface used for napping or sleeping shall be kept clean, of safe construction, and maintained in good repair.

(3) Each crib and each playpen shall be used only for children who meet the manufacturer’s recommendations for use, including any age,
height, or weight limitations. The manufacturer's instructions for use, including any recommendations for use, shall be kept on file at the facility.

(4) Each crib and each playpen shall have a firm, tightfitting mattress and a fitted sheet. The mattress shall be set at its lowest point when any child using the crib or playpen becomes able either to sit up or to pull up to a standing position inside the crib or playpen, whichever occurs first, to ensure that the child cannot climb out of the crib or playpen.

(5) If a crib or playpen is slatted, the slats shall be spaced not more than $\frac{2}{3}$ inches apart.

(6) On and after December 28, 2012, each applicant, each applicant with a temporary permit, and each licensee shall ensure that no crib purchased before June 28, 2011 is in use in the facility.

(7) Each pad used for napping or sleeping shall be at least $\frac{1}{2}$ inch thick, washable or enclosed in a washable cover, and long enough so that the child's head and feet rest on the pad. Clean, individual bedding, including a bottom and a top cover, shall be provided for each child.

(8) Cribs, cots, playpens, and pads, when in use for napping or sleeping, shall be separated by at least 24 inches in all directions except when bordering on the wall.

(9) When not in use, cribs, cots, playpens, pads, and bedding shall be stored in a clean and sanitary manner.

(d) Consumer warning or recall. Each applicant with a temporary permit and each licensee shall make any necessary changes to follow the recommendations of any consumer warning or recall of a crib or a playpen as soon as the warning or recall is known.

(e) Transition from crib or playpen. The determination of when a child who is 12 months of age or older is ready to transition from a crib or a playpen to another napping or sleeping surface shall be made by the parent or guardian of the child and by either the applicant with a temporary permit or the licensee. The requirements of paragraphs (c)(3) and (4) for a child using a crib or playpen shall apply. (Authorized by and implementing K.S.A. 2010 Supp. 65-508; effective Feb. 3, 2012.)


28-4-377. (Authorized by and implementing K.S.A. 65-508; effective May 1, 1981; amended, T-87-34, Nov. 19, 1986; amended May 1, 1987; revoked July 9, 2010.)

28-4-378 and 28-4-379. (Authorized by and implementing K.S.A. 65-508; effective May 1, 1981; revoked July 9, 2010.)

28-4-428a. Education and training requirements. (a) Orientation.

(1) Each person shall, before applying for a license, complete an orientation program on the requirements for operating a preschool or a child care center. If the person is not an individual, the person shall designate an individual to meet this requirement. The orientation shall be provided by
the county health department or the secretary’s
designee that serves the county in which the pre-
school or child care center will be located.

(2) Each licensee shall provide orientation to
each program director not later than seven cal-
endar days after the date of employment and be-
fore the program director is given sole respon-
sibility for implementing and supervising the
program.

(3) Each licensee shall ensure that orientation
is completed by each staff member who will be
counted in the staff-child ratio and by each vol-
unteer who will be counted in the staff-child ratio.
Each staff member and volunteer shall complete
the orientation within seven calendar days after
the date of employment or volunteering and be-
fore the staff member or volunteer is given sole
responsibility for the care and supervision of
children.

(4) Each licensee shall ensure that the orien-
tation for each program director, staff member,
and volunteer is related to work duties and re-
sponsibilities and includes the following:

(A) Licensing regulations;
(B) the policies and practices of the preschool
or child care center, including emergency pro-
duced, behavior management, and discipline;
(C) the schedule of daily activities;
(D) care and supervision of children in care;
(E) health and safety practices; and
(F) confidentiality.

(b) Health and safety training.

(1) Each staff member who is counted in the
staff-child ratio, each volunteer who is counted in
the staff-child ratio, and each program director
shall complete health and safety training either
before employment or volunteering or not later
than 30 calendar days after the date of em-
ployment or volunteering.

(2) The training shall be approved by the sec-
 ASSISTANT-ING, and shall include the following:

(A) At least two clock-hours of training in rec-
ognizing the signs of child abuse or neglect, in-
cluding prevention of abusive head trauma and
the reporting of suspected child abuse and
neglect;

(B) at least two clock-hours of training in basic
child development; and

(C) at least two clock-hours of training on safe
sleep practices and sudden infant death syndrome
if the individual will be caring for children under
12 months of age.

(3) Each individual who is required to complete
this training and who was employed in the pre-
school or child care center before the effective
date of this regulation shall complete the training
within one calendar year after the effective date
of this regulation.

(c) Pediatric first aid and cardiopulmonary re-
suscitation (CPR) certifications.

(1) Each staff member counted in the staff-
child ratio, each volunteer counted in the staff-
child ratio, and each program director shall obtain
certification in pediatric first aid and in pediatric
CPR as specified in this subsection either before
the date of employment or volunteering or not
later than 30 calendar days after the date of em-
ployment or volunteering.

(2) Each individual who is required to obtain
the certifications and who was employed in the
preschool or child care center before the effective
date of this regulation shall obtain the certifica-
tions within one calendar year after the effective
date of this regulation.

(3) Each individual who is required to obtain
the certifications shall maintain current
certifications.

(d) Education requirements. Each program di-
rector shall be a high school graduate or equiva-
 lent. For each unit in a preschool or child care
center, there shall be in attendance at all times at
least one staff member who has a high school di-
ploma or equivalent, as required in K.A.R. 28-4-
429(h).

(e) Annual in-service training requirements.

(1) Each program director shall complete an-
ual in-service training as required in K.A.R. 28-
4-428(e)(1).

(2) Each staff member counted in the staff-
child ratio and each volunteer counted in the staff-
child ratio shall complete annual in-service train-
ing as required in K.A.R. 28-4-428(e)(2).

(f) Documentation. Each licensee shall ensure
that documentation of all orientation, training,
certifications, and education requirements is kept
in each individual’s file in the preschool or child

28-4-440. Infant and toddler programs.
(a) Infant and toddler programs shall be conducted on the ground floor only.
(b) Each unit of infants and each unit of toddlers shall be separate from each unit of older children.
(c) Floor furnaces shall be prohibited.
(d) A sleeping area separate from the play area shall be provided for infants.
(e) A crib or playpen shall be provided for each infant in care at any one time. Cribs and playpens shall be maintained in good condition. Clean individual bedding shall be provided.
(f) Each licensee shall ensure that the following requirements are met:
   (1) The use of stacking cribs, cribs with water mattresses, or bassinets shall be prohibited.
   (2) Cribs and playpens shall have slats not more than \( \frac{3}{8} \) inches apart.
   (3) All sides of each crib or playpen shall be up while the crib or playpen is in use.
   (4) On and after December 28, 2012, each licensee shall ensure that no crib purchased before June 28, 2011 is in use in the facility.
(g) Each licensee shall make any necessary changes to follow the recommendations of any consumer warning or recall of a crib or a playpen as soon as the warning or recall is known.
(h) Each licensee shall develop and implement safe sleep policies and practices for infants and toddlers and shall ensure that the policies and practices are discussed with the parent or legal guardian of each child before the first day of care. The safe sleep policies and practices shall include the following requirements:
   (1) Each staff member who cares for children and each volunteer who cares for children shall follow the safe sleep policies and practices of the child care center.
   (2) Each staff member who cares for infants and each volunteer who cares for infants shall ensure that all of the following requirements are met:
      (A) Each infant shall nap or sleep in a crib or a playpen.
      (B) An infant shall not nap or sleep in the same crib or playpen as that occupied by another infant or child at the same time.
      (C) If an infant falls asleep on a surface other than a crib or playpen, the infant shall be moved to a crib or playpen.
      (D) Each infant shall be placed on the infant’s back to nap or sleep.
      (E) When an infant is able to turn over independently, the infant shall be placed on the infant’s back but then shall be allowed to remain in a position preferred by the infant. Wedges or infant positioners shall not be used.
   (F) Each infant shall sleep in a crib or a playpen that is free of any soft items, which may include pillows, quilts, heavy blankets, bumpers, and toys.
   (G) If a lightweight blanket is used, the blanket shall be tucked along the sides and foot of the mattress. The blanket shall not be placed higher than the infant’s chest. The head of the infant shall remain uncovered. Any infant may nap or sleep in sleep clothing, including sleepers and sleep sacks, in place of a lightweight blanket.
   (i) When children are awake, they shall not be left unattended in cribs or other confinement for more than 30 minutes.
   (j) An adult-size rocking chair shall be provided for each unit of infants.
   (k) Children not held for feeding shall have low chairs and tables, infant seats with trays, or high chairs with a wide base and a safety strap.
   (l) Either individually labeled towels and washcloths or disposable products shall be provided.
   (m) Items that children can place in their mouths shall be washed and sanitized daily and shall be washed and sanitized before being used by another child, if contaminated by saliva or other bodily fluids.
   (n) Each licensee shall ensure that at least one staff member who meets one of the following staff requirements is present for each unit of infants and each unit of toddlers:
      (1) Option 1: An individual who meets the qualifications of K.A.R. 28-4-429(b) and has at least three months’ experience caring for infants and toddlers;
      (2) option 2: a licensed L.P.N. or R.N. with three months’ experience in pediatrics or in licensed child care centers enrolling infants and toddlers; or
      (3) option 3: a child development associate credential in infant and toddler care.
   (o) Each licensee shall ensure that the following program requirements are met:
      (1) Daily activities shall contribute to the following:
         (A) Gross and fine motor development;
         (B) visual-motor coordination;
         (C) language stimulation; and
         (D) social and personal growth.
      (2) Infants and toddlers shall spend time out-
doors daily unless extreme weather conditions prevail.

(p) Each licensee shall ensure that the following food service requirements are met:

1. The nitrate content of water for children under one year of age shall not exceed 10 milligrams per liter (10 mg/l) as nitrogen.

2. Drinking water shall be available to each child at all times when the child is in care.

3. Infants shall be held when bottle-fed until they can hold their own bottles.

4. Infants and toddlers shall not be allowed to sleep with bottles in their mouths.

5. Each bottle that contains prepared formula or breast milk shall be refrigerated with the nipple covered. The bottle shall be labeled with the child's name, the contents, and the date received and shall be used within 24 hours of the date on the label. If a child does not finish a bottle, the contents of the bottle shall be discarded. No formula or breast milk shall be heated in a microwave oven.

6. Solid foods shall be offered when the program director and the parent or legal guardian of a child determine that the child is ready for solid foods. Opened containers of solid foods shall be labeled with child's name, the contents, and the date opened. Containers shall be covered and refrigerated. The food shall be used within three calendar days of the date opened. Food in previously opened containers shall be reheated only once and shall not be served to another child.

(q) Each licensee shall ensure that the following toileting requirements are met:

1. Children's clothing shall be changed whenever wet or soiled.

2. Each child shall have at least two complete changes of clothing.

3. Handwashing facilities shall be in or adjacent to the diaper-changing area.

4. A changing table shall be provided for each unit of infants and each unit of toddlers.

5. Each changing table shall have an impervious, undamaged surface. Each table shall be sturdy and shall be equipped with railings or safety straps.

6. Changing tables shall be sanitized after each use by washing with a disinfectant solution of ¼ cup of chlorine bleach to one gallon of water or with an appropriate commercial disinfectant.

7. Wet or soiled washable diapers or training pants shall be stored in a labeled, covered container or plastic bag and shall be returned home with the parent.

8. Wet or soiled disposable diapers shall be placed in a covered container or plastic bag, which shall be emptied daily.

9. There shall be one potty chair or child-sized toilet for every five toddlers. When a potty chair is used, the following requirements shall be met:

   A. Potty chairs shall be left in the toilet room.

   B. The wastes shall be disposed of immediately in a flush toilet.

   C. The container shall be sanitized after each use and shall be washed with soap and water daily.

   D. Potty chairs shall not be counted as toilets.

10. Each individual shall wash that individual's hands after diapering, assisting a child with toileting, or changing a child's wet or soiled clothing.

11. Changing and toileting procedures shall be posted.

(r) There shall be daily communication between the parent, parents, or legal guardian and the staff about each child's behavior and development. (Authorized by and implementing K.S.A. 2010 Supp. 65-508; effective May 1, 1983; amended May 1, 1984; amended May 1, 1985; amended May 1, 1986; amended, T-87-34, Nov. 19, 1986; amended May 1, 1987; amended Feb. 3, 2012.)

28-4-503. Timing of specimen collections. (a) The initial specimen from each infant born in an institution shall be obtained as follows:

1. Before discharge but no later than at 72 hours of age;

2. before any transfer of the infant from the institution of birth to another institution; and

3. before any blood transfusion.

(b) The initial specimen from each infant born outside of an institution shall be obtained as follows:

1. No later than at 72 hours of age; and

2. before any blood transfusion.

(c) A repeat specimen shall be obtained from each infant born in an institution or outside of an institution under any of the following conditions:

1. The specimen is unsatisfactory as specified in K.A.R. 28-4-505.

2. Follow-up recommendations have been issued by the department.

28-4-505. Unsatisfactory specimens. (a) Each unsatisfactory specimen shall be retained by the department. The sending agency or facility shall be notified that the specimen is unsatisfactory. The physician or birth attendant shall be notified that the specimen is unsatisfactory with a request to submit another specimen.

(b) A specimen shall be labeled unsatisfactory if one of the following criteria is met:

(1) Identifying information is missing.
(2) More than 10 days have elapsed since the date of collection.

28-4-514. MSUD and PKU; financial assistance availability for certain related expenses. (a)(1) The following factors shall be used to determine each family’s eligibility for financial assistance for necessary treatment products or medically necessary food treatment products, or both:

(A) Applicable income; and
(B) cash assets in excess of 15 percent of the applicable income.

(2) If a family seeking financial assistance under this regulation has more than one family member with MSUD or PKU, the family shall be considered eligible for financial assistance at a level that is 100 percent less than the eligibility level for a family with one family member.

(b) Each individual who applies for or who receives financial assistance under this regulation shall also meet the requirements in K.A.R. 28-4-401.

(c) The following eligibility requirements shall apply to each family:

(1) Each family with applicable income and cash assets less than or equal to 185 percent of the federal poverty level shall be eligible to receive 100 percent of the cost of necessary treatment products. This family shall be eligible each year for up to $1,000 of medically necessary food treatment products for family members who are 18 years of age and younger.

(2) Each family with applicable income and cash assets more than 185 percent but not more than 285 percent of the federal poverty level shall be eligible to receive 50 percent of the cost of necessary treatment products.

(3) Each family with applicable income and cash assets more than 285 percent but not more than 385 percent of the federal poverty level shall be eligible to receive 25 percent of the cost of necessary treatment products.

(4) No family with applicable income and cash assets over 385 percent of the federal poverty level shall be eligible to receive any of the cost of necessary treatment products.

(d) If a family’s health insurance covers a portion of the cost of necessary treatment products, the family’s financial responsibility for this cost shall be determined pursuant to subsection (c).

(e) If the department orders any necessary treatment products for a family that is responsible for part of the cost, that family shall receive a statement indicating the amount to be reimbursed to the department. If reimbursement is not received from the family within 60 days of the statement date, the placement of any future orders for necessary treatment products for that family shall no longer be processed by the department. (Authorized by K.S.A. 65-101 and K.S.A. 2009 Supp. 65-180; implementing K.S.A. 2009 Supp. 65-180; effective, T-28-7-5-06, July 5, 2006; effective Oct. 20, 2006; amended Dec. 3, 2010.)

28-4-520. Definitions. In addition to the definitions in K.S.A. 65-1,241 and amendments thereto, each of the following terms shall have the meaning assigned in this regulation:

(a) “Abnormal condition” means any condition established at conception or acquired in utero that results in a morphologic, metabolic, functional, or behavioral disorder requiring medical or other intervention.

(b) “Birth defects information system” means the Kansas birth defects reporting system, which collects, maintains, analyzes, and disseminates information regarding abnormal conditions, birth defects, and congenital anomalies of each stillbirth and of each child from birth to five years of age with a birth defect.

(c) “Congenital anomaly” means an error of morphogenesis that is established at conception or acquired during intrauterine life, which is also referred to as a birth defect.

(d) “ICD-9-CM” means the clinical modifica-
tion of the “international classification of diseases,” ninth revision, published by Ingenix inc., which is used to code and classify morbidity data from inpatient and outpatient records, physician offices, and most surveys from the national center for health statistics. The following portions of volume one of this document are hereby adopted by reference:

(1) “Genetic and metabolic conditions,” codes 243 through 279.2 on pages 49 through 60;
(2) “sickle cell anemia and other hemoglobinopathies,” codes 282.4 through 282.7 on pages 61 and 62;
(3) “congenital anomalies,” codes 740 through 759 on pages 227 through 240;
(4) “fetal alcohol syndrome,” code 760.71 on page 241.

(e) “Primary diagnosis” means the principal disease or condition assigned to an infant by a licensed physician based on the history of the disease process, signs and symptoms, laboratory data, and special tests. (Authorized by and implementing K.S.A. 2009 Supp. 65-1,245; effective Dec. 3, 2010.)

28-4-521. Reporting abnormal conditions and congenital anomalies. (a) Reporting requirements. Each physician, hospital, and freestanding birthing center shall report to the birth defects information system, pursuant to K.S.A. 65-1,241 and amendments thereto, the abnormal conditions and congenital anomalies listed in the portions of ICD-9-CM adopted by reference in K.A.R. 28-4-520.

(b) Method of reporting. Each abnormal condition and congenital anomaly that is required to be reported under this regulation shall be reported to the birth defects information system on a form approved by the secretary.

(c) Removal of reported information. Any parent or legal guardian may request the removal of reported information from the birth defects information system by using the removal form in accordance with K.S.A. 65-1,244, and amendments thereto. (Authorized by K.S.A. 2009 Supp. 65-1,245; implementing K.S.A. 2009 Supp. 65-1,241, 65-1,244, and 65-1,245; effective Dec. 3, 2010.)

28-4-1200. Definitions. For the purposes of K.A.R. 28-4-1200 through K.A.R. 28-4-1218, the following definitions shall apply: (a) “Administrator” means a person employed by a PRTF who is responsible for the overall administration of the PRTF.
(b) “Applicant” means a person who has applied for a license but who has not yet been granted a license to operate a PRTF. This term shall include an applicant who has been granted a temporary permit to operate a PRTF.
(c) “Basement” means each area in a building with a floor level more than 30 inches below ground level on all sides.
(d) “Department” means the Kansas department of health and environment.
(e) “Direct care staff” means the staff members employed by the PRTF to supervise the residents.
(f) “Exception” means a waiver of compliance with a specific PRTF regulation or any portion of a specific PRTF regulation that is granted by the secretary to an applicant or a licensee.
(g) “Individual plan of care” means a written, goal-oriented treatment plan and therapeutic activities designed to move the resident to a level of functioning consistent with living in a community setting.
(h) “Licensee” means a person who has been granted a license to operate a PRTF.
(i) “Program” means the comprehensive and coordinated activities and services providing for the care and treatment of residents.
(j) “Program director” means the staff person responsible for the oversight and implementation of the program.
(k) “Psychiatric residential treatment facility” and “PRTF” mean a residential facility for which the applicant or licensee meets the requirements of K.A.R. 28-4-1201.
(l) “Resident” means an individual who is at least six years of age but not yet 22 years of age and who is accepted for care and treatment in a PRTF.
(m) “Resident record” means any electronic or written document concerning a resident admitted to a PRTF that is created or obtained by an employee of the PRTF.
(n) “Restraint” means the application of physical force or any mechanical devices or the administration of any drugs for the purpose of restricting the free movement of a resident’s body.
(o) “Seclusion” means the involuntary confinement of a resident in a separate or locked room or an area from which the resident is physically prevented from leaving.
(p) “Secretary” means the secretary of the Kansas department of health and environment.
“Treatment” means comprehensive, individualized, goal-directed, therapeutic services provided to residents. (Authorized by K.S.A. 65-508 and 65-510; implementing K.S.A. 65-503 and 65-508; effective Oct. 9, 2009.)

28-4-1201. License requirements. (a) Each applicant and each licensee shall meet all of the following requirements in order to obtain and maintain a license to operate a PRTF:

(1) The state and federal participation requirements for medicaid reimbursement;

(2) receipt of accreditation of the PRTF by one of the following accrediting organizations:
   (A) Council on accreditation of rehabilitation facilities (CARF);
   (B) council on accreditation of child and family agencies (COA);
   (C) the joint commission or the joint commission on accreditation of healthcare organizations (JCAHO); or
   (D) an accrediting body approved by the Kansas health policy authority (KHPA), the Kansas department of social and rehabilitation services (SRS), and the Kansas juvenile justice authority (JJA); and

(3) receipt of approval of the PRTF by the Kansas department of social and rehabilitation services as meeting the state requirements.

(b) Each applicant and each licensee, if a corporation, shall be in good standing with the Kansas secretary of state.

(c) Each applicant and each licensee shall maintain documentation of compliance with all applicable building codes, fire safety requirements, and zoning codes. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-504 and 65-508; effective Oct. 9, 2009.)

28-4-1202. Application procedures. (a) Each person, in order to obtain a license, shall submit a complete application on forms provided by the department. The application shall be submitted at least 90 calendar days before the planned opening date of the PRTF and shall include the following:

(1) A description of the program and services to be offered, including the following:
   (A) A statement of the PRTF’s purpose and goals; and
   (B) the number, ages, and gender of residents for whom the PRTF is designed;

(2) the anticipated opening date;

(3) a request for the background checks for staff members and volunteers specified in K.A.R. 28-4-1205;

(4) documentation of compliance with the license requirements in K.A.R. 28-4-1201; and

(5) the license fee specified in K.A.R. 28-4-92.

(b) Each applicant shall notify the school district where the PRTF is to be located of the following:

(1) The planned opening date and the number, age range, gender, and anticipated special educational needs of the residents to be served;

(2) a statement indicating whether the residents will attend public school or will receive educational services on-site at the PRTF; and

(3) documentation that the notification was received by the school district at least 90 days before the planned opening date.

The 90-day notification to the local school district may be waived by the secretary upon receipt of a written agreement by the local school district.

(c) Each applicant shall submit to the department floor plans for each building that will be used as a PRTF. Each floor plan shall state whether or not any building will rely on locked entrances and exits or on delayed-exit mechanisms to secure the PRTF. Each applicant wanting to use delayed-exit mechanisms or to use hardware to lock or otherwise secure the exits shall obtain and shall submit to the department prior written approval from the Kansas state fire marshal, the Kansas department of social and rehabilitation services, the Kansas juvenile justice authority, and the Kansas health policy authority.

(d) Each applicant shall provide the department with a copy of the approval of the Kansas state fire marshall’s office for the floor plan and the use of any delayed-exit mechanism or hardware to lock or otherwise secure the exits before a license is issued.

(e) The granting of a license to any applicant may be refused by the secretary if the applicant is not in compliance with the requirements of the following:

(1) K.S.A. 65-504 through 65-508 and amendments thereto;

(2) K.S.A. 65-512 and 65-513 and amendments thereto;

(3) K.S.A. 65-516 and amendments thereto;

(4) K.S.A. 65-531 and amendments thereto; and

(5) all regulations governing psychiatric residential treatment facilities. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-501, 65-504, 65-
28-4-1203. Capacity; posting requirements; validity of temporary permit or license; new application required; advertising; closure. (a) Capacity. The maximum number, the age range, and the gender of residents authorized by the temporary permit or license shall not be exceeded.

(b) Posting requirements. The current temporary permit or the current license shall be posted conspicuously within the PRTF.

(c) Validity of temporary permit or license. Each temporary permit or license shall be valid only for the applicant or licensee and for the address specified on the temporary permit or the license. When an initial or amended license becomes effective, all temporary permits or licenses previously granted to the applicant or licensee at the same address shall become void.

(d) New application required. A new application and the fee specified in K.A.R. 28-4-92 shall be submitted for each change of ownership or location at least 90 calendar days before the planned change.

(e) Advertising. The advertising for each PRTF shall conform to the statement of services as given on the application. A claim for specialized services shall not be made unless the PRTF is staffed and equipped to offer those services.

(f) Closure. Any applicant may withdraw the application for a license. Any licensee may submit, at any time, a request to close the PRTF operated by the licensee. If an application is withdrawn or a PRTF is closed, the current temporary permit or license granted to the applicant or licensee for that PRTF shall become void. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-504, 65-505, and 65-508; effective Oct. 9, 2009.)

28-4-1204. Licensure; renewal; notifications; exceptions; amendments. (a) No person shall operate a PRTF unless issued a temporary permit or a license by the secretary.

(b) No earlier than 90 days before the renewal date but no later than the renewal date, each licensee who wishes to renew the license shall complete and submit an application for renewal on forms provided by the department, including the requests for background checks specified in K.A.R. 28-4-1205, and shall submit the fee specified in K.A.R. 28-4-92.

(c) Failure to submit the renewal application and fee as required by subsection (b) shall result in an assessment of a late renewal fee pursuant to K.S.A. 65-505, and amendments thereto, and may result in closure of the PRTF.

(d) Each licensee shall notify the department within 24 hours of any change in approval or accreditation required in K.A.R. 28-4-1201.

(e) Any applicant or licensee may request an exception from the secretary.

(1) Any request for an exception may be granted if the secretary determines that the exception is in the best interest of one or more residents or the family of a resident and the exception does not violate statutory requirements.

(2) Written notice from the secretary stating the nature of each exception and its duration shall be kept on file at the PRTF and shall be readily accessible to the department, SRS, and JJA.

(f) Each licensee shall obtain the secretary’s written approval before making any change in any of the following:

(1) The use or proposed use of the buildings;
(2) any changes to the physical structure of any building, including the following:

(A) An addition or alteration as specified in K.A.R. 28-4-1215;
(B) any change in the use of locked entrances or exits; and
(C) any change in any delayed-exit mechanisms;
(3) the addition or removal of a locking system for any room used for seclusion, as specified in K.A.R. 28-4-1212; or
(4) the program, provided through either of the following:

(A) Direct services; or
(B) agreements with specified community resources.

(g) Any licensee may submit a written request for an amended license.

(1) Each licensee who intends to change the terms of the license, including the maximum number, the age range, or the gender of residents to be served, shall submit a request for an amendment on a form provided by the department and a nonrefundable amendment fee of $35. An amendment fee shall not be required if the request to change the terms of the license is made at the time of the renewal.

(2) Each request for a change in the maximum number, the age range, or the gender of residents to be served shall include written documentation of the notification to the school district where the PRTF is located, as specified in K.A.R. 28-4-1202.
(3) The licensee shall make no change to the terms of the license, including the maximum number of residents, the age range of residents to be served, the gender of residents, and the type of license, until an amendment is granted, in writing, by the secretary. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-504, 65-505, and 65-508 and K.S.A. 2008 Supp. 65-516; effective Oct. 9, 2009.)

28-4-1205. Background checks. (a) With each initial application or renewal application, each applicant or licensee shall submit a request to conduct a background check by the Kansas bureau of investigation and a background check by the Kansas department of social and rehabilitation services in order to comply with the provisions of K.S.A. 65-516, and amendments thereto. Each request shall be submitted on a form provided by the department. The request shall list the required information for each individual 10 years of age and older who will be residing, working, or regularly volunteering in the PRTF.

(b) Each licensee shall submit a request to the department to conduct a background check by the Kansas bureau of investigation and a background check by the Kansas department of social and rehabilitation services before each new individual begins residing, working, or regularly volunteering in the PRTF.

(c) A copy of each request for a background check shall be kept on file at the PRTF.

(d) Residents admitted into a PRTF for care and treatment shall not be considered to be residing in the PRTF for the purposes of background checks. (Authorized by K.S.A. 65-508; implementing K.S.A. 2008 Supp. 65-516; effective Oct. 9, 2009.)

28-4-1206. Administration. (a) Each PRTF shall be governed by one of the following entities:

(1) A public agency, which shall employ an administrator for the PRTF; or

(2) a private entity with a governing board that is legally responsible for the operation, policies, finances, and general management of the PRTF. The private entity shall employ an administrator for the PRTF. The administrator shall not be a voting member of the governing board.

(b) Each licensee shall develop and implement written policies and procedures for the operation of the PRTF that shall include detailed descriptions of the roles and the responsibilities for staff and volunteers. The staff practices shall conform to the written policies and procedures and to all regulations governing PRTFs.

(c) A licensee or a staff member of a PRTF shall not accept permanent legal guardianship of any individual before the individual is admitted to the PRTF or while the individual is in treatment at the PRTF.

(d) A copy of the regulations governing PRTFs shall be kept on the premises at all times and shall be made available to all staff members.

(e) Each licensee shall make available to the department all reports and findings of on-site surveys, periodic performance reviews, monitoring visits, and accreditation reports by the PRTF’s accrediting body.

(f) Each licensee shall have sufficient finances to ensure the provision of program activities and services to each resident. Each licensee shall provide the financial resources necessary to maintain compliance with these regulations.

(g) Each resident’s personal money shall be kept separate from the PRTF’s funds. Each licensee shall maintain financial records of each resident’s personal money. (Authorized by and implementing K.S.A. 65-508; effective Oct. 9, 2009.)

28-4-1207. Staff requirements. (a) Each individual working or volunteering in a PRTF shall be qualified by temperament, emotional maturity, judgment, and understanding of residents necessary to maintain the health, comfort, safety, and welfare of individuals placed in psychiatric residential treatment facilities.

(b) Each food service staff member shall demonstrate compliance with all of the following requirements through ongoing job performance:

(1) Knowledge of the nutritional needs of residents;

(2) understanding of quantity food preparation and service;

(3) sanitary food handling and storage methods;

(4) willingness to consider individual, cultural, and religious food preferences of the residents; and

(5) willingness to work with the program director in planning learning experiences for residents about nutrition. (Authorized by and implementing K.S.A. 65-508; effective Oct. 9, 2009.)

28-4-1208. Records. Each licensee shall develop and implement written policies and procedures that address PRTF recordkeeping.
requirements, including resident records, personnel records, and general records. (a) Resident records. Each licensee shall maintain an individual record for each resident, which shall include the following information:

1. A health record that meets the requirements in K.A.R. 28-4-1211;
2. a copy of each written report of any incidents involving the resident and specified in K.A.R. 28-4-1209 and K.A.R. 28-4-1214;
3. documentation of each use of seclusion for the resident; and
4. a financial record of the resident’s personal money as specified in K.A.R. 28-4-1206.

(b) Personnel records. Each licensee shall maintain an individual personnel record for each staff member, which shall include the following information:

1. A health record that meets the requirements in K.A.R. 28-4-1211, including a record of the results of any health examinations and tuberculin tests;
2. the staff member’s current job responsibilities;
3. documentation that the staff member has read, understands, and agrees to all of the following:
   - The statutes and regulations regarding the mandatory reporting of suspected child abuse, neglect, and exploitation;
   - all regulations governing PRTFs; and
   - the PRTF’s policies and procedures applicable to the job responsibilities of the staff member; and
4. a copy of a valid driver’s license of a type appropriate for the vehicle being used, for any staff member who transports any resident.

(c) Volunteer records. Each licensee shall maintain an individual record for each volunteer of the PRTF, which shall include the following information:

1. A health record that meets the requirements in K.A.R. 28-4-1211, including a record of the results of any health examinations and tuberculin tests, for each volunteer in contact with residents; and
2. a copy of a valid driver’s license of a type appropriate for the vehicle being used, for any volunteer who transports any resident.

(d) General records. Each licensee shall ensure that general records are completed and maintained, which shall include the following:

1. Documentation of the requests submitted to the department for the purpose of background checks for each staff member and volunteer in order to comply with the provisions of K.S.A. 65-516, and amendments thereto;
2. documentation of notification to the school district;
3. documentation of each approval granted by the secretary for any change, exception, or amendment as specified in K.A.R. 28-4-1204 and K.A.R. 28-4-1215;
4. the policies and procedures of the PRTF;
5. all reports and findings of on-site visits, periodic performance reviews, monitoring visits to determine compliance with PRTF regulations and standards, and any accreditation reports by the PRTF’s accrediting body;
6. all written reports of the following:
   - All incidents or events specified in K.A.R. 28-4-1209 and K.A.R. 28-4-1214; and
   - the use of restraint or seclusion;
7. all documentation specified in K.A.R. 28-4-1218 for transporting residents;
8. all documentation specified in K.A.R. 28-4-1212 for the locking systems for the door of each room used for seclusion, including documentation of the state fire marshal’s approval;
9. all documentation specified in K.A.R. 28-4-1214 for emergency plans, fire and tornado drills, and written policies and procedures on the security and control of the residents;
10. all documentation specified in K.A.R. 28-4-1214 for the inspection and the maintenance of security devices, including locking mechanisms and any delayed-exit mechanisms on doors;
11. documentation of approval of any private water or sewage systems as specified in K.A.R. 28-4-1215; and
12. documentation of vehicle and liability insurance for each vehicle used by the PRTF to transport residents as specified in K.A.R. 28-4-1218. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-507 and 65-508 and K.S.A. 2008 Supp. 65-516; effective Oct. 9, 2009.)

28-4-1209. Notification and reporting requirements. (a) Each licensee shall ensure that the following notifications are submitted verbally or in writing upon discovery of the incident or event, but no later than 24 hours after the discovery:

1. Each instance of suspected abuse or neglect of a resident shall be reported to the Kansas de-
partment of social and rehabilitation services or to
law enforcement.
(2) Each incident resulting in the death of any
resident shall be reported to the following:
(A) Law enforcement;
(B) the department;
(C) the parent or guardian of the resident;
(D) the resident’s placing agent;
(E) the state medicaid agency;
(F) the Kansas department of social and reha-
bilitation services; and
(G) the state-designated protection and advoc-
cacy entity.
(3) Each incident resulting in the death of a
staff member while on duty at the PRTF shall be
reported to the department and to any other en-
tities according to the policies of the PRTF.
(4) Each incident resulting in a serious injury
to any resident, including burns, lacerations, bone
fractures, substantial hematomas, and injuries to
internal organs, shall be reported to the following:
(A) The department;
(B) the county health department in which the
PRTF is located;
(C) the parent or legal guardian of any resident
involved in the incident;
(D) the placing agent of any resident involved
in the incident;
(E) the state medicaid agency;
(F) the Kansas department of social and reha-
bilitation services; and
(G) the state-designated protection and advoc-
cacy entity.
(5) Each incident of suspected sexual assault
involving a resident as a victim or as a perpetrator
shall be reported to the following:
(A) Law enforcement;
(B) the Kansas department of social and reha-
bilitation services;
(C) the parent or legal guardian of the resident;
(D) the resident’s placing agent; and
(E) the department.
(6) Each suicide attempt by a resident shall be
reported to the following:
(A) The department;
(B) the resident’s placing agent;
(C) the parent or guardian of the resident;
(D) the state medicaid agency;
(E) the Kansas department of social and reha-
bilitation services; and
(F) the state-designated protection and advoc-
cacy entity.
(7) Each natural disaster shall be reported to
the department.
(8) Each instance of work stoppage shall be re-
ported to the department.
(9) Each incident that involves a riot or the tak-
ing of hostages shall be reported to the
department.
(10) Each fire shall be reported to the depart-
ment and to the state fire marshal.
(11) Each incident that involves any suspected
illegal act committed by a resident while in the
PRTF or by a staff member while on duty at the
PRTF shall be reported to law enforcement in
accordance with the policies of the PRTF.
(12) If any resident, staff member, or volunteer
of the PRTF contracts a reportable infectious or
contagious disease specified in K.A.R. 28-1-2, the
licensee shall ensure that a report is submitted to
the local county health department within 24
hours, excluding weekends and holidays.
(b) Each licensee shall complete a written re-
port within five calendar days of the discovery of
any incident or event identified in subsection (a).
(Authorized by and implementing K.S.A. 65-508;
effective Oct. 9, 2009.)
28-4-1210. Admission requirements. (a) No
individual less than six years of age shall be
admitted to a PRTF. No individual 21 years of age
or older shall be admitted to a PRTF as a new
resident, but any current resident may continue
to receive treatment until that resident reaches 22
years of age.
(b) Each individual who shows evidence of be-
ing physically ill, injured, or under the influence
of alcohol or drugs shall be assessed in accordance
with the PRTF’s policies and procedures to de-
termine the appropriateness of admission and any
need for immediate medical care. (Authorized by
and implementing K.S.A. 65-508 and 65-510; ef-
fective Oct. 9, 2009.)
28-4-1211. Health care. (a) Policies for
resident health care. Each licensee, in consulta-
tion with a physician, shall develop written poli-
cies that include provisions for the following:
(1) A health checklist and review for each res-
ident upon admission, including the following:
(A) Current physical, including oral, health
status;
(B) any allergies, including medication, food,
and plant;
(C) any current pain, including cause, onset,
duration, and location;
(D) preexisting medical conditions;
(E) current mood and affect;
(F) any current suicidal thoughts and history of suicide attempts;
(G) any infectious or contagious diseases;
(H) documentation of current immunizations or documentation of an exemption for medical or religious reasons as specified in K.A.R. 28-1-20;
(I) any drug or alcohol use;
(J) any current medications;
(K) any physical disabilities;
(L) menstrual history, if applicable;
(M) any sexually transmitted disease; and
(N) any history of pregnancy;
(2) follow-up health care, including a health assessment and referrals for any concerns identified in the health checklist and review;
(3) if medically indicated, chronic care, convalescent care, and preventive care;
(4) care for minor illness, including the use and administration of prescription and nonprescription drugs;
(5) care for residents under the influence of alcohol or other drugs;
(6) consultation regarding each individual resident, if indicated;
(7) infection control measures and universal precautions to prevent the spread of blood-borne infectious diseases, including medically indicated isolation; and
(8) maternity care as required by K.A.R. 28-4-279.

(b) Physical health of residents at admission and throughout placement. Each licensee shall maintain a health record for each resident to document the provision of health services, including dental services.

(1) Each licensee shall ensure that a health checklist is completed for each resident at the time of admission by the individual who admits the resident. The health checklist shall serve as a guide to determine if a resident is in need of medical or dental care and to determine if the resident is using any prescribed medications.

(2) Each licensee shall ensure that the PRTF’s physician, a physician’s assistant operating under a written protocol as authorized by a responsible physician, or an advanced registered nurse practitioner (ARNP) operating under a written protocol as authorized by a responsible physician and operating under the ARNP’s scope of practice is contacted for any resident who is taking a prescribed medication at the time of admission, to assess the need for continuation of the medication.

(3) Each change of prescription or directions for administering a prescription medication shall be ordered by the authorized medical practitioner with documentation placed in the resident’s record. Prescription medications shall be administered only to the designated resident as ordered by the authorized medical practitioner.

(4) Each licensee shall ensure that a physician, a physician’s assistant operating under a written protocol as authorized by the responsible physician, or an ARNP operating under a written protocol as authorized by a responsible physician and operating within the ARNP’s scope of practice is contacted for any resident who has acute symptoms of illness or who has a chronic illness.

(5) Within 72 hours of admission, a physician, a physician’s assistant operating under a written protocol as authorized by a responsible physician, or a nurse approved to conduct screening and health assessments shall review the health checklist. Based upon health indicators derived from the checklist or in the absence of documentation of a screening within the past 24 months, the reviewing physician, physician’s assistant, or nurse shall determine whether or not a full screening and health assessment are necessary. If a full screening and health assessment are necessary, the following requirements shall be met:

(A) The screening and health assessment shall be conducted by a licensed physician, a physician’s assistant operating under a written protocol as authorized by a responsible physician, or a nurse approved to conduct these examinations.

(B) The screening and health assessment shall be completed within 10 days of admission.

(6) Each licensee shall ensure that each resident receives a screening for symptoms of tuberculosis. A Mantoux test, a tuberculin blood assay test, or a chest X-ray shall be required if any of the following occurs:

(A) The resident has a health history or shows symptoms compatible with tuberculosis.

(B) The location of the PRTF is in an area identified by the local health department or the secretary as a high-risk area for tuberculosis exposure.

(C) Significant exposure to an active case of tuberculosis occurs, or symptoms compatible with tuberculosis develop.

(D) If there is a positive reaction to the diagnostic procedures, proof of proper treatment or
prophylaxis shall be required. Documentation of the test, X-ray, or treatment results shall be kept on file in the resident’s health record, and the county health department shall be informed of the results.

(7) Each licensee shall ensure that written policies and procedures prohibit the use of tobacco in any form by any resident while in care.

(c) Oral health of residents. Each licensee shall ensure that the following requirements are met:

(1) Dental care shall be available for all residents.

(2) Each resident who has not had a dental examination within the year before admission to the PRTF shall have a dental examination no later than 60 days after admission.

(3) Each resident shall receive emergency dental care as needed.

(4) Each licensee shall develop and implement a plan for oral health education and staff supervision of residents in the practice of good oral hygiene.

(d) Health record. Each licensee shall maintain a health record for each resident to document the provision of health services required in subsections (a), (b), and (c).

(e) Personal health and hygiene of residents.

(1) Each resident shall have access to drinking water, a lavatory, and a toilet.

(2) Each licensee shall ensure that each resident is given the opportunity to bathe upon admission and daily.

(3) Each licensee shall furnish each resident with toothpaste and a toothbrush.

(4) Each licensee shall ensure that each resident is given the opportunity to brush the resident’s teeth after each meal.

(5) Each licensee shall make opportunities available to the residents for daily shaving and regular haircuts.

(6) Each resident’s washable clothing shall be changed and laundered at least twice a week. Each licensee shall ensure that clean underwear and socks are available to each resident on a daily basis.

(7) Each female resident shall be provided personal hygiene supplies for use during her menstrual cycle.

(8) Each licensee shall ensure that clean, individual washcloths and bath towels are issued to each resident at least twice each week.

(9) Each licensee shall allow each resident to have at least eight hours of sleep each day.

(f) Personal health of staff members and volunteers of the PRTF.

(1) Each individual shall meet the following requirements:

(A) Be free from any infectious or contagious disease requiring isolation or quarantine as specified in K.A.R. 28-1-6;

(B) be free of any physical, mental, or emotional health conditions that would adversely affect the individual’s ability to fulfill the responsibilities listed in the individual’s job description and to protect the health, safety, and welfare of the residents; and

(C) be free from impaired ability due to the use of alcohol, prescription or nonprescription drugs, or other chemicals.

(2) Each individual who has contact with any resident or who is involved in food preparation or service shall have received a health assessment within one year before employment. This assessment shall be conducted by a licensed physician, a physician’s assistant operating under a written protocol as authorized by a responsible physician, or a nurse authorized to conduct these assessments.

(3) The results of each health assessment shall be recorded on forms provided by the department and shall be kept on file.

(4) A health assessment record may be transferred from a previous place of employment if the assessment occurred within one year before the individual’s employment at the PRTF and if the assessment was recorded on the form provided by the department.

(5) The initial health examination shall include a screening for symptoms of tuberculosis. A Mantoux test, a tuberculin blood assay test, or a chest X-ray shall be required if any of the following occurs:

(A) The individual has a health history or shows symptoms compatible with tuberculosis.

(B) The PRTF is located in an area identified by the local health department or the secretary as a high-risk area for tuberculosis exposure.

(C) Significant exposure to an active case of tuberculosis occurs, or symptoms compatible with tuberculosis develop.

(D) If there is a positive reaction to any of the diagnostic procedures, proof of proper treatment or prophylaxis shall be required. Documentation of the test, X-ray, and treatment results shall be kept on file in the individual’s health record, and
the county health department shall be informed of the results.

(6) If an individual experiences a significant change in physical, mental, or emotional health, including any indication of substance abuse, an assessment of the individual’s current health status may be required by the licensee or the secretary. A licensed health care provider qualified to diagnose and treat the condition shall conduct the health assessment. A written report of the assessment shall be kept in the individual’s personnel record and shall be submitted to the secretary on request.

(g) Tobacco products shall not be used inside the PRTF. Tobacco products shall not be used by staff members or volunteers of the PRTF in the presence of residents. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-507 and 65-508; effective Oct. 9, 2009.)

28-4-1212. Health and safety requirements for the use of seclusion rooms. (a) Each licensee shall ensure that the following requirements are met for each room used for seclusion:

(1) The locking system shall be approved by the state fire marshal.

(2) No room used for seclusion shall be in a basement.

(3) Each door shall be equipped with a window mounted in a manner that allows inspection of the entire room.

(4) Each window in a room used for seclusion shall be impact-resistant and shatterproof.

(5) The walls shall be completely free of objects.

(6) A mattress shall be available, if needed. If a mattress is used, the mattress shall be clean and in good repair.

(b) No more than one resident shall be placed in a room used for seclusion at the same time.

(c) Before any resident is admitted to a room used for seclusion, all items that could be used to injure oneself or others shall be removed from the resident.

(d) Each resident shall be permitted to wear clothing necessary to maintain modesty and comfort at all times. Paper clothing may be substituted if a resident uses clothing for self-harm. Sheets, towels, blankets, and similar items shall not be substituted for clothing.

(e) Each resident shall receive all meals and snacks normally served and shall be allowed time to exercise and perform necessary bodily functions.

(f) Each resident shall have ready access to drinking water and bathroom facilities upon request. (Authorized by and implementing K.S.A. 65-508; effective Oct. 9, 2009.)

28-4-1213. Library; recreation; work. (a) Library.

(1) Each licensee shall have written policies and procedures that govern the PRTF’s library program, including acquisition of materials, hours of availability, and staffing.

(2) Library services shall be available to all residents.

(A) Reading and other library materials may be provided for use during non-library hours.

(B) The reading and library materials shall be age-appropriate and suitable for various levels of reading competency and shall reflect a variety of interests.

(b) Recreation.

(1) Each licensee shall ensure that indoor and outdoor recreational areas and equipment are provided where security and visual supervision can be maintained at all times. Unless restricted for health reasons or for inclement weather, all residents shall be allowed to engage in supervised indoor and outdoor recreation on a daily basis.

(2) Each licensee shall ensure that art and craft supplies, books, current magazines, games, and other indoor recreational materials are provided for leisure activities.

(c) Work.

(1) Work assignments shall not be used as a substitute for recreation.

(2) Residents shall be prohibited from performing any of the following duties:

(A) Personal services for the staff members;

(B) cleaning or maintaining areas away from the PRTF;

(C) replacing employed staff members; or

(D) any work experience classified as hazardous by the Kansas department of labor regulations governing child labor.

(d) Auxiliary staff members may supervise library, recreation, or work activities. Direct care staff shall be within visual and auditory distance to provide immediate support, if necessary. (Authorized by and implementing K.S.A. 65-508; effective Oct. 9, 2009.)

28-4-1214. Emergency plan; drills; facility security and control of residents; storage and use of hazardous substances and unsafe items. (a) Emergency plan. Each licensee
shall develop an emergency plan to provide for the safety of all residents in emergencies, including fires, tornadoes, storms, floods, and serious injuries. The licensee shall review the plan at least annually and update it as needed.

(1) The emergency plan shall contain provisions for the care of residents in emergencies.

(2) Each licensee that permits the use of seclusion shall have a policy and procedure to evacuate each resident in seclusion if an emergency occurs.

(3) All of the staff members in the PRTF shall be informed of the emergency plan, which shall be posted in a prominent location.

(b) Fire and tornado drills. The PRTF staff shall conduct at least one fire drill and one tornado drill during each shift during each quarter. Drills shall be planned to allow participation by the residents in at least one fire drill and at least one tornado drill during each quarter.

(c) Facility security and control of residents. Each licensee shall develop and implement written policies and procedures that include the use of a combination of supervision, inspection, and accountability to promote safe and orderly operations. The policies and procedures shall prohibit the use of mace, pepper spray, and other chemical agents.

(1) All written policies and procedures for facility security and the control of residents shall be available to all staff members. Each licensee shall review the policies and procedures at least annually, update them as needed, and ensure that all of the requirements are met. These policies and procedures shall include all of the following requirements:

(A) Written operational shift assignments shall state the duties and responsibilities for each assigned position in the PRTF.

(B) Supervisory staff shall maintain a permanent log and prepare shift reports that record routine and emergency situations.

(C) All security devices, including locking mechanisms on doors and any delayed-exit mechanisms on doors, shall have current written approval from the state fire marshal and shall be regularly inspected and maintained, with any corrective action completed as necessary and recorded.

(D) No resident shall have access to any ammunition or weapons, including firearms and air-powered guns. If a licensee prohibits carrying a concealed weapon on the premises of the PRTF, the licensee shall post notice pursuant to K.S.A. 75-7c11, and amendments thereto.

(E) Procedures shall be developed and implemented for the control and use of keys, tools, medical supplies, and culinary equipment.

(F) No resident or group of residents shall exercise control or authority over another resident, have access to the records of another resident, or have access to or the use of keys that control security.

(G) Procedures shall be developed and implemented for knowing the whereabouts of all residents at all times and for handling runaways and unauthorized absences.

(H) Safety and security precautions pertaining to the PRTF and any staff vehicles used to transport residents shall be developed and implemented.

(2) Each licensee shall ensure the development of policies and procedures that govern documentation of all incidents, including riots, the taking of hostages, and the use of restraint.

(A) The policies and procedures shall require submission of a written report of all incidents to the program director no later than the conclusion of that shift. A copy of the report shall be kept in the record of each resident involved in the incident.

(B) Reports of incidents shall be made to document compliance with K.A.R. 28-4-1209.

(3) A written plan shall provide for continuing operations if a work stoppage occurs. A copy of this plan shall be available to each staff member.

(d) Storage and use of hazardous substances and unsafe items.

(1) No resident shall have unsupervised access to poisons, hazardous substances, or flammable materials. These items shall be kept in locked storage when not in use.

(2) Each licensee shall develop and implement policies and procedures for the safe and sanitary storage and distribution of personal care and hygiene items. The following items shall be stored in an area that is either locked or under the control of staff:

(A) Aerosols;

(B) alcohol-based products;

(C) any products in glass containers; and

(D) razors, blades, and any other sharp items.

(3) Each licensee shall develop and implement policies and procedures for the safe storage and disposal of prescription and nonprescription medications. All prescription and nonprescription
medications shall be stored in a locked cabinet located in a designated staff-accessible and supervised area. All refrigerated medications shall be stored under all food items in a locked refrigerator, in a refrigerator in a locked room, or in a locked medicine box in a refrigerator. Medications taken internally shall be kept separate from other medications. All unused medications shall be accounted for and disposed of in a safe manner, including being returned to the pharmacy, transferred with the resident, or safely discarded.

(4) Each PRTF shall have first-aid supplies, which shall be stored in a locked cabinet located in a staff-accessible and supervised area. First-aid supplies shall include the following:

(A) Assorted adhesive strip bandages;
(B) adhesive tape;
(C) a roll of gauze;
(D) scissors;
(E) a package of gauze squares;
(F) liquid soap;
(G) an elastic bandage;
(H) tweezers;
(I) rubbing alcohol; and
(J) disposable nonporous gloves in assorted sizes. (Authorized by and implementing K.S.A. 65-508; effective Oct. 9, 2009.)

28-4-1215. Environmental standards.

(a) General building requirements.

(1) Each licensee shall ensure that public water and sewage systems, where available, are used. If public water and sewage systems are not available, each licensee shall maintain approval by the appropriate health authorities for any private water and sewage systems that are used.

(2) A licensed architect shall be responsible for the plans for any newly constructed building or for any major addition or major alteration to an existing building.

(A) For a new building, preliminary plans and outline specifications, including plot plans, shall be submitted to the department for review before commencing the final working drawings and specifications. Each licensee shall submit the final working drawings, construction specifications, and plot plans to the department for review and written approval before the letting of contracts.

(B) For an addition or alteration to an existing building, each licensee shall submit a written statement defining the proposed use of the construction and detailing the plans and specifications to the department for review and written approval before commencing construction.

(3) If construction is not commenced within one year of submitting a proposal for a new building or an addition or alteration to an existing building, each licensee shall resubmit the plans and proposal to the department before proposed construction begins.

(b) Location and grounds requirements.

(1) Community resources, including health services, police protection, and fire protection from an organized fire department, shall be available.

(2) There shall be at least 100 square feet of outside activity space available for each resident allowed to utilize each outdoor area at any one time.

(3) The outside activity area shall be free of physical hazards.

(4) Sufficient space for visitor and staff parking at each PRTF shall be provided.

(c) Structural requirements and use of space. Each licensee shall ensure that the PRTF design, structure, interior and exterior environment, and furnishings promote a safe, comfortable, and therapeutic environment for the residents.

(1) Each PRTF shall be accessible to and usable by persons with disabilities.

(2) Each PRTF’s structural design shall facilitate personal contact and interaction between staff members and residents.

(3) Each sleeping room shall meet the following requirements:

(A) No resident’s room shall be in a basement.

(B) The minimum square footage of floor space shall be 80 square feet in each room occupied by one resident. Each room occupied by more than one resident shall have at least 60 square feet of floor space for each resident. At least one dimension of the usable floor space unencumbered by furnishings or fixtures shall be at least seven feet.

(C) The minimum ceiling height shall be seven feet eight inches over at least 90 percent of the room area.

(D) An even temperature of between 68 degrees Fahrenheit and 78 degrees Fahrenheit shall be maintained, with an air exchange of at least four times each hour.

(E) Sleeping rooms occupied by residents shall have a window source of natural light. Access to a drinking water source and toilet facilities shall be available 24 hours a day.

(F) Separate beds with level, flat mattresses in
good condition shall be provided for each resident. All beds shall be above the floor level.

(G) Clean bedding, adequate for the season, shall be provided for each resident. Bed linen shall be changed at least once a week or more frequently when soiled.

(4) Each sleeping room, day room, and classroom utilized by residents shall have lighting of at least 20 foot-candles in all parts of the room. There shall be lighting of at least 35 foot-candles in areas used for reading, study, or other close work.

(5) Adequate space for study and recreation shall be provided.

(6) Each living unit shall contain the following:
   (A) Furnishings that provide sufficient seating for the maximum number of residents expected to use the area at any one time;
   (B) writing surfaces that provide sufficient space for the maximum number of residents expected to use the area at any one time; and
   (C) furnishings that are consistent with the needs of the residents.

(7) Each PRTF shall have adequate central storage for household supplies, bedding, linen, and recreational equipment.

(8) If the PRTF is on the same premises as that of another licensed facility, the living unit of the PRTF shall be maintained in a separate, self-contained unit. Residents of the PRTF shall not use space shared with another licensed facility at the same time unless the plan for the use of space is approved, in writing, by the secretary and by SRS.

(9) If a PRTF has one or more day rooms, each day room shall provide space for a variety of resident activities. Day rooms shall be situated immediately adjacent to the residents’ sleeping rooms, but separated from the sleeping rooms by a floor-to-ceiling wall. Each day room shall provide at least 35 square feet for each resident, exclusive of lavatories, showers, and toilets, for the maximum number of residents expected to use the day room area at any one time.

(10) Each room used for sports and other physical activities shall provide floor space equivalent to at least 100 square feet for each resident utilizing the room for those purposes at any one time.

(11) Sufficient space shall be provided for visitation between residents and nonresidents. The PRTF shall have space for the screening and search of both residents and visitors, if screening and search are included in the PRTF’s policies and procedures. Private space shall be available for searches as needed. Storage space shall be provided for the secure storage of visitors’ coats, handbags, and other personal items not allowed into the visitation area.

(12) A working telephone shall be accessible to staff members in all areas of the building. Emergency numbers, including those for the fire department, the police, a hospital, a physician, the poison control center, and an ambulance, shall be posted by each phone.

(13) A service sink and a locked storage area for cleaning supplies shall be provided in a room or closet that is well ventilated and separate from kitchen and living areas.

(d) Bathroom facilities.

(1) For each eight or fewer residents of each sex, at least one toilet, one lavatory, and either a bathtub or a shower shall be provided. All toilets shall be above floor level.

(2) Each bathroom shall be ventilated to the outdoors by means of either a window or a mechanical ventilating system, with a minimum of 10 air changes each hour.

(3) Toilet and bathing accommodations and drinking water shall be in a location accessible to sleeping rooms and living and recreation rooms.

(4) Drinking water and at least one bathroom shall be accessible to the reception and admission areas.

(5) Cold water and hot water not exceeding 120 degrees Fahrenheit shall be supplied to lavatories, bathtubs, and showers.

(6) Liquid soap, toilet paper, and paper towels shall be available in all bathroom facilities.

(e) Building maintenance standards.

(1) Each building shall be clean at all times and free from vermin infestation.

(2) The walls shall be smooth, easily cleanable, and sound. Lead-free paint shall be used on all painted surfaces.

(3) The floors and walking surfaces shall be kept free of hazardous substances at all times.

(4) The floors shall not be slippery or cracked.

(5) Each rug or carpet used as a floor covering shall be slip-resistant and free from tripping hazards. A floor covering, paint, or sealant shall be required over concrete floors for all buildings used by the residents.

(6) All bare floors shall be swept and mopped daily.

(7) A schedule for cleaning each building shall be established and maintained.

(8) Washing aids, including brushes, dish mops,
28-4-1216. Food services. Each licensee shall ensure that food preparation, service, safety, and nutrition meet the requirements of this regulation. For purposes of this regulation, “food” shall include beverages.

(a) Sanitary practices. Each individual engaged in food preparation and food service shall use sanitary methods of food handling, food service, and storage.

(1) Only authorized individuals shall be in the food preparation area.

(2) Each individual who has any symptoms of an illness, including fever, vomiting, or diarrhea, shall be excluded from the food preparation area and shall remain excluded from the food preparation area until the time at which the individual has been asymptomatic for at least 24 hours or provides the PRTF with written documentation from a health care provider stating that the symptoms are from a noninfectious condition.

(3) Each individual who has contracted an infectious or contagious disease specified in K.A.R. 28-1-6 shall be excluded from the food preparation area and shall remain excluded from the food preparation area for the time period required for that disease.

(4) Each individual with an open cut or abrasion on the hand or forearm or with a skin sore shall cover the sore, cut, or abrasion with a bandage before handling or serving food.

(5) The hair of each individual shall be restrained when the individual is handling food.

(6) Each individual handling or serving food shall comply with each of the following requirements for handwashing:

(A) Each individual shall wash his or her hands and exposed portions of the individual’s arms before working with food, after using the toilet, and as often as necessary to keep the individual’s hands clean and to minimize the risk of contamination.

(B) Each individual shall use an individual towel, disposable paper towels, or an air dryer to dry his or her hands.

(7) Each individual preparing or handling food shall minimize bare hand and bare arm contact with exposed food that is not in a ready-to-eat form.

(8) Except when washing fruits and vegetables, no individual handling or serving food may contact exposed, ready-to-eat food with the individual’s bare hands.

(9) Each individual shall use single-use gloves, food-grade tissue paper, dispensing equipment, or utensils, including spatulas or tongs, when handling or serving exposed ready-to-eat food.

(b) Nutrition.

(1) Meals and snacks shall meet the nutritional needs of the residents in accordance with the United States Department of Agriculture’s recommended daily allowances. A sufficient quantity of food shall be prepared for each meal to allow each resident second portions of bread and milk and either vegetables or fruit.

(2) Special diets shall be provided for residents for either of the following reasons:

(A) Medical indication; or

(B) accommodation of religious practice, as indicated by a religious consultant.

(3) Each meal shall be planned and the menu shall be posted at least one week in advance. A copy of the menu of each meal served for the preceding month shall be kept on file and available for inspection.

(c) Food service and preparation areas. If food is prepared on the premises, each licensee shall provide a food preparation area that is separate from the eating area, activity area, laundry area, and bathrooms and that is not used as a passageway during the hours of food preparation and cleanup.

(1) All surfaces used for food preparation and tables used for eating shall be made of smooth, nonporous material.

(2) Before and after each use, all food preparation surfaces shall be cleaned with soapy water and sanitized by use of a solution of one ounce of bleach to one gallon of water or a sanitizing solution used in accordance with the manufacturer’s instructions.

(3) Before and after each use, the tables used
for eating shall be cleaned by washing with soapy water.

(4) All floors shall be swept daily and mopped when spills occur.

(5) Garbage shall be disposed of in a garbage disposal or in a covered container. If a container is used, the container shall be removed at the end of each day or more often as needed to prevent overflow or to control odor.

(6) Each food preparation area shall have hand-washing facilities equipped with soap and hot and cold running water and with individual towels, paper towels, or air dryers. Each sink used for hand-washing shall be equipped to provide water at a temperature of at least 100 degrees Fahrenheit. The water temperature shall not exceed 120 degrees Fahrenheit.

   (A) If the food preparation sink is used for handwashing, the sink shall be sanitized before using it for food preparation by use of a solution of \( \frac{1}{4} \) cup of bleach to one gallon of water.

   (B) Each PRTF with 25 or more residents shall be equipped with handwashing facilities that are separate from the food preparation sink.

(7) Clean linen used for food preparation or service shall be stored separately from soiled linen.

(d) Food storage and refrigeration. All food shall be stored and served in a way that protects the food from cross-contamination.

(1) Nonrefrigerated food.

   (A) All food not requiring refrigeration shall be stored at least six inches above the floor in a clean, dry, well-ventilated storeroom or cabinet in an area with no overhead drain or sewer lines and no vermin infestation.

   (B) Dry bulk food that has been opened shall be stored in metal, glass, or food-grade plastic containers with tightly fitting covers and shall be labeled with the contents and the date opened.

   (C) Food shall not be stored with poisonous or toxic materials. If cleaning agents cannot be stored in a room separate from food storage areas, the cleaning agents shall be clearly labeled and kept in locked cabinets not used for the storage of food.

(2) Refrigerated and frozen food.

   (A) All perishables and potentially hazardous foods requiring refrigeration shall be continuously maintained at 41 degrees Fahrenheit or lower in the refrigerator or 0 degrees Fahrenheit in the freezer.

   (B) Each refrigerator and each freezer shall be equipped with a visible, accurate thermometer.

   (C) Each refrigerator and each freezer shall be kept clean inside and out.

   (D) All food stored in the refrigerator shall be covered, wrapped, or otherwise protected from contamination. Unserved, leftover perishable foods shall be dated, refrigerated immediately after service, and eaten within three days.

   (E) Raw meat shall be stored in the refrigerator in a manner that prevents meat fluids from dripping on other foods.

   (F) Ready-to-eat, commercially processed foods, including luncheon meats, cream cheese, and cottage cheese, shall be eaten within five days after opening the package.

   (G) If medication requiring refrigeration is stored with refrigerated food, the medication shall be stored in a locked medicine box in a manner that prevents cross-contamination.

(3) Hot foods.

   (A) Hot foods that are to be refrigerated shall be transferred to shallow containers in layers less than three inches deep and shall not be covered until cool.

   (B) Potentially hazardous cooked foods shall be cooled in a manner to allow the food to cool within two hours from 135 degrees Fahrenheit to 70 degrees Fahrenheit or within six hours from 135 degrees Fahrenheit to 41 degrees Fahrenheit.

(e) Meals or snacks prepared on the premises.

(1) Each licensee shall ensure that all of the following requirements are met:

   (A) All dairy products shall be pasteurized. Dry milk shall be used for cooking only.

   (B) Meat shall be obtained from government-inspected sources.

   (C) Raw fruits and vegetables shall be washed thoroughly before being eaten or used for cooking.

   (D) Frozen foods shall be defrosted in the refrigerator, under cold running water, in a microwave oven using the defrost setting, or during the cooking process. Frozen foods shall not be defrosted by leaving them at room temperature or in standing water.

   (E) Cold foods shall be maintained and served at temperatures of 41 degrees Fahrenheit or less.

   (F) Hot foods shall be maintained and served at temperatures of at least 140 degrees Fahrenheit.

(2) Each licensee shall ensure that the following foods are not served or kept:

   (A) Home-canned food;
(B) food from dented, rusted, bulging, or leaking cans; and
(C) food from cans without labels.
(f) Meals or snacks catered. If the licensee serves a meal or snack that is not prepared on the premises, the snack or meal shall be obtained from a food service establishment or a catering service licensed by the secretary of the Kansas department of agriculture. If food is transported to the premises, the licensee shall ensure that only food that has been transported promptly in clean, covered containers is served to the residents.
(g) Table service and cooking utensils.
(1) Each licensee shall ensure that all of the table service, serving utensils, and food cooking or serving equipment is stored in a clean, dry location at least six inches above the floor. None of these items shall be stored under an exposed sewer line or a dripping water line or in a bathroom.
(2) Each licensee shall provide clean table service to each resident, including dishes, cups or glasses, and forks, spoons, and knives, as appropriate for the food being served.
(A) Clean cups, glasses, and dishes designed for repeat use shall be made of smooth, durable, and nonabsorbent material and shall be free from cracks or chips.
(B) Disposable, single-use table service shall be of food grade and medium weight and shall be disposed of after each use.
(3) If nondisposable table service and cooking utensils are used, each licensee shall sanitize the table service and cooking utensils using either a manual washing method or a mechanical dishwasher.
(A) If using a manual washing method, each licensee shall meet all of the following requirements:
(i) A three-compartment sink with hot and cold running water to each compartment and a drainboard shall be used for washing, rinsing, sanitizing, and air-drying.
(ii) An appropriate chemical test kit, a thermometer, or another device shall be used for testing the sanitizing solution and the water temperature.
(B) If using a mechanical dishwasher, each licensee shall ensure that all of the following requirements are met:
(i) Each commercial dishwashing machine and each domestic-type dishwashing machine shall be installed and operated in accordance with the manufacturer’s instructions and shall be maintained in good repair.
(ii) If an automatic detergent dispenser, rinsing agents dispenser, or liquid sanitizer dispenser is used, the dispenser shall be installed and maintained according to the manufacturer’s instructions.
(iii) Each dishwashing machine using hot water to sanitize shall be installed and operated according to the manufacturer’s specifications and shall achieve surface temperature of at least 160 degrees Fahrenheit for all items.
(iv) If a domestic-type dishwasher is used, the dishwasher shall have the capacity to complete the cleaning cycle for all items in two cycles between each meal. (Authorized by and implementing K.S.A. 65-508; effective Oct. 9, 2009.)

28-4-1217. Laundry. (a) If laundry is done at the PRTF, the laundry sinks, appliances, and countertops or tables used for laundry shall be located in an area separate from food preparation areas and shall be installed and used in a manner that safeguards the health and safety of the residents. Adequate space shall be allocated for the laundry room and the storage of laundry supplies, including locked storage for all chemical agents used in the laundry area.
(b) Adequate space shall be allocated for the storage of clean and dirty linen and clothing. Soiled linen shall be stored separately from clean linen.
(c) Blankets shall be laundered at least once each month or, if soiled, more frequently. Blankets shall be laundered or sanitized before reissue.
(d) Each mattress shall be water-repellent and washed down and sprayed with disinfectant before reissue. Mattress materials and treatments shall meet the applicable requirements of the state fire marshal’s regulations. (Authorized by and implementing K.S.A. 65-508; effective Oct. 9, 2009.)

28-4-1218. Transportation. Each licensee shall establish and implement written policies and procedures for transporting residents.
(a) The transportation policies and procedures shall include all of the following information:
(1) A list of the individuals authorized to transport residents for the PRTF;
(2) a description of precautions to prevent the escape of any resident during transfer;
(3) documentation of a current and appropriate
license for each PRTF driver for the type of vehicle in use; and

(4) procedures to be followed in case of accident, injury, or other incident as specified in K.A.R. 28-4-1214, including notification procedures.

(b) Each transporting vehicle owned or leased by the licensee shall have a yearly safety check. A record of the yearly safety check and all repairs or improvements made shall be kept on file at the PRTF. When residents are transported in a privately owned vehicle, the vehicle shall be in safe working condition.

(c) Each vehicle used by the PRTF to transport residents shall be covered by accident and liability insurance as required by the state of Kansas.

(d) A first-aid kit shall be kept in the transporting vehicle and shall include disposable nonporous gloves in various sizes, a cleansing agent, scissors, bandages of assorted sizes, adhesive tape, a roll of gauze, one package of gauze squares at least four inches by four inches in size, and one elastic bandage.

(e) Each vehicle used to transport residents shall be equipped with an individual seat belt for the driver and an individual seat belt or child safety seat for each passenger. The driver and each passenger shall be secured by a seat belt or a child safety seat when the vehicle is in motion.

(f) Seat belts and child safety seats shall be used appropriate to the age, weight, and height of each individual and the placement of each individual in the vehicle, in accordance with state statutes and regulations. Each child safety seat shall be installed and used according to manufacturer's instructions.

(g) Residents who are less than 13 years of age shall not be seated in the front seat of a vehicle that is equipped with a passenger air bag.

(h) Smoking in any vehicle owned or leased by the licensee shall be prohibited whether or not a resident is present in the vehicle.

(i) Residents shall be transported directly to the location designated by the licensee and shall make no unauthorized stops along the way, except in an emergency.

(j) Handcuffs or shackles shall not be used on any resident being transported by staff members.

(k) No 15-passenger vans shall be used to transport residents. Each licensee owning or leasing a 15-passenger van purchased or leased before the effective date of this regulation shall be exempt from the requirements of this subsection. (Authorized by and implementing K.S.A. 65-508; effective Oct. 9, 2009.)

28-4-1300. Definitions. For the purposes of K.A.R. 28-4-1300 through K.A.R. 28-4-1318, the following terms shall have the meanings specified in this regulation:

(a) “Apgar scores” means a measure of a newborn’s physical condition at one, five, and 10 minutes after birth.

(b) “Applicant” means a person who has applied for a license but who has not yet been granted a license to operate a birth center. This term shall include an applicant who has been granted a temporary permit to operate a birth center.

(c) “Birthing room” means a room designed, equipped, and arranged to provide for the care of a patient, a newborn, and the patient’s support person or persons during and following childbirth.

(d) “Certified midwife” means an individual who is educated in the discipline of midwifery and who is currently certified by the American college of nurse-midwives or the American midwifery certification board, inc.

(e) “Certified nurse-midwife” means an individual who meets the following requirements:

(1) Is educated in the two disciplines of nursing and midwifery;

(2) is currently certified by the American college of nurse-midwives or the American midwifery certification board, inc; and

(3) has a current nursing license in Kansas.

(f) “Certified professional midwife” means an individual who is educated in the discipline of midwifery and who is currently certified by the North American registry of midwives.

(g) “Clinical director” means an individual who is appointed by the licensee and is responsible for the direction and oversight of clinical services at a birth center as specified in K.A.R. 28-4-1305.

(h) “Clinical staff member” means an individual employed by or serving as a consultant to the birth center who is one of the following:

(1) The clinical director or acting clinical director;

(2) a licensed physician;

(3) a certified nurse-midwife;

(4) a certified professional midwife;

(5) a certified midwife; or

(6) a registered professional nurse.

(i) “Department” means Kansas department of health and environment.

(j) “Exception” means a waiver of an applicant’s
or a licensee’s compliance with a specific birth center regulation or any portion of a specific birth center regulation, granted by the secretary to the applicant or licensee.

(k) “License capacity” means the maximum number of patients that can be cared for in a birth center during labor, delivery, and recovery.

(l) “Licensee” means a person who has been granted a license to operate a birth center.

(m) “Maternity center” has the meaning specified in K.S.A. 65-502, and amendments thereto, and may also be referred to as a “birth center.”

(n) “Normal, uncomplicated delivery” means a delivery that results in a vaginal birth and that does not require the use of general, spinal, or epidural anesthesia.

(o) “Normal, uncomplicated pregnancy” means a pregnancy that is initially determined to be at a low risk for a poor pregnancy outcome and that remains at a low risk throughout the pregnancy.

(p) “Patient” means a woman who has been accepted for services at a birth center during pregnancy, labor, delivery, and recovery.

(q) “Poor pregnancy outcome” means any outcome other than a live, healthy patient and newborn.

(r) “Premises” means the location, including each building and any adjoining grounds, of a birth center.

(s) “Secretary” means secretary of the Kansas department of health and environment. (Authorized by K.S.A. 65-508 and 65-510; implementing K.S.A. 65-502 and 65-508; effective July 9, 2010.)

28-4-1301. Applicant and licensee requirements. (a) Each applicant, if an individual, shall be at least 21 years of age at the time of application.

(b) Each applicant and each licensee, if a corporation, shall be in good standing with the Kansas secretary of state. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-504 and 65-508; effective July 9, 2010.)

28-4-1302. Application procedures. (a) Each person, in order to obtain a license, shall submit a complete application on the form provided by the department. The application shall be submitted at least 90 calendar days before the planned opening date of the birth center and shall include all of the following:

(1) A detailed description of the services to be provided;

(2) a detailed floor plan and site plan for the premises to be licensed; and

(3) the nonrefundable license fee specified in K.A.R. 28-4-92.

(b) At the time of the initial inspection, each applicant shall have the following information on file:

(1) Written verification from the applicable local authorities showing that the premises are in compliance with all local codes and ordinances, including all building, fire, and zoning requirements;

(2) written verification from the state fire marshal showing that the premises are in compliance with all applicable fire codes and regulations;

(3) written verification from local or state authorities showing that the private water supply and sewerage systems conform to all state and local laws; and

(4) documentation of the specific arrangements that have been made for the removal of biomedical waste and human tissue from the premises.

(c) The granting of a license to any applicant may be refused by the secretary if the applicant is not in compliance with the requirements of the following:

(1) K.S.A. 65-504 through 65-508, and amendments thereto;

(2) K.S.A. 65-512 and 65-513, and amendments thereto;

(3) K.S.A. 65-531, and amendments thereto; and


28-4-1303. Terms of a temporary permit or a license. (a) License capacity. The maximum number of patients authorized by a temporary permit or a license shall not be exceeded.

(b) Posting temporary permit or license. The current temporary permit or license shall be posted conspicuously within the birth center.

(c) Validity of temporary permit or a license. Each temporary permit or license shall be valid for the applicant or licensee and the address specified on the temporary permit or the license. When an initial or amended license becomes effective, all temporary permits or licenses previously granted to the applicant or licensee at the same address shall become invalid.
(d) Advertising. The advertising for each birth center shall conform to the statement of services included with the application. A claim for specialized services, even if specified on the application for a birth center, shall not be made unless the birth center is staffed and equipped to offer those services. No general claim of being “state-approved” shall be made until the applicant has been issued a temporary permit or a license by the secretary.

(e) Withdrawal of application or request to close. Any applicant may withdraw the application for a license. Any licensee may, at any time, request to close a birth center. If an application is withdrawn or a birth center is closed, each temporary permit or license granted for that birth center shall become invalid. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-504 and 65-508; effective July 9, 2010.)

**28-4-1304. Temporary permit or license; amended license; exceptions; notification; renewal.**

(a) Temporary permit or license required. Each person shall obtain a temporary permit or a license from the secretary to operate a birth center before providing any birth center services.

(b) New temporary permit or license required. Each applicant or licensee shall submit a new application, the required verifications and documentation, and license fee and shall obtain a temporary permit or a license from the secretary under any of the following circumstances:

1. Before a birth center that has been closed is reopened;
2. If there is a change in the location of the birth center; or
3. If there is a change of ownership of the birth center.

(c) Amended license.

1. Any licensee may submit a request for an amended license. Each licensee who intends to change the terms of the license, including the maximum number of patients to be served, shall submit a request for an amended license on a form provided by the department and a nonrefundable amendment fee of $35. An amendment fee shall not be required if the request to change the terms of the license is made at the time of the renewal.

2. The licensee shall make no change to the terms of the license unless permission is granted, in writing, by the secretary. If granted, the licensee shall post the amended license, and the previous license shall no longer be in effect.

(d) Exceptions.

1. Any applicant or licensee may request an exception from the secretary. Any request for an exception may be granted if the secretary determines that the exception is in the best interest of one or more patients or newborns and the exception does not violate statutory requirements.

2. Written notice from the secretary stating the nature of the exception and the duration of the exception shall be kept on file at the birth center and shall be readily accessible to the department.

(e) Notification. Each applicant and each licensee shall notify the secretary, in writing, before changing any of the following:

1. The clinical services or activities offered by the birth center;
2. The physical structure of the birth center due to new construction or substantial remodeling; or
3. The use of any part of the premises that affects the use of the space or affects the license capacity.

(f) Renewal. No earlier than 90 days before but no later than the renewal date, each licensee wishing to renew the license shall submit the following:

1. The nonrefundable license fee specified in K.A.R. 28-4-92; and
2. An application to renew the license on the form provided by the department.

(g) Late renewal. Failure to submit the renewal application and fee as required by subsection (f) shall result in an assessment of a late renewal fee specified in K.S.A. 65-505, and amendments thereto, and may result in closure of the birth center.

(h) Copy of current regulations. A copy of the current Kansas administrative regulations governing birth centers shall be kept on the premises and shall be available to all employees. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-504, 65-505, and 65-508; effective July 9, 2010.)

**28-4-1305. Administration.** (a) Each licensee shall be responsible for the operation of the birth center, including the following:

1. Establishing and maintaining a written organizational plan, including an organizational chart designating the lines of authority;
2. Providing employees, facilities, equipment,
supplies, and services to patients, newborns, and families;

(3) developing and implementing administrative policies and procedures for the operation of the birth center;

(4) developing and implementing policies and procedures for quality assurance;

(5) appointing an administrator to oversee the operation of the birth center;

(6) appointing a clinical director and hiring employees;

(7) appointing an acting clinical director to provide direction and oversight of clinical services in the absence of the clinical director; and

(8) documenting all of the information specified in this subsection.

(b) Each licensee shall ensure that all birth center contracts, agreements, policies, and procedures are reviewed annually and updated as needed.

(c) Each licensee shall ensure the development and implementation of written policies that set out the necessary qualifications for each position and govern employee selection. A job description for each position shall be available at the birth center.

(d) Each licensee shall ensure that all employees are informed of and follow all written policies, procedures, and clinical protocols necessary to carry out their job duties.

(e) Each administrator shall oversee the daily operation and maintenance of the birth center and implement the policies and procedures in compliance with licensing requirements for birth centers.

(f) Each clinical director shall provide direction and oversight of clinical services, including the development and implementation of policies, procedures, and signed protocols regarding all matters related to the medical management of pregnancy, birth, postpartum care, newborn care, and gynecologic health care.

(g) Each licensee shall develop and implement written policies and procedures regarding a patient’s options for the disposition or taking of fetal remains if a fetal death occurs. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-508 and K.S.A. 2009 Supp. 65-67a10; effective July 9, 2010.)

28-4-1306. Clinical staff member qualifications; employee schedules; training. (a) Clinical staff member qualifications. Each licensee shall ensure that the following requirements for the clinical staff members are met:

(1) The clinical director and the acting clinical director shall be one of the following:
   (A) A physician with a current license to practice in Kansas; or
   (B) a certified nurse-midwife.

(2) Each clinical staff member attending labor and delivery shall meet the following qualifications:
   (A) Practice within the scope of the clinical staff member’s training and experience; and
   (B) hold, at a minimum, current certification in adult CPR equivalent to American heart association class C basic life support and current certification in neonatal CPR equivalent to that of the American academy of pediatrics or the American heart association.

(b) Employee schedules.

(1) Each licensee shall ensure that there are sufficient qualified employees on duty and on call for the safe maintenance and operation of the birth center and for the provision of clinical services.

(2) Each licensee shall ensure that a written work schedule is readily accessible to all employees.

(c) Training.

(1) Each licensee shall develop and provide an orientation for all new employees and ongoing in-service training for all employees that shall meet the following requirements:
   (A) Is based on individual job duties and responsibilities;
   (B) is designed to meet individual employee training needs; and
   (C) is designed to maintain the knowledge and skills necessary to ensure compliance with policies, procedures, and clinical protocols of the birth center.

(2) Orientation and in-service training shall include the following:
   (A) Emergency clinical procedures;
   (B) recognition of the signs and symptoms of infectious diseases, infection control, and universal precautions;
   (C) recognition of signs and symptoms of domestic violence; and
   (D) recognition of the signs and symptoms and the reporting of child abuse and neglect.

(3) The documentation of the orientation and the in-service training shall be maintained in each employee’s individual record. (Authorized by and
implementing K.S.A. 65-508; effective July 9, 2010.)

28-4-1307. Records. (a) Policies and procedures. Each licensee shall ensure that there is an organized recordkeeping system, with policies and procedures that provide for identification, security, confidentiality, control, retrieval, and preservation of all employee records, patient records, and birth center information. All records shall be available at the birth center for review by the secretary.

(b) Employee records. Each licensee shall ensure that an individual record is maintained at the birth center for each employee that includes the following information:

(1) A description of the terms of employment or the volunteer agreement and a copy of the job description;
(2) a copy of the job application detailing the employee’s qualifications and employment dates;
(3) copies of current professional licenses, certifications, or registrations;
(4) documentation of the results of any health assessments and tuberculin tests specified in K.A.R. 28-4-1312;
(5) documentation of the orientation and the in-service training specified in K.A.R. 28-4-1306; and
(6) documentation that each employee has access to the following:
   (A) The current regulations governing birth centers; and
   (B) the birth center policies, procedures, and clinical protocols.

(c) Patient records.

(1) Each licensee shall ensure that a current and complete clinical record for each patient accepted for care in the birth center includes the following:
   (A) Identifying information, including the patient’s name, address, and telephone number;
   (B) documentation of the initial history and physical examination, including laboratory findings and dates;
   (C) a signed and dated informed consent form;
   (D) all obstetrical risk assessments, including the dates of the assessments;
   (E) documentation of instruction and education related to the childbearing process;
   (F) the date and time of the onset of labor;
   (G) the course of labor, including all pertinent examinations and findings;
   (H) the exact date and time of birth, the presenting part of the newborn’s body, the sex of the newborn, the numerical order of birth in the event of more than one newborn, and the Apgar scores;
   (I) the time of expulsion and the condition of the placenta;
   (J) all treatments rendered to the patient and newborn, including prescribing medications and the time, type, and dose of eye prophylaxis;
   (K) documentation of metabolic and any other screening tests completed by a clinical staff member;
   (L) the condition of the patient and newborn, including any complications and action taken at the birth center;
   (M) all medical consultations concerning the patient and the newborn;
   (N) all referrals for medical care and transfers to medical care facilities, including the reasons for each referral or transfer;
   (O) the results of all examinations of the newborn and of the postpartum patient; and
   (P) the written instructions given to the patient regarding postpartum care, family planning, care of the newborn, arrangements for metabolic testing, immunizations, and follow-up pediatric care.

(2) Each entry in each patient’s record shall be dated and signed by the attending clinical staff member.

(3) The patient record shall be confidential and shall not be released without the written consent of the patient. Nothing in this regulation shall preclude the review of patient records by the secretary.

(4) All patient records shall be retained for at least 25 years from the date of discharge.

(d) Quality assurance documentation. Each licensee shall maintain on file for at least three calendar years all documentation required for the quality assurance findings specified in K.A.R. 28-4-1309.

(e) Inventory. Each licensee shall maintain on file an inventory of the birth center furnishings, equipment, and supplies.

(f) Drills. Each licensee shall maintain on file for at least one calendar year a record of all disaster and evacuation drills.

(g) Changes. Each applicant and each licensee shall maintain on file at the birth center the documentation of any changes specified in K.A.R. 28-4-1304 and approved by the secretary. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-507 and 65-508; effective July 9, 2010.)

28-4-1308. Reporting requirements. (a)
Each licensee shall ensure that the following incidents are reported to the department by the next working day, on a form provided by the department, and to any other authorities in accordance with state statute:

(1) A stillbirth or the death of a patient or a newborn;
(2) the death of an employee while on duty;
(3) any intentional or unintentional injuries sustained by any patient, newborn, or employee while on duty;
(4) any fire damage or other damage to the premises that affects the safety of any patient, newborn, or employee; and
(5) any other incident that, in the judgment of the clinical director or the acting clinical director, compromises the ability of the birth center to provide appropriate and safe care to patients and newborns.

(b) If a licensee, employee, patient, or newborn contracts a reportable infectious or contagious disease specified in K.A.R. 28-1-2, the licensee shall ensure that the disease is reported to the county health department as specified in K.A.R. 28-1-2. (Authorized by and implementing K.S.A. 65-508; effective July 9, 2010.)

28-4-1309. Quality assurance. (a) Each licensee shall develop and implement a quality assurance program to evaluate, at least annually, the quality of patient care and the appropriateness of clinical services.

(b) The quality assurance program shall include a system for the assessment of patient and newborn outcomes, clinical protocols, recordkeeping, and infection control.

(c) The quality assurance findings shall be documented and used for the ongoing assessment of clinical services, problem resolution, and plans for service improvement.

(d) All quality assurance findings shall be available at the birth center for review by the secretary. Nothing in this regulation shall preclude the review of patient records by the secretary. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-507, 65-508, and 65-512; effective July 9, 2010.)

28-4-1310. Clinical services and patient care. (a) Each licensee shall ensure that the clinical services provided at the birth center are limited to those services associated with a normal, uncomplicated pregnancy and a normal, uncomplicated delivery.

(b) Each licensee shall ensure that only the clinical services approved by the clinical director are performed at the birth center.

(c) Each clinical staff member providing services shall work under the direction of and in consultation with the clinical director or the acting clinical director.

(d) Each clinical staff member shall have access to patient diagnostic facilities and services, including a clinical laboratory, sonography, radiology, and electronic monitoring.

(e) Each licensee shall make available to each patient, in writing, information concerning the following:

(1) The clinical services provided by the birth center;
(2) the rights and responsibilities of the patient and the patient’s family, including confidentiality, privacy, and consent;
(3) information on the qualifications of the clinical staff members;
(4) the risks and benefits of childbirth at the birth center;
(5) the possibility of patient or newborn transfer if complications arise during pregnancy, labor, or delivery and the procedures for transfer; and
(6) if a fetal death occurs, the patient’s options for the taking or disposition of the fetal remains.

(f) Each licensee shall limit patients to those women who are initially determined to be at low maternity risk by a clinical staff member and who are evaluated regularly throughout the pregnancy to ensure that each patient continues to be at low risk for a poor pregnancy outcome. Each clinical director shall establish a written maternity risk assessment, including screening criteria, which shall be a part of the approved policies.

(g) When conducting the maternity risk assessment, each clinical staff member shall assess the health status and maternity risk factors of each patient after obtaining a detailed medical history, performing a physical examination, and taking into account family circumstances and psychological factors.

(h) The screening criteria of the maternity risk assessment shall be used as a baseline on which the risk status of each potential patient or patient is determined. The screening criteria shall apply to each potential patient before acceptance for birth center services and throughout the pregnancy for continuation of services. The screening criteria shall include the specific qualifications of the clinical staff members and the availability of
supplies and equipment needed to provide clinical services safely.

(i) The factors to be considered in the development of the maternity risk assessment shall include the following:

(1) Age of the patient as a possible factor in determining the potential additional risk of poor pregnancy outcome;
(2) major medical problems including any of the following:
   (A) Chronic hypertension, heart disease, or pulmonary embolus;
   (B) any congenital heart defect assessed as pathological by a cardiologist that places the patient or fetus at risk;
   (C) a renal disease;
   (D) a drug addiction or required use of anti-convulsant drugs;
   (E) diabetes mellitus;
   (F) thyroid disease; or
   (G) a bleeding disorder or hemolytic disease;
(3) previous history of significant obstetrical complications, including any of the following:
   (A) RH sensitization;
   (B) a previous uterine wall surgery, including caesarean section;
   (C) seven or more term pregnancies;
   (D) a previous placental abruption; or
   (E) a previous preterm birth; and
(4) medical indication of any of the following:
   (A) Pregnancy-induced hypertension;
   (B) polyhydramnios or oligohydramnios;
   (C) a placental abruption;
   (D) chorioamnionitis;
   (E) a known fetal anomaly;
   (F) multiple gestations;
   (G) an intrauterine growth restriction;
   (H) fetal distress;
   (I) alcoholism or drug addiction;
   (J) thrombophlebitis; or
   (K) pyelonephritis.

(j) Each patient found to be at high obstetrical risk based on the maternity risk assessment shall be referred to a qualified physician.

(k) Each licensee shall ensure that the policies and procedures include a program of education that prepares patients and their families for childbirth, including the following:

(1) Anticipated changes during pregnancy;
(2) the need for prenatal care;
(3) nutritional requirements during pregnancy;
(4) the effects of smoking, alcohol, and substance use;
(5) the signs of preterm labor;
(6) preparation for labor and delivery, including pain management and obstetrical complications and procedures;
(7) breast-feeding and care of the newborn;
(8) signs of depression during pregnancy and after childbirth and instructions for treatment;
(9) instruction on understanding the patient and newborn health record information;
(10) sibling preparation; and
(11) preparation needed for discharge of the patient and the newborn following delivery.

(l) Each licensee shall ensure that the policies, procedures, and clinical protocols are followed for each patient during labor, delivery, and postpartum care.

(m) Each patient shall be admitted for labor and delivery by a physician, a certified nurse-midwife, a certified professional midwife, or a certified midwife.

(n) At least one clinical staff member shall be available for each patient in labor.

(o) At least two employees shall be available for each patient during delivery. One shall be a clinical staff member. The other shall be another clinical staff member or a licensed practical nurse (LPN) practicing within the scope of the LPN’s training and experience and working under the direct supervision of a licensed physician, a certified nurse-midwife, or a registered professional nurse.

(p) A clinical staff member shall monitor the progress of the labor and the condition of each patient and fetus as clinically indicated to identify abnormalities or complications at the earliest possible time.

(q) The patient or newborn shall be transferred to a medical care facility if a clinical staff member determines that medical or surgical intervention is needed.

(r) The patient’s family or support persons shall be instructed as needed to assist the patient during labor and delivery.

(s) The surgical procedures performed at the birth center shall be limited to the following:

(1) Episiotomy;
(2) repair of episiotomy or laceration; and
(3) circumcision.

(t) Each clinical director shall develop and implement policies and procedures for the discharge of postpartum patients and their newborns, which shall be followed by all clinical staff members.

(1) An individual, written discharge plan shall
be developed for each patient and newborn, including follow-up visits and needed referrals. Each patient shall receive a copy of the plan at the time of discharge.

(2) Each patient and each newborn shall be discharged no later than 24 hours after birth and in accordance with policies, procedures, and clinical protocols.

(3) Each birth or death certificate shall be completed and filed as required by state law.

(4) A follow-up visit shall be conducted by a designated clinical staff member between 24 hours and 72 hours after discharge of the patient to perform the following:
   (A) A health assessment of the patient;
   (B) a health assessment of the newborn; and
   (C) the required newborn screening tests.

(5) The policies and procedures shall include a program of postpartum education and care, including the following:
   (A) Newborn care;
   (B) postpartum examinations;
   (C) family planning; and

28-4-1311. Transfers. (a) Each licensee shall develop and implement policies, procedures, and clinical protocols for the transfer of patients and newborns. Each licensee shall ensure that these policies, procedures, and clinical protocols are readily accessible and followed.

(b) The policies, procedures, and clinical protocols shall include a written plan on file designating who will be responsible for the transfer of a patient or newborn. The plan shall include the following:
   (1) A written agreement with an obstetrician and a pediatrician or with a group of practitioners that includes at least one obstetrician and at least one pediatrician;
   (2) a written agreement with a medical care facility providing obstetrical and neonatal services; and
   (3) a plan for transporting a patient or a newborn by an emergency medical services (EMS) entity.

(c) Each licensee shall ensure that all employees attending labor and delivery have immediate access to a working telephone or another communication device and to contact information for transferring a patient or a newborn in case of an emergency. (Authorized by and implementing K.S.A. 65-508; effective July 9, 2010.)

28-4-1312. Health-related requirements. (a) Tobacco use prohibited. Each licensee shall ensure that tobacco products are not used at any time in the birth center.

(b) Health of licensee and employees working in the birth center.

(1) Each licensee, if an individual, and each individual working at the birth center shall meet the following requirements:
   (A) Be free from physical, mental, and emotional conditions to the extent necessary to protect the health, safety, and welfare of the patients and newborns;
   (B) be free from the influence of alcohol or illegal substances, or impairment due to the use of prescription or nonprescription drugs; and
   (C) be free from all infectious or contagious diseases, as specified in K.A.R. 28-1-6.

(2) Each licensee, if an individual, and each individual working in the birth center shall have a health assessment conducted within six months before employment or upon employment. Subsequent health assessments shall be given periodically in accordance with the policies of the birth center.

(3) The results of each health assessment shall be recorded on forms provided by the department, and a copy shall be kept in each licensee’s or employee’s record at the birth center.

(4) If an individual who works in the birth center experiences a significant change in physical, mental, or emotional health, including any indication of substance abuse, an assessment of the individual’s current health status may be required by the secretary or the licensee. A licensed health care provider qualified to diagnose and treat the condition shall conduct the health assessment. A written report of the assessment shall be kept in the individual’s employee record and shall be submitted to the secretary on request.

(c) Tuberculin testing of licensee and employees working in the birth center.

(1) Each licensee, if an individual, and each individual working in the birth center shall have a record of a tuberculin test or chest X-ray obtained not more than six months before employment or upon employment. The results of the tuberculin test or chest X-ray shall be recorded on the health assessment form.
(2) Additional tuberculin testing shall be required if any individual working in the birth center is exposed to an active case of tuberculosis or if the birth center serves an area identified by the local health department or the secretary as a high-risk area for tuberculosis exposure.

(d) Hepatitis B. Each licensee, if an individual, and each individual working in the birth center whose job duties include exposure to or the handling of blood shall be immunized against hepatitis B or shall provide written documentation of refusal of the immunization. (Authorized by and implementing K.S.A. 65-508; effective July 9, 2010.)

28-4-1313. Environmental standards.

(a) Premises.

(1) Each licensee shall ensure that the birth center is connected to public water and sewerage systems where available.

(2) If a center uses a nonpublic source for the water supply, the water shall be safe for drinking and shall be tested annually by a department-certified laboratory. If a well is used, the well shall be approved by an agent of the local environmental protection program (LEPP).

(A) A copy of the test results and the approval shall be kept on file at the birth center.

(B) Each private sewerage system shall be maintained in compliance with all applicable state and local laws.

(3) Outdoor areas on the premises shall be well drained and kept free of hazards, litter, and trash.

(b) General building requirements.

(1) Each licensee shall ensure that the birth center is located in a building that meets the following criteria:

(A) Meets the requirements specified in K.S.A. 65-508 and amendments thereto, all applicable building codes, and local ordinances;

(B) is a permanent structure; and

(C) is free from known environmental hazards.

(2) Each birth center shall be accessible to and usable by individuals with disabilities.

(c) Structural requirements. Each licensee shall ensure that the following requirements are met:

(1) Space shall be provided for the services to be offered, including the following:

(A) A secure space for the storage of medical records;

(B) waiting or reception area;

(C) family area, including play space for children;

(D) designated toilet and lavatory facilities for employees, families of patients, or the public separate from designated toilet, lavatory, and bathing facilities for each patient;

(E) a birthing room or rooms;

(F) employee area;

(G) utility and work room;

(H) a designated storage area;

(I) space for the provision of laboratory services; and

(J) space for food preparation and storage.

(2) The birth center shall be heated, cooled, and ventilated for the comfort of the patients and newborns and shall be designed to maintain a minimum temperature of 68 degrees Fahrenheit and a maximum temperature of 90 degrees Fahrenheit. If natural ventilation is used, all opened windows or doors shall be screened. If mechanical ventilation or cooling systems are employed, the system shall be maintained in working order and kept clean. Intake air ducts shall be designed and installed so that dust and filters can be readily removed.

(3) Each interior door that can be locked shall be designed to permit the door to be opened from each side in case of an emergency.

(4) All floors shall be smooth and free from cracks, easily cleanable, and not slippery. All floor coverings shall be kept clean and maintained in good repair.

(5) All walls shall be smooth, easily cleanable, and sound. Lead-free paint shall be used on all painted surfaces.

(6) All areas of the birth center shall have light fixtures capable of providing at least 20 foot-candles of illumination. Additional illumination shall be available to permit observation of the patient and the newborn, cleaning, and maintenance. The light fixtures shall be maintained in working order and kept clean.

(7) Each birthing room shall have emergency lighting for use during a power outage.

(8) Each birth center shall be equipped with a scrub sink equipped with an elbow, knee, or foot control.

(9) Each birthing room shall be located on the ground level and shall provide unimpeded, rapid access to an exit of the building that will accommodate patients, newborns, emergency personnel, emergency transportation vehicles, and equipment.

(10) Each birthing room shall meet the following requirements:
(A) Have at least 180 square feet of floor space; and
(B) provide enough space for the equipment, employees, supplies, and emergency procedures necessary for the physical and emotional care of the patient and the newborn. (Authorized by and implementing K.S.A. 65-508; effective July 9, 2010.)

28-4-1314. Birth center and birthing room furnishings, equipment, and supplies. (a) Each licensee shall provide furnishings, equipment, and other supplies in the quantity necessary to meet the needs of patients, newborns, and employees and to provide a safe, home-like environment.

(b) Each licensee shall provide the specialized furnishings, equipment, and supplies necessary for the clinical staff members to perform the clinical services offered by the birth center. No specialized clinical services shall be provided unless the birth center is equipped to allow the clinical staff members to safely perform those services.

(c) All furnishings, equipment, and supplies shall be kept clean and free from safety hazards.

(d) The furnishings shall include, at a minimum, the following:
(1) A bed or table for delivery;
(2) at least one chair; and
(3) a wall clock with a second hand.

(e) The equipment and supplies shall include, at a minimum, the following:
(1) An examination light;
(2) a sphygmomanometer;
(3) a stethoscope;
(4) a doppler unit or fetoscope;
(5) a clinical thermometer;
(6) disposable nonporous gloves in assorted sizes;
(7) an infant scale;
(8) a mechanical suction device or a bulb suction device;
(9) a tank of oxygen with a flowmeter and a mask, a cannula, or an equivalent;
(10) all necessary emergency medications and intravenous fluids with supplies and equipment for administration;
(11) resuscitation equipment for patients and newborns, which shall include resuscitation bags and oral airways;
(12) a laryngoscope and a supply of endotracheal tubes of assorted sizes appropriate for a newborn;

(f) All equipment, furnishings, and supplies shall be used as intended and shall be securely stored when not in use to prevent injury or misuse. (Authorized by and implementing K.S.A. 65-508; effective July 9, 2010.)

28-4-1315. Maintenance. (a) Each licensee shall ensure that the building is kept clean at all times and free from accumulated dirt and from vermin infestation.

(b) Each licensee shall develop and implement a maintenance plan to ensure that all of the following conditions are met:
(1) A schedule for cleaning the birth center is established.
(2) All floors and walking surfaces are kept free of hazards, maintained in good repair, and kept clean at all times.
(3) Housekeeping services are provided to maintain a sanitary environment.
(4) Each birthing room, including equipment, is cleaned after each delivery and before reuse.
(5) The toilets, lavatories, sinks, and other facilities are clean at all times.
(6) The mops and other cleaning tools are cleaned after each use and stored in a well-ventilated place on racks.
(7) All pesticides and other poisons are used in accordance with product instructions and stored in a locked area.
(8) Safe storage for cleaning and laundry supplies is provided.
(9) Each indoor trash container is emptied, as needed, to control odor and to prevent the overflowing of contents.
(10) The methods used to dispose of trash, including biomedical waste, human tissue, and sharp instruments, are safe and sanitary.
(11) Hot and cold running water is supplied to each sink and all bathing facilities.
(12) The hot water temperature does not exceed 120 degrees Fahrenheit.
(13) Toilet paper, soap, and either paper towels or hand dryers are available in each restroom and each bathroom in the birth center. (Authorized by and implementing K.S.A. 65-508; effective July 9, 2010.)

28-4-1316. Safety. (a) Each licensee shall ensure the safety of all patients, newborns, employees, and visitors according to the following requirements:

(1) Each birth center shall have a working telephone on the premises and available for use at all times. Emergency telephone numbers shall be posted by each telephone or shall be readily accessible. These telephone numbers shall include telephone numbers for the fire department, hospital, ambulance, and police.
(2) Each exit shall be marked. No exit shall be blocked at any time.
(3) All drugs, chemicals, and medications shall be kept in locked storage and secured in specifically designated and labeled cabinets, drawers, closets, storerooms, or refrigerators and shall be made accessible only to authorized employees.
(b) Each licensee shall ensure the development and implementation of a disaster plan to provide for the evacuation and safety of patients, newborns, employees, and visitors in case of fire, tornadoes, storms, floods, power outages, and other types of emergencies specific to the geographic area in which the birth center is located.

(1) The disaster plan shall be posted in a conspicuous place in each indoor room.
(2) Each employee shall be informed of and shall follow the disaster plan.
(3) A review of the disaster plan, including fire and tornado drills, shall be conducted with the employees at least once every six months, and the date of each review shall be recorded.
(4) Fire and tornado drills shall be conducted with the employees at least quarterly, and the date of each drill shall be recorded.
(c) Heating appliances, when used, shall be used as intended, safely located, equipped with a protective barrier as needed to prevent injury, and maintained in operating condition. If combustible fuel is used, the appliance shall be vented to the outside.
(d) Each licensee shall develop and implement policies and procedures regarding the storage and handling of firearms and other weapons on the premises.
(e) Pets and any other animals shall be prohibited in the birth center, with the exception of service animals. (Authorized by and implementing K.S.A. 65-508; effective July 9, 2010.)

28-4-1317. Food service. (a) Each licensee shall ensure that the birth center has arrangements to provide patients with nutritious liquids and foods. Foods may be provided by means of any of the following:

(1) Obtained from a food service establishment or a catering service licensed by the secretary of the Kansas department of agriculture;
(2) prepared on-site by employees; or
(3) provided by any patient’s family for the sole use of that patient and the patient’s family.
(b) All food that is designed to be served hot and is prepared on-site by employees shall be heated, maintained, and served at a temperature of at least 140 degrees Fahrenheit. A tip-sensitive thermometer shall be used to determine whether food is cooked and held at the proper temperature.
(c) Each licensee shall ensure that the food is handled and stored in a sanitary manner, which shall include meeting all of the following requirements:

(1) All perishable foods and liquids shall be continuously maintained at 41 degrees Fahrenheit or lower in the refrigerator or 0 degrees Fahrenheit or lower in a freezer. A clearly visible, accurate thermometer shall be provided in each refrigerator and in each freezer.
(2) At least one refrigerator shall be designated for only food storage.
(3) All food stored in the refrigerator shall be covered, wrapped, or otherwise protected from cross-contamination. Raw meat shall be stored in the refrigerator in a manner that prevents meat fluids from dripping on other foods. Unused, leftover perishable foods shall be dated, refrigerated immediately after service, and eaten within three days.
(4) Surfaces used for food preparation or eating shall be made of smooth, nonporous material.
(5) All table service designed for repeat use shall be made of smooth, durable, and nonabsorbent material and shall be free from cracks or chips.
(6) All nondisposable table service shall be san-
itized using either a manual method or a mechanical dishwasher.

(A) If using a manual washing method, each licensee shall meet both of the following requirements:

(i) A three-compartment sink with hot and cold running water to each compartment and a drainboard shall be used for washing, rinsing, sanitizing, and air-drying.

(ii) An appropriate chemical test kit, a thermometer, or another device shall be used for testing the sanitizing solution and the water temperature.

(B) If using a mechanical dishwashing machine, each licensee shall ensure that the machine is installed and operated in accordance with the manufacturer’s instructions and shall be maintained in good repair.

(d) Prepackaged, disposable formula units shall be used when newborns are not breast-fed. (Authorized by and implementing K.S.A. 65-508; effective July 9, 2010.)

28-4-1318. Laundry. Each licensee shall ensure that all of the following requirements are met:

(a) If laundry is done at the birth center, the laundry sinks, appliances, and countertops or tables used for laundry shall be located in an area separate from food preparation areas and shall be installed and used in a manner that safeguards the health and safety of the patients, newborns, employees, and visitors.

(b) Space shall be provided and areas shall be designated for the separation of clean and soiled clothing, linen, and towels.

(c) If laundry facilities are not available at the birth center, all laundry shall be cleaned by a commercial laundry. (Authorized by and implementing K.S.A. 65-508; effective July 9, 2010.)

Article 16.—WATER POLLUTION CONTROL


Article 17.—DIVISION OF VITAL STATISTICS

28-17-6. Fees for copies, abstracts, and searches. (a)(1) Subject to the requirements of K.S.A. 65-2417 and K.S.A. 65-2418 (a)(2) and amendments thereto, certified copies or abstracts of certificates or parts of certificates shall be furnished by the state registrar upon request by an authorized applicant and payment of the required fee.

(2)(A) The fees for making and certifying copies or abstracts of birth, stillbirth, marriage, and divorce certificates shall be $15.00 for the first copy or abstract and $15.00 for each additional copy or abstract of the same record requested at the same time.

(B) The fees for making and certifying copies or abstracts of death certificates shall be $15.00 for the first copy or abstract and $15.00 for each additional copy or abstract of the same record requested at the same time.

(b) For any search or verification of the files and records for birth, death, stillbirth, marriage, or divorce certificates if no certified copy or abstract is made, the fee shall be $15.00 for each five-year period for which a search is requested, or for each fractional part of a five-year period.

(c) For any search of the files necessary for preparing an amendment to a birth, stillbirth, death, marriage, or divorce certificate or abstract already on file, the fee shall be $15.00.

(d) For non-certified copies or abstracts of certificates or parts of certificates requested for statistical research purposes, the following fees shall be charged:

(1)(A) $10.00 for each copy of a birth, marriage, divorce, or stillbirth certificate, if the state certificate number is provided; and

(B) $15.00 for each copy of a birth, marriage, divorce, or stillbirth certificate, if the state certificate number is not provided; and

(2)(A) $10.00 for each copy of a death certificate, if the state certificate number is provided; and

(B) $15.00 for each copy of a death certificate, if the state certificate number is not provided.

(e) For each certified copy of an heirloom certificate, the fee shall not exceed $40.00. (Authorized by K.S.A. 2008 Supp. 65-2418; implementing


Article 19.—AMBIENT AIR QUALITY STANDARDS AND AIR POLLUTION CONTROL

28-19-200a. General provisions; definitions to implement the federal greenhouse gas tailoring rule. (a) The definition of “major source,” as adopted by reference in this regulation, shall supersede the definition of “major source” in K.A.R. 28-19-500 for the purposes of the following regulations:

(3) K.A.R. 28-19-540 through K.A.R. 28-19-546; and

(b) “Major source,” as defined in 40 C.F.R. 70.2 and as revised on July 1, 2009 and amended by 75 fed. reg. 31607 (2010), is adopted by reference.

(c) “Subject to regulation,” as defined by 75 fed. reg. 31607 (2010), which amends 40 C.F.R. 70.2, is adopted by reference. This definition of “subject to regulation” shall apply only to that term as used in the definition of “major source,” which is adopted by reference in subsection (b) of this regulation.


28-19-202. Annual emissions fee. (a) The owner or operator of each stationary source of air emissions that has actual emissions of the types and quantities specified in subsection (b) shall pay an annual emissions fee to the department. Actual emissions shall be calculated for a calendar year according to K.A.R. 28-19-210.

(b) Annual emissions fees shall be assessed for all air emissions of any of the following pollutants from each stationary source for which the owner or operator is required to obtain a permit under K.A.R. 28-19-500(a):

(1) Sulfur oxides measured as sulfur dioxide;
(2) particulate matter calculated as PM_{10}, except if no emission factor or approvable method for calculating PM_{10} is available, annual emissions fees shall be assessed for total particulate emissions;
(3) nitrogen oxides expressed as nitrogen dioxide;
(4) total volatile organic compounds; or
(5) hazardous air pollutants.

For purposes of this subsection, actual emissions shall include fugitive emissions from federally designated fugitive emissions sources and fugitive hazardous air pollutant emissions.

(c) The annual emissions fee for calendar year 2010 and for each subsequent year shall equal the sum of the actual emissions of the pollutant or pollutants specified in subsection (b), rounded to the nearest ton, multiplied by $37.00, subject to the following:

(1) The owner or operator shall not be required to include any pollutant emitted from the stationary source more than one time in the fee calculation.
(2) The owner or operator shall not be required to include the following in the emissions fee calculation:

(A) Emissions of any pollutant of 500 pounds per year or less from any emissions source, unless the total emissions from similar sources at the stationary source equal or exceed 2,000 pounds per year;
(B) emissions in excess of 4,000 tons per year;
of any single pollutant from any stationary source; and
(C) for a portable emissions unit or stationary source that operates both in Kansas and out of state, emissions from the unit or source while operating out of state.
(d) Each owner or operator shall complete the calculations of actual emissions and calculation of the annual emissions fee on forms provided by the department.
(1) A responsible official or the person most directly responsible for the compilation of the submitted information shall sign the completed forms.
(2) The owner or operator shall submit the annual emissions fee payment to the department on or before the due date for the annual emissions inventory specified in K.A.R. 28-19-517. Timeliness of submissions shall be determined by the postmark if submitted by mail.
(3) The owner or operator shall make annual emissions fee payments by check, draft, credit card, or money order payable to the Kansas department of health and environment.
(4) Payment of emissions fees to the department shall be the responsibility of the person or persons who are the owners or operators of the emissions unit or stationary source on the date the emissions fee is due. For purposes of calculating actual emissions for a period in which someone other than the current owner or operator was the owner or operator of the stationary source, the owner or operator responsible for paying the fee may assume that the operation of the facility was identical to the operation of the facility by the current owner or operator if the current owner or operator has been unable, after reasonable and diligent inquiry, to obtain the actual operating information from the previous owner or operator.
(e) Each owner or operator who fails to pay the annual emissions fee by the due date for the annual emissions inventory specified in K.A.R. 28-19-517 shall pay a late fee. The late fee shall be $20 per day or 0.10% of the annual emissions fee per day, whichever is greater. The timeliness of the submission from the owner or operator shall be determined by the postmark if the fee is submitted by mail.
(f) Any overpayment in an amount equal to or greater than the fee equivalent of one ton of emissions made by the owner or operator of a stationary source may be refunded or credited to the next year’s annual emissions fee. Any owner or operator may apply overpayments of emissions fees paid for one source to the fees applicable to any other source for which the owner or operator is responsible for payment. A refund shall be issued by the department if a credit has not been used or if the department determines that, based on the source’s past emissions, a credit will not be used. Overpayments in an amount less than the fee equivalent of one ton of emissions shall not be credited or refunded. (Authorized by K.S.A. 2009 Supp. 65-3005 and 65-3024; implementing K.S.A. 65-3024; effective Nov. 22, 1993; amended Jan. 23, 1995; amended March 15, 1996; amended Feb. 21, 1997; amended Feb. 13, 1998; amended March 23, 2001; amended Jan. 30, 2004; amended Nov. 5, 2010.)

28-19-325. Compressed air energy storage. (a) The terms “compressed air energy storage” and “CAES,” as used in this regulation, shall mean the compression and storage of air that is released and converted to energy for the production of electricity.
(b) Each person who proposes to construct, modify, or operate a CAES facility with a potential-to-emit that equals or exceeds the emissions thresholds, emissions limitations, or standards specified in K.A.R. 28-19-300 shall comply with the following upon application for a construction permit or approval:
(1) All applicable provisions of the Kansas air quality act and the Kansas air quality regulations as directed by the secretary; and
(2) for underground CAES facilities, any applicable regulations adopted by the Kansas corporation commission pursuant to K.S.A. 66-1274, and amendments thereto.
(c) Each person who proposes to construct or modify a CAES facility that includes underground storage and does not include energy production utilizing combustion shall meet the following requirements:
(1) Upon application for a construction permit or approval, the person shall comply with any applicable regulations adopted by the Kansas corporation commission pursuant to K.S.A. 66-1274, and amendments thereto.
(2) The person shall develop and submit to the department for approval, with the application for a construction permit or approval, a site emissions characterization plan that determines the types and quantities of any regulated pollutants that rea-
sonably could be present. The site emissions characterization plan shall include the following:

(A) A list of volatile organic compounds and hazardous air pollutants, as defined in K.A.R. 28-19-201, that are or reasonably could be present in the proposed storage formation within the facility and that could be emitted as a result of the facility’s operations;

(B) the spatial characteristics of the proposed storage formation, including existing and proposed injection and withdrawal wells;

(C) a site characterization sampling plan that includes plans, either maps or diagrams, and a rationale for the following:
   (i) Proposed sample types;
   (ii) sampling locations;
   (iii) number of samples; and
   (iv) test methodologies;

(D) a quality assurance plan;

(E) the use of a laboratory approved by the secretary;

(F) any additional information that may be required by the department to fully characterize the site’s emissions;

(G) a schedule that includes a timeline for implementing the requirements prescribed in paragraph (c)(2); and

(H) existing information or knowledge about the proposed site or an adjacent site, as approved by the secretary, to complete, supplement, or take the place of any or all elements of the site emissions characterization plan prescribed in paragraph (c)(2).

(3) (A) If the site emissions characterization plan results indicate that emissions equal or exceed the emissions thresholds, emissions limitations, or standards specified in K.A.R. 28-19-300, the person proposing to construct or modify the CAES facility shall be subject to the applicable provisions of K.A.R. 28-19-300 through 28-19-350 for obtaining a construction permit or approval before commencing construction.

(B) If the person decides to proceed with the proposed CAES facility, the person shall submit the site emissions characterization plan results with an application for a construction permit or approval to the department.

(d)(1) The owner or operator of each CAES facility operating pursuant to a permit or approval issued by the department shall conduct emissions testing once every four calendar quarters in accordance with a sampling plan approved by the secretary. A certified copy of the test results signed by the person conducting the tests shall be provided to the department not later than 60 days after the end of the calendar quarter in which the emissions testing was conducted.

(2) The owner or operator may be required by the secretary to increase test frequency if emissions test results are close to or exceed an emissions limitation or an emissions threshold specified in a permit or approval issued by the secretary to the CAES facility.

(3) Upon written request by the owner or operator, decreased or suspended emissions testing may be approved by the secretary if the source demonstrates emissions test results significantly below emissions limitations or emissions thresholds specified in a permit or approval for three consecutive years.

(e)(1) The owner or operator of each CAES facility operating pursuant to a permit or approval issued by the department shall inspect the aboveground components of each CAES well and storage facility for liquid and vapor leaks at least once each calendar quarter. The owner or operator shall visually inspect for liquid leaks and shall test for vapor leaks using test methods consistent with USEPA method 21 in 40 C.F.R. part 60, appendix A, as adopted by reference in K.A.R. 28-19-720, or an alternate method as demonstrated to the satisfaction of the secretary to be equivalent. Leak detection points to be inspected and tested shall include the following:

(A) Valves;

(B) flanges and other connections;

(C) pumps and compressors;

(D) pressure-relief devices;

(E) process drains;

(F) open-ended lines or valves;

(G) seal system degassing vents and accumulator vents; and

(H) access door seals.

(2) The owner or operator shall record the following information and keep the information available at the CAES facility for at least five years for department inspection or for submittal to the department, which may include submittal with the emissions test results specified in subsection (d):

(A) The total number and the locations of the leak detection points;

(B) the date of each inspection;

(C) the number of leak detection points inspected and the number of leaks detected for each inspection date;
The following portions of 40 C.F.R. part 51 are hereby adopted by reference:

(1) Subpart I, as revised on July 1, 2011 and as amended by 76 fed. reg. 43507 (2011) and 77 fed. reg. 65118 (2012);

(2) appendix S, as revised on July 1, 2011 and as amended by 77 fed. reg. 65118 (2012); and

(3) appendix W, as revised on July 1, 2011.

e) Definitions. For the purposes of this regulation, the following definitions shall apply:

(1) “Act” shall mean the federal clean air act, 42 U.S.C. 7401 et seq.

(2) “Class I, II or III area” shall mean a classification assigned to any area of the state under the provisions of sections 162 and 164 of the act, 42 U.S.C. 7472 and 7474, and amendments thereto.

(f) Ambient air ceiling protection. In relation to ambient air ceilings, the following requirements shall apply:

(1) Except as stated in paragraph (f)(2) of this regulation, a permit shall not be issued for any new major stationary source or major modification as defined in 40 C.F.R. 52.21(b) if the source or modification will be located in an attainment area or an unclassifiable area for any national ambient air quality standard and if the source or modification would cause or contribute to a violation of any national ambient air quality standard. A major source or major modification shall be considered to cause or contribute to a violation of a national ambient air quality standard if the air quality impact of the source or modification would exceed the following levels at any locality that does not or would not meet the applicable national standard:

<table>
<thead>
<tr>
<th>Pollutant</th>
<th>Annual</th>
<th>24 hrs.</th>
<th>8 hrs.</th>
<th>3 hrs.</th>
<th>1 hr.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sulphur dioxide</td>
<td>1.0 μg/m³</td>
<td>5 μg/m³</td>
<td>--------</td>
<td>25 μg/m³</td>
<td>--------</td>
</tr>
<tr>
<td>PM₁₀</td>
<td>1.0 μg/m³</td>
<td>5 μg/m³</td>
<td>--------</td>
<td>--------</td>
<td>--------</td>
</tr>
<tr>
<td>PM₂.₅</td>
<td>0.3 μg/m³</td>
<td>1.2 μg/m³</td>
<td>--------</td>
<td>--------</td>
<td>--------</td>
</tr>
<tr>
<td>Nitrogen dioxide</td>
<td>1.0 μg/m³</td>
<td>--------</td>
<td>--------</td>
<td>--------</td>
<td>--------</td>
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<td>0.5 mg/m³</td>
<td>2 mg/m³</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(2) A permit may be granted for a major stationary source or major modification as identified in paragraph (f)(1) of this regulation if the impact of the major stationary source’s or major modification’s emissions upon air quality is reduced by a sufficient amount to compensate for any adverse impact at the location where the major source or modification would otherwise cause or contribute to a violation of any national ambient air quality standard. Subsection (f) shall not apply to a major...
stationary source or major modification with respect to a particular pollutant if the owner or operator demonstrates that the source is located in an area that has been identified as not meeting either the national primary or secondary ambient air quality standard for that particular pollutant.

(g) Stack height requirements. K.A.R. 28-19-18 through K.A.R. 28-19-18f, regarding stack height requirements, shall apply to the sources subject to this regulation.

(h) Application required. Each application for a PSD permit shall be submitted by the owner or operator on the forms provided or approved by the department. K.A.R. 28-19-300 through K.A.R. 28-19-304, regarding construction permit and approval requirements, shall apply to the sources subject to this regulation.

(i) Impact on federal class I areas; notification required. If the emissions from any proposed major stationary source or major modification subject to this regulation will affect any air quality-related values in any federal class I area, a copy of the permit application for the source or modification shall be transmitted by the secretary or an authorized representative of the secretary to the administrator of USEPA through the appropriate regional office. The administrator, through the appropriate regional office, shall also be notified of every action taken concerning the application.

(j) Permit suspension or revocation. Any permit issued under this regulation may be suspended or revoked by the secretary upon a finding that the owner or operator has failed to comply with any requirement specified in the permit or with any other statutory or regulatory requirement. This subsection shall not be interpreted to preclude any other remedy provided by law to the secretary.

(k) Public participation requirements. In addition to the requirements of K.A.R. 28-19-204, the following public participation requirements shall be met before issuance of the permit:

(1) The public notice shall include the following:

(A) A statement specifying the portion of the applicable maximum allowable increment that is expected to be consumed by the source or modification; and

(B) a statement that the federal land manager of any adversely impacted federal class I area has the opportunity to provide the secretary with a demonstration that the emissions from the proposed source or modification will have an adverse impact on air quality-related values in the federal class I area.

(2) A copy of the public notice shall be mailed to the following:

(A) The applicant;

(B) the administrator of USEPA through the appropriate regional office;

(C) any state or local air pollution control agency having jurisdiction in the air quality control region in which the new or modified installation will be located;

(D) the chief executives of the city and county where the source will be located;

(E) any comprehensive regional land use planning agency having jurisdiction where the source will be located; and

(F) any state, federal land manager, or Indian governing body whose lands will be affected by emissions from the new construction or modification.

(3) In addition to those materials required to be available for public review at the appropriate district office or local agency, a summary analysis and discussion of those materials as they relate to establishing compliance with the requirements of this regulation shall be made available for public review.


28-19-517. Class I operating permits; annual emissions inventory. (a) Each owner or operator of a stationary source that is required by these regulations to apply for a class I operating permit shall, on or before April 1 of each year, submit to the department all operating information and any other relevant information deemed necessary by the secretary to estimate the actual air emissions from the stationary source for the preceding year. If April 1 falls on a Saturday, Sunday, or legal holiday, then the submissions shall be due on or before the next business day following April 1. The timeliness of the submissions shall be determined by the postmark if submitted by mail.

(b) The information required by subsection (a)
shall be submitted on forms provided by the department or approved by the secretary. (Authorized by K.S.A. 2009 Supp. 65-3005; implementing K.S.A. 65-3007; effective Jan. 23, 1995; amended Feb. 20, 1998; amended Sept. 23, 2005; amended Nov. 5, 2010.)

28-19-645a. Restrictions on open burning operations for certain counties during the month of April. This regulation shall supersede K.A.R. 28-19-645 during the month of April for the counties listed in subsection (a) below.

(a) A person shall not cause or permit open burning operations of any waste, including vegetation and wood waste, structures, or any other materials on any premises during the month of April in Butler, Chase, Chautauqua, Cowley, Elk, Geary, Greenwood, Johnson, Lyon, Marion, Morris, Pottawatomie, Riley, Sedgwick, Wabaunsee, and Wyandotte counties, except as authorized by subsections (b) through (d).

(b) The following activities shall be exempt from the prohibition in subsection (a):

(1) Open burning operations for the purpose of range or pasture management and conservation reserve program (CRP) burning activities meeting the requirements in K.A.R. 28-19-648 (a)(1) through (a)(4); and

(2) open burning operations listed in K.A.R. 28-19-647 (a)(1) and (a)(2).

(c) A person may obtain approval by the secretary to conduct an open burning operation that is not otherwise exempt if the conditions and requirements of the following are met:

(1) K.A.R. 28-19-647 (b)(1) through (b)(3); and

(2) K.A.R. 28-19-647 (d) and (e).

(d) Open burning operations that shall require approval by the secretary and are deemed necessary and in the public interest shall include the open burning operations listed in K.A.R. 28-19-647 (c)(1) through (c)(3).

(1) In Johnson, Wyandotte, and Sedgwick counties, the open burning operations listed in K.A.R. 28-19-647 (c)(4) and (c)(5) shall require approval by the local authority.

(e) Nothing in this regulation shall restrict the authority of local jurisdictions to adopt more restrictive ordinances or resolutions governing agricultural open burning operations. (Authorized by K.S.A. 2010 Supp. 65-3005; implementing K.S.A. 2010 Supp. 65-3005 and K.S.A. 65-3010; effective, T-28-3-1-11, March 1, 2011; effective Sept. 9, 2011.)


(a) “Auxiliary power unit” means an integrated system that provides heat, air conditioning, engine warming, or electricity to components of a heavy-duty diesel vehicle and is certified by the administrator of the USEPA under 40 C.F.R. part 89 as meeting applicable emission standards.

(b) “Commercial vehicle” means any motor vehicle, other than a passenger vehicle, and any trailer, semitrailer, or pole trailer drawn by the motor vehicle that is designed, used, and maintained for the transportation of persons or property for hire, compensation, or profit or in the furtherance of a commercial enterprise.

(c) “Gross vehicle weight rating” means the weight specified by the manufacturer as the loaded weight of a single vehicle.

(d) “Heavy-duty diesel vehicle” means any motor vehicle that meets the following conditions:

(1) Has a gross vehicle weight rating of more than 14,001 pounds;

(2) is powered by a diesel engine; and

(3) is designed primarily for transporting persons or property on a public street or highway.

(e) “Idling” means the operation of an engine in the operating mode during either of the following situations:

(1) When the engine is not in gear; or

(2) when the engine operates at the revolutions per minute specified by the engine or vehicle manufacturer, the accelerator is fully released, and there is no load on the engine.

(f) “Institutional vehicle” means any motor vehicle, other than a passenger vehicle, and any trailer, semitrailer, or pole trailer drawn by the motor vehicle that is designed, used, and maintained for the transportation of persons or property for an organization, establishment, foundation, or society.

(g) “Load or unload location” means any site where a driver idles a heavy-duty diesel vehicle while waiting to load or unload. This term shall include the following:

(1) Distribution centers;

(2) warehouses;

(3) retail stores;

(4) railroad facilities; and

(5) ports.

(h) “Passenger vehicle” means any motor vehicle designed for carrying not more than 10 pas-
sengers and used for the transportation of persons.

(i) “Public vehicle” means any motor vehicle, other than a passenger vehicle, and any trailer, semitrailer, or pole trailer drawn by the motor vehicle that is designed, used, and maintained for the transportation of persons or property at the public expense and under public control. (Authorized by K.S.A. 2009 Supp. 65-3005; implementing K.S.A. 65-3010; effective June 25, 2010.)

28-19-712a. Applicability. K.A.R. 28-19-712 through K.A.R. 28-19-712d shall apply only in Johnson and Wyandotte counties to any person who owns or operates either of the following:

(a) Any heavy-duty diesel vehicle that is also a commercial vehicle, institutional vehicle, or public vehicle; or

(b) any load or unload location. (Authorized by K.S.A. 2009 Supp. 65-3005; implementing K.S.A. 65-3010; effective June 25, 2010.)


28-19-712c. General requirement for load or unload locations. No person who owns or operates a load or unload location for freight shall cause any heavy-duty diesel vehicle that is also a commercial vehicle to idle for a period longer than 30 minutes in any 60-minute period while waiting to load or unload at that location. (Authorized by K.S.A. 2009 Supp. 65-3005; implementing K.S.A. 65-3010; effective June 25, 2010.)

28-19-712d. Exemptions. K.A.R. 28-19-712b shall not apply to the following:

(a) Any heavy-duty diesel vehicle specified in K.A.R. 28-19-712a(a) that idles in any of the following conditions:

(1) While forced to remain motionless because of road traffic or an official traffic control device or signal or at the direction of a law enforcement official;

(2) when operating defrosters, heaters, air conditioners, safety lights, or other equipment solely for safety or health reasons and not as part of a rest period;

(3) during a state or federal inspection to verify that all equipment is in good working order, if idling is required as part of the inspection; or

(4) during mechanical difficulties over which the driver has no control;

(b) a police, fire, ambulance, military, utility, emergency, or law enforcement vehicle or any vehicle being used in an emergency capacity that idles while in an emergency or training mode and not for the convenience of the vehicle operator;

(c) an armored vehicle that idles when a person remains inside the vehicle to guard the contents or while the vehicle is being loaded or unloaded;

(d) an occupied vehicle with a sleeper berth compartment that idles for purposes of air conditioning or heating during government-mandated rest periods;

(e) a vehicle that is used exclusively for agricultural operations and only incidentally operated or moved upon the highway;

(f) a primary propulsion engine that idles for maintenance, servicing, repairing, or diagnostic purposes if idling is necessary for the activity;

(g) a primary propulsion engine that idles when necessary to power mechanical or electrical operations other than propulsion, including mixing, refrigerating, or processing cargo, or the operation of a hydraulic lift. This exemption shall not apply when idling for cabin comfort or operating nonessential onboard equipment;

(h) an auxiliary power unit or generator that is operated as an alternative to idling the main engine; and

(i) a bus that is also a commercial vehicle, institutional vehicle, or public vehicle that idles a maximum of 15 minutes in any 60-minute period to maintain passenger comfort while nondriver passengers are on board. (Authorized by K.S.A. 2009 Supp. 65-3005; implementing K.S.A. 65-3010; effective June 25, 2010.)

28-19-713. Applicability. K.A.R. 28-19-713 through K.A.R. 28-19-713d shall apply to the owner or operator of each stationary source located in Wyandotte or Johnson county that annually emits at least 1,000 tons of nitrogen oxides from the entire facility, based on an average of the total emissions for the 2005, 2006, and 2007 calendar years. The total emissions shall be the sum of the actual emissions and the potential-to-emit emissions for each calendar year. The actual emis-
Emissions shall be calculated pursuant to K.A.R. 28-19-210. If the actual emissions are more than 1,000 tons of nitrogen oxides for each calendar year, the potential-to-emit emissions may be excluded from the total emissions calculation. The potential-to-emit emissions shall be used for periods exceeding two weeks of operational inactivity due to maintenance, construction, or modification. (Authorized by K.S.A. 2009 Supp. 65-3005; implementing K.S.A. 65-3010; effective June 25, 2010.)

28-19-713a. Emission limitation requirements. No owner or operator subject to K.A.R. 28-19-713 shall allow any emission unit to emit nitrogen oxides in excess of the following emission limitations based on a 30-day rolling average:

(a) From electric generating units, for the purposes of K.A.R. 28-19-713 through K.A.R. 28-19-713d, the following:

1. 0.26 pounds per million British thermal units (lbs/MMBtu) for unit 1, a turbo wall-fired Riley Stoker boiler located at the Nearman Creek power station in Kansas City, Kansas; and
2. 0.20 lbs/MMbtu for unit 2, a wall-fired Riley Stoker boiler located at the Quindaro power station in Kansas City, Kansas; and
(b) from flat glass furnaces, 7.0 pounds per ton of glass produced. (Authorized by K.S.A. 2009 Supp. 65-3005; implementing K.S.A. 65-3010; effective June 25, 2010.)

28-19-713b. Alternate emissions limit. Each owner or operator of an emission unit subject to an emissions limit for nitrogen oxides specified in K.A.R. 28-19-713a that is also subject to a more stringent Kansas or USEPA emissions limit for nitrogen oxides shall comply with the more stringent emissions limit for that emission unit. (Authorized by K.S.A. 2009 Supp. 65-3005; implementing K.S.A. 65-3010; effective June 25, 2010.)

28-19-713c. Control measures and equipment. Each owner or operator of any emission unit subject to an emissions limit specified in K.A.R. 28-19-713a or K.A.R. 28-19-713b shall implement control measures and install, operate, and maintain equipment necessary to achieve these limits no later than 18 months after the effective date of this regulation. (Authorized by K.S.A. 2009 Supp. 65-3005; implementing K.S.A. 65-3010; effective June 25, 2010.)

28-19-713d. Compliance demonstration, monitoring, and reporting requirements. No later than 24 months after the effective date of this regulation, each owner or operator of any emission unit subject to the nitrogen oxide emission limits specified in K.A.R. 28-19-713a or K.A.R. 28-19-713b shall meet the following requirements:

(a) Demonstrate compliance with the applicable emissions limit by performing an emissions test in accordance with 40 C.F.R. 60.8, as adopted by reference in K.A.R. 28-19-720, and either of the following:

1. Test method 7, 7A, 7C, 7D, or 7E in appendix A-4 to 40 C.F.R. part 60, as adopted by reference in K.A.R. 28-19-720; or
2. any other USEPA test method approved by the department;
(b) ensure continuous compliance with the applicable emissions limit by installing, calibrating, maintaining, and operating a continuous emission monitoring system (CEMS) for nitrogen oxides that meets the requirements of 40 C.F.R. 60.13 and performance specification 2 in appendix B to 40 C.F.R. part 60, as adopted by reference in K.A.R. 28-19-720;
(c) certify the CEMS at least three months before the compliance demonstration required by subsection (a) pursuant to either of the following:

1. The quality assurance procedures in appendix F to 40 C.F.R. part 60, as adopted by reference in K.A.R. 28-19-720; or
2. an equivalent quality assurance procedure approved by the department; and

28-19-720. New source performance standards. (a) 40 C.F.R. part 60 and its appendices, as revised on July 1, 2008, are adopted by reference except for the following:

1. The following sections in subpart A:
   (A) 60.4;
   (B) 60.9;
   (C) 60.10; and
   (D) 60.16;
2. subpart B;
3. the following mercury provisions in subpart Da:
   (A) 60.45Da;
in 60.48Da(c), the phrase "and the Hg emission standards under §60.45Da";
(C) 60.48Da(l);
(D) in 60.49Da(l), the phrase "or §60.45Da";
(E) 60.49Da(p), (q), and (r);
(F) 60.50Da(g) and (h);
(G) in 60.51Da(a), the phrase "and Hg emissions";
(H) 60.51Da(g);
(I) in 60.51Da(k), the phrase "and/or Hg"; and
(J) 60.52Da;
(4) the following provisions in subpart Ja:
(A) 60.100a(c);
(B) in 60.101a, the definition of "flare";
(C) 60.102a(g); and
(D) 60.107a(d) and (e);
(5) in 60.2265 and 60.2875, the definitions of "commercial and industrial solid waste incineration (CISWI) unit," "commercial or industrial waste," and "solid waste"; and
(6) subpart HHHH.
(b) The definitions of "commercial and industrial solid waste incineration (CISWI) unit," "commercial or industrial waste," and "solid waste" in 40 C.F.R. 60.2265 and 40 C.F.R. 60.2875, as in effect on July 1, 2005, are adopted by reference.
(c) Unless the context clearly indicates otherwise, the following meanings shall be given to these terms as they appear in 40 C.F.R. part 60, as adopted by reference in subsection (a):
(1) The term "administrator" shall mean the secretary or the secretary's authorized representative.
(2) The term "United States environmental protection agency" and any term referring to the United States environmental protection agency shall mean the department.
(3) The term "state" shall mean the state of Kansas.
(d) The owner or operator of each source that is subject to this regulation shall submit to the department any required annual reports specified in 40 C.F.R. part 60 within 180 days of the last day of the year for which the report is required, unless the owner or operator is required in this article to submit annual reports on a different schedule. (Authorized by K.S.A. 2008 Supp. 65-3005, as amended by L. 2009, ch. 141, sec. 23; implementing K.S.A. 65-3005 and 65-3010; effective Jan. 23, 1995; amended June 6, 1997; amended June 11, 1999; amended June 15, 2007; amended Dec. 3, 2004; amended June 15, 2007; amended Nov. 5, 2010.)
28-19-735. National emission standards for hazardous air pollutants. (a) 40 C.F.R. part 61 and its appendices, as in effect on July 1, 2010, are adopted by reference except for the following:
(1) The following sections in subpart A:
(A) 61.04;
(B) 61.16; and
(C) 61.17;
(2) subpart B;
(3) subpart H;
(4) subpart I;
(5) subpart K;
(6) subpart Q;
(7) subpart R;
(8) subpart T; and
(9) subpart W.
(b) Unless the context clearly indicates otherwise, the following meanings shall be given to these terms as they appear in 40 C.F.R. part 61:
(1) The term “administrator” shall mean the secretary or the secretary's authorized representative.
(2) The term “United States environmental protection agency” and any term referring to the United States environmental protection agency shall mean the department.
28-19-750. Hazardous air pollutants; maximum achievable control technology. (a) 40 C.F.R. part 63 and its appendices, as in effect on July 1, 2010, are adopted by reference, except for the following:
(1) The following sections in subpart A:
(A) 63.6(f)(1), (g), (h)(1), and (h)(9);
(B) 63.7(e)(2)(ii) and (f);
(C) 63.8(f);
(D) 63.10(f);
(E) 63.12;
(F) 63.13;
(G) in 63.14(b)(27), the phrase “and table 5 to subpart DDDDD of this part”;
(H) 63.14(b)(35), (39) through (53), and (55) through (62);
(I) in 63.14(i)(1), the phrase “table 5 to subpart DDDDD of this part”; and
(J) 63.15;
(2) subpart B;
(3) subpart C;
(4) subpart D;
(5) subpart E;
(6) subpart ZZZZ;
(7) subpart DDDDD;
(8) subpart JJJJJ; and
(9) subpart KKKKK.
(b) 40 C.F.R. part 63, subpart ZZZZ, as in effect on July 1, 2009, is adopted by reference.
(c) Unless the context clearly indicates otherwise, the following meanings shall be given to these terms as they appear in 40 C.F.R. part 63:
(1) The term “administrator” shall mean the secretary or the secretary’s authorized representative.
(2) The term “United States environmental protection agency” and any term referring to the United States environmental protection agency shall mean the department.

Article 21.—FOOD, DRUGS AND COSMETICS


28-21-26a. (Authorized by K.S.A. 1979 Supp. 65-663; effective May 1, 1980; revoked June 4, 2010.)


28-21-60a. (Authorized by K.S.A. 1979 Supp. 65-663; effective May 1, 1980; revoked June 4, 2010.)


28-21-63 and 28-21-64. (Authorized by K.S.A. 1979 Supp. 65-663; effective May 1, 1980; revoked June 4, 2010.)


Article 23.—SANITATION; FOOD AND DRUG ESTABLISHMENTS


Article 29.—SOLID WASTE MANAGEMENT

28-29-1a. Modification of obsolete references and text. The following modifications shall be made to article 29:


(b) In K.A.R. 28-29-23a(c)(8), the phrase “K.A.R. 28-31-3 and K.A.R. 28-29-4” shall be replaced with “K.A.R. 28-31-261.”


(d) In K.A.R. 28-29-102, the following modifications shall be made:


(e) In K.A.R. 28-29-108, the following modifications shall be made:

(1) In subsection (a), the phrase “K.A.R. 28-31-3 and K.A.R. 28-31-4” shall be replaced with “K.A.R. 28-31-261.”


(h) In K.A.R. 28-29-1100, the following modifications shall be made:
   (2) In paragraph (b)(3), the following modifications shall be made:
      (A) “‘Small quantity generator’” shall be replaced with “‘Conditionally exempt small quantity generator.’”
      (B) “K.A.R. 28-31-2” shall be replaced with “K.A.R. 28-31-260a.”
   (3) In paragraph (b)(4), the phrase “defined by the United States department of transportation and adopted by reference in K.A.R. 28-31-4 (e)” shall be replaced with “as listed in 49 CFR 173.2, as in effect on October 1, 2009, which is hereby adopted by reference.”
   (4) In subsection (c), each occurrence of the term “K.A.R. 28-31-16” shall be replaced with “K.A.R. 28-31-279 and K.A.R. 28-31-279a.”
   (5) In subsection (d), “[s]mall quantity generator” shall be replaced with “Conditionally exempt small quantity generator.”
   (6) In subsections (d) and (e), each occurrence of the term “SQG” shall be replaced with “CESQG.”

(k) In K.A.R. 28-29-1103(c), the phrase “meeting the USDOT manufacturing and testing specifications for transportation of hazardous materials, as adopted by reference in K.A.R. 28-31-4 (e)” shall be replaced with “that are compatible with the waste.”


28-29-300. Definitions. (a) For the purposes of K.A.R. 28-29-300 through K.A.R. 28-29-333, the following definitions shall apply:
   (1) “C&D” means construction and demolition.
   (2) “C&D contact water” means liquid, consisting primarily of precipitation, that has infiltrated through the C&D waste or has been in contact with the C&D waste for any period of time. This term shall include all runoff from the active area of the C&D landfill and all liquid derived from the C&D waste.
   (3) “C&D landfill” shall have the meaning assigned to “construction and demolition landfill” in K.S.A. 65-3402, and amendments thereto.
   (4) “C&D waste” shall have the meaning assigned to “construction and demolition waste” in K.S.A. 65-3402, and amendments thereto. For the purposes of this definition, the following clarifications shall apply:
      (A) “Furniture and appliances” shall not include computer monitors and other computer components, televisions, videocassette recorders, stereos, and similar waste electronics.
      (B) “Treated wood” shall include wood treated with any of the following:
         (i) Creosote;
         (ii) oil-borne preservatives, including pentachlorophenol and copper naphthenate;
         (iii) waterborne preservatives, including chromated copper arsinate (CCA), ammoniacal copper zinc arsenate (ACZA), and ammoniacal copper quaternary compound (ACQ); or
         (iv) any other chemical that poses a risk to human health or safety or the environment that is similar to any of the risks posed by the chemicals specified in paragraphs (a)(4)(B)(i) through (iii).
      (C) “Untreated wood” shall include wood treated with any of


(5) In K.A.R. 28-29-1103(c), the phrase “meeting the USDOT manufacturing and testing specifications for transportation of hazardous materials, as adopted by reference in K.A.R. 28-31-4 (e)” shall be replaced with “that are compatible with the waste.”
the chemicals listed in paragraphs (a)(4)(B)(i) through (iv):
   (i) Coated wood, including wood that has been painted, stained, or varnished; and
   (ii) engineered wood, including plywood, laminated wood, oriented-strand board, and particle board.

(5) “Hazardous waste” means material determined to be hazardous waste as specified in K.A.R. 28-31-261.

(6) “Household hazardous waste” shall have the meaning specified in K.A.R. 28-29-1100.

(7) “Lower explosive limit” and “LEL” mean the lowest percent volume of a mixture of explosive gases in air that will propagate a flame at 25°C and atmospheric pressure.

(8) “Non-C&D waste” means all solid waste that is not specifically defined as construction and demolition waste in K.S.A. 65-3402, and amendments thereto. Non-C&D waste shall include hazardous waste and household hazardous waste.


28-29-330. Control of hazardous and explosive gases at C&D landfills; applicability of additional requirements. (a) Applicability of additional design, operating, and postclosure requirements. The additional design, operating, and postclosure requirements of K.A.R. 28-29-332 shall apply to the owner or operator of each disposal unit at a C&D landfill that meets all of the following conditions:

   (1) Location. Precipitation in all parts of the county in which the C&D landfill is located averages more than 25 inches per year. The following counties and any county located east of these counties shall be designated as meeting this condition: Jewell, Mitchell, Lincoln, Ellsworth, Rice, Reno, Kingman, and Harper.

   (2) Capacity. The disposal unit meets one of the following conditions:
       (A) The construction of the disposal unit begins on or after the effective date of this regulation, and the capacity of the disposal unit is more than 50,000 cubic yards. Construction of the disposal unit shall be in accordance with a construction quality assurance plan that is specific to the disposal unit and has been approved by the secretary.
       (B) The construction of the disposal unit begins on or after January 1, 2014 and the capacity of the disposal unit, in combination with all other disposal units constructed on or after January 1, 2014, is more than 50,000 cubic yards. Construction of the disposal unit shall be in accordance with a construction quality assurance plan that is specific to the disposal unit and has been approved by the secretary.

   (b) Applicability of corrective action requirements. The corrective action requirements of K.A.R. 28-29-333 shall apply to the owner or operator of each C&D landfill during the operating and postclosure periods. (Authorized by and implementing K.S.A. 65-3406; effective Dec. 28, 2012.)

28-29-331. Control of hazardous and explosive gases at C&D landfills; documentation of conditions used to determine applicability. Each person that submits an application for a new C&D landfill and each owner or operator that proposes to construct a disposal unit at an existing C&D landfill shall submit to the department documentation of the conditions specified in K.A.R. 28-29-330, according to the following requirements:

   (a) Required documentation.
       (1) If the C&D landfill meets the location conditions specified in K.A.R. 28-29-330(a)(1), the applicant or the owner or operator shall submit documentation of the capacity of the proposed disposal unit and the capacity of each disposal unit constructed on or after January 1, 2014.

   (2) If the proposed disposal unit meets the location and capacity conditions specified in K.A.R.
28-29-332(a)(1) and (2), the applicant or the owner or operator shall submit documentation of the hydrogeologic conditions specified in K.A.R. 28-29-330(a)(3). For the purposes of determining the applicability of K.A.R. 28-29-332, if the disposal unit meets one of the hydrogeologic conditions listed in K.A.R. 28-29-330(a)(3), the applicant or the owner or operator shall not be required to submit documentation of the other hydrogeologic conditions.

(b) Schedule for submission of documentation.
(1) Each applicant for a new C&D landfill permit shall include the documentation specified in subsection (a) with the permit application.
(2) Each owner or operator of an existing C&D landfill that proposes to construct a disposal unit shall submit the documentation specified in subsection (a) on or before the date the construction quality assurance plan for the disposal unit is submitted. (Authorized by and implementing K.S.A. 65-3406; effective Dec. 28, 2012.)

28-29-332. Control of hazardous and explosive gases at C&D landfills; additional design, operating, and postclosure requirements. The owner or operator of each disposal unit at a C&D landfill that meets the conditions of K.A.R. 28-29-330 for determining the applicability of additional design, operating, and postclosure requirements shall comply with the following requirements:
(a) The owner or operator shall design, construct, and operate the disposal unit to prevent contact water from accumulating in the waste.
(b) The owner or operator shall perform both of the following:
(1) Demonstrate whether it will be necessary to pump contact water out of the landfill after the landfill closes in order to prevent contact water from accumulating in the waste; and
(2) include this information in the operating plan.
(c) If the operating plan states that contact water will be pumped out of the landfill after closure, the owner or operator shall obtain financial assurance for postclosure, according to the requirements of K.A.R. 28-29-2101 through 28-29-2113. (Authorized by and implementing K.S.A. 65-3406; effective Dec. 28, 2012.)

28-29-333. Control of hazardous and explosive gases at C&D landfills; response, assessment monitoring, and corrective action. The owner or operator of each C&D landfill shall comply with the following:
(a) Identification of potential problem. If the owner or operator observes or is informed of any indication of a release of landfill gas, the owner or operator shall perform the following:
(1) Immediately assess the potential danger posed to human health and safety;
(2) immediately take all the steps necessary to ensure protection of human health and safety;
(3) notify the department of the observation or information within two business days; and
(4) in consultation with the department, implement appropriate action to assess the concentrations of gas at the landfill.
(b) Action levels. The owner or operator shall comply with the requirements of subsection (c) if gas concentrations exceed any of the following levels:
(1) For methane, either of the following:
(A) 25% of the LEL (1.25% by volume) in any building on the facility property; or
(B) 100% of the LEL (5% by volume) at the facility property boundary;
(2) for hydrogen sulfide, either of the following:
(A) 1 ppm for on-site personnel; or
(B) 0.1 ppm in the ambient air at the facility boundary, based on a 15-minute time-weighted average measured when the wind speed is less than 15 mph; or
(3) for any gas other than methane or hydrogen sulfide, a level that presents a risk to human health or safety equivalent to the levels listed in paragraphs (1) and (2) of this subsection.
(c) Response and assessment monitoring. If the concentration of any gas exceeds the levels specified in subsection (b), the owner or operator shall perform the following actions:
(1) If an exceedance is found at the facility boundary, immediately notify the local government’s public health, environment, and emergency management offices;
(2) notify the department within one business day;
(3) within one week and in consultation with the department, develop a gas monitoring plan;
(4) upon approval of the secretary, implement the gas monitoring plan; and
(5) if gas monitoring has continued for one month and the frequency of the exceedances is not decreasing, take long-term corrective action according to the requirements of subsection (d).
(d) Corrective action. If long-term corrective
action is required, the owner or operator shall perform the following actions:

(1) Develop and submit to the department a corrective action plan, including provisions for the installation of an active or passive gas management system. The owner or operator shall submit the plan within 60 calendar days of the date the conditions requiring corrective action were met; and

(2) upon approval of the secretary, implement the corrective action plan. (Authorized by and implementing K.S.A. 65-3406; effective Dec. 28, 2012.)

28-29-501. Uncontaminated soil. For the purposes of K.S.A. 65-3402 and amendments thereto, “uncontaminated soil” shall mean soil that meets all the following conditions:

(a) The soil meets the definition of “construction and demolition waste” in K.S.A. 65-3402, and amendments thereto.

(b) The soil has not been generated at a facility that is under state or federal oversight for the investigation or cleanup of contamination, unless the state or federal project manager who is providing the oversight approves the use of the soil as clean rubble, as defined in K.S.A. 65-3402 and amendments thereto.

(c) The soil exhibits no characteristic that would be expected to create either of the following if the soil is managed as clean rubble:

(1) An odor or other nuisance that would be offensive to a reasonable person; or

(2) an obvious risk to human health or safety or the environment, due to any physical or chemical property of the soil.

(d) The soil is determined to be suitable for use as clean rubble by one of the following methods:

(1) The generator of the soil determines that there is no indication of contamination in the soil. Indication of contamination shall be based on information readily available to the generator of the soil, including the following:

(A) The visual appearance of the soil;

(B) the odor of the soil; and

(C) all known past activities at the site from which the soil is being removed.

(2) The generator of the soil obtains analytical data from representative soil samples according to the requirements in subsection (e) and all of the following criteria are met:

(A) The soil is not a hazardous waste.

(B) Total nitrate plus ammonia is less than 40 mg/kg.

(C) The level of total petroleum hydrocarbons is less than N = 1, as described in section 5.0 of “risk-based standards for Kansas” (“RSK manual”), published in June 2007 by the department and hereby adopted by reference, including all appendices. The GRO tier 2 value shall be 39 mg/kg and the DRO tier 2 value shall be 2000 mg/kg.

(D) If the analyte is a chemical other than nitrate, ammonia, or a petroleum hydrocarbon, all of the following criteria are met:

(i) There is no more than one anthropogenic analyte present in the soil. For the purposes of this regulation, the term “anthropogenic analyte” shall mean a chemical or substance present in the environment due to human activity.

(ii) The anthropogenic analyte is listed in the KDHE tier 2 risk-based summary table in appendix A of the RSK manual.

(iii) The concentration of the anthropogenic analyte is less than the level listed in the KDHE tier 2 risk-based summary table for residential scenarios for the soil pathway or for the soil to ground water protection pathway, whichever is lower.

(3) The secretary determines that if the soil is used as clean rubble, the soil will not present a risk to human health or safety or the environment, based on information provided by the generator of the soil. The generator of the soil shall submit the following information to the department:

(A) Analytical reports from representative soil samples; and

(B) the following information, if requested by the department:

(i) Analytical reports indicating naturally occurring background concentrations at the site from which the soil is being removed;

(ii) the cumulative cancer risk level of all analytes;

(iii) the hazard index value, as defined in K.A.R. 28-71-1, of all analytes; and

(iv) any other information required by the department to evaluate the potential risk to human health or safety or the environment.

(e) If analytical data is used to meet the conditions of this regulation, the following requirements are met:

(1) At least one representative sample shall be collected and analyzed for each 500 cubic yards of soil.

(2) Each analysis shall be performed and reported by a laboratory that has departmental cer-
Each reference in this regulation to a federal regulation shall mean that federal regulation as adopted by reference in K.A.R. 28-31-124 through 28-31-279.

(a) Each person who is required to obtain an EPA identification number by 40 CFR part 124 or 40 CFR parts 260 through 279 and each Kansas small quantity generator shall notify the department of their hazardous waste, universal waste, and used oil activities and shall obtain an EPA identification number by submitting to the department KDHE form 8700-12 or another form approved by the secretary.

(b) Each person that is newly subject to these notification requirements due to promulgation of a statute or regulation shall notify the department of that person’s hazardous waste, universal waste, and used oil activities within 60 days of the effective date of the statute or regulation, unless a different date is specified in that statute or regulation.

(c) Each person shall update the information associated with that person’s EPA identification number if there is a change in the information. The person shall submit these changes to the department on KDHE form 8700-12 or another form approved by the secretary, no more than 60 days after the change occurs. (Authorized by and implementing K.S.A. 65-3431; effective, E-82-20, Nov. 4, 1981; effective May 1, 1982; amended, T-84-5, Feb. 10, 1983; amended May 1, 1984; amended, T-86-32, Sept. 24, 1985; amended May 1, 1986; amended, T-87-32, Sept. 24, 1985; amended May 1, 1987; amended, T-88-32, Sept. 24, 1986; amended May 1, 1988; amended, T-89-32, Sept. 24, 1988; amended April 25, 1994; amended June 4, 1999; amended Sept. 20, 2002; revoked April 29, 2011.)
waste and is subject to the requirements of K.A.R. 28-31-263a; and

(2) each person that transports used oil and is subject to the requirements of 40 CFR part 279, subpart E.

(b) Registration. Each transporter shall register with the secretary according to the following requirements:

(1) The transporter shall submit the registration application on forms provided by the department.

(2) The transporter shall obtain written acknowledgment from the secretary that registration is complete before transporting hazardous waste or used oil within, into, out of, or through Kansas.

(3) The transporter shall carry a copy of the written acknowledgment in all vehicles transporting hazardous waste or used oil and shall provide the written acknowledgment for review upon request.

(4) The transporter shall update the registration information if there is a change in that information. The transporter shall submit these changes on forms provided by the department within 60 days of the date of the change.

(c) Insurance requirements. Each transporter shall secure and maintain liability insurance on each of the transporter’s vehicles transporting hazardous waste or used oil in Kansas.

(1) The limits of insurance shall not be less than $1 million per person and $1 million per occurrence for bodily injury or death and $1 million for all damage to the property of others. When combined bodily injury or death and property damage coverage are provided, the total limits shall not be less than $1 million.

(2) If any coverage is reduced or canceled, the transporter shall notify the secretary in writing at least 35 days before the effective date of the reduction or cancellation.

(3) The transporter shall, before the expiration date of the insurance policy, provide the secretary with proof of periodic renewal in the form of a certificate of insurance showing the monetary coverage and the expiration date.

(d) Denial or suspension of registration.

(1) Any application may be denied and any transporter’s registration may be suspended if the secretary determines that one or more of the following apply:

(A) The transporter failed or continues to fail to comply with any of the following:

(i) Provisions of the air, water, or waste statutes relating to environmental protection or to the protection of public health or safety, including regulations issued by Kansas or by the federal government; or

(ii) any condition of any permit or order issued to the transporter by the secretary.

(B) Any state or territory or the District of Columbia has found that the applicant or transporter has violated that government’s hazardous waste or used oil transporter laws or regulations.

(C) One or more of the following is a principal of another corporation that would not be eligible for registration:

(i) The transporter;

(ii) a person who holds an interest in the transporter;

(iii) a person who exercises total or partial control of the transporter; or

(iv) a person who is a principal of the parent corporation.

(2) Each notice of denial or suspension shall be issued in writing by the secretary and shall inform the applicant or transporter of the procedures for requesting a hearing pursuant to K.S.A. 65-3456a and amendments thereto. (Authorized by and implementing K.S.A. 65-3431; effective, E-82-20, Nov. 4, 1981; effective May 1, 1982; amended, T-84-5, Feb. 10, 1983; amended May 1, 1984; amended, T-86-32, Sept. 24, 1985; amended May 1, 1986; amended May 1, 1987; amended May 1, 1988; amended May 1, 1989; amended June 4, 1999; amended Sept. 20, 2002; amended April 29, 2011.)


28-31-10. Hazardous waste monitoring fees. Each reference in this regulation to a federal regulation shall mean that federal regulation as adopted by reference in K.A.R. 28-31-124 through 28-31-279. (a) Fee requirement. Each of the following persons shall pay an annual monitoring fee to the department according to the requirements of subsections (b) through (e):

(1) Each owner or operator of a hazardous waste treatment, storage, or disposal facility;
(2) each hazardous waste transporter; and
(3) each hazardous waste generator.

(b) Hazardous waste treatment, storage, or disposal facilities. The owner or operator of each facility shall pay the annual monitoring fee before January 1 of each year.

(1) The fee for each active facility shall be based on the following schedule:

<table>
<thead>
<tr>
<th>Facility Type</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>On-site storage facility</td>
<td>$10,000</td>
</tr>
<tr>
<td>Off-site storage facility</td>
<td>$10,000</td>
</tr>
<tr>
<td>On-site nonthermal treatment facility</td>
<td>$10,000</td>
</tr>
<tr>
<td>Off-site nonthermal treatment facility</td>
<td>$12,000</td>
</tr>
<tr>
<td>On-site thermal treatment facility</td>
<td>$12,000</td>
</tr>
<tr>
<td>Off-site thermal treatment facility</td>
<td>$18,000</td>
</tr>
<tr>
<td>On-site landfill or underground injection well</td>
<td>$14,000</td>
</tr>
<tr>
<td>Off-site landfill or underground injection well</td>
<td>$18,000</td>
</tr>
</tbody>
</table>

(2) The fee for each facility subject to postclosure care shall apply upon receipt by the department of the certification of closure specified in 40 CFR 264.115 or 40 CFR 265.115. This fee shall be $14,000.

(3) The owner or operator of each facility conducting more than one of the hazardous waste activities specified in paragraphs (b)(1) and (2) shall pay a single fee. This fee shall be in the amount specified for the activity having the highest fee of those conducted.

(c) Hazardous waste transporters. Each hazardous waste transporter shall pay the annual monitoring fee when the transporter registers with the department in accordance with K.A.R. 28-31-6, and before January 1 of each subsequent year. This fee shall be $200.

(d) Hazardous waste generators.

(1) Each large quantity generator shall pay the annual monitoring fee before March 1 of each year.

(A) The fee shall be based on all hazardous waste generated during the previous calendar year according to the following schedule:

<table>
<thead>
<tr>
<th>Quantity Generated</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than or equal to 5 tons</td>
<td>$300</td>
</tr>
<tr>
<td>Greater than 5 tons but less than or equal to 50 tons</td>
<td>$900</td>
</tr>
<tr>
<td>Greater than 50 tons but less than or equal to 500 tons</td>
<td>$2,800</td>
</tr>
<tr>
<td>Greater than 500 tons</td>
<td>$8,000</td>
</tr>
</tbody>
</table>

(B) Each large quantity generator that reclaims hazardous waste on-site to recover substantial amounts of energy or materials shall be exempt from payment of monitoring fees for the amount of hazardous waste reclaimed. This exemption shall not apply to hazardous waste residues produced during reclamation.

(2) Each small quantity generator and each Kansas small quantity generator shall pay the annual monitoring fee of $150 before April 1 of each year.

(e) Monitoring fee payments. Each monitoring fee payment that is made by check or money order shall be made payable to the “hazardous waste management fund - Kansas department of health and environment.”


28-31-12. Inspections. (a) Upon presentation of credentials and stating the purpose of the visit, the following actions may be performed dur-
ing the regular business hours of the facility by the secretary or the secretary’s designee:

1. Entering any factory, plant, construction site, hazardous waste storage, treatment, or disposal facility, or other location where hazardous wastes could potentially be generated, stored, treated, or disposed of, and inspecting the premises to gather information regarding existing conditions and procedures;

2. Obtaining samples of actual or potential hazardous waste from any person or from the property of any person, including samples from any vehicle in which hazardous wastes are being transported;

3. Stopping and inspecting any vehicle, if there is reasonable cause to believe that the vehicle is transporting hazardous wastes;

4. Conducting tests, analyses, and evaluations of wastes and waste-like materials to determine whether or not the wastes or materials are hazardous and whether or not the requirements of these regulations are being met;

5. Obtaining samples from any containers;

6. Making reproductions of container labels;

7. Inspecting and copying any records, reports, information, or test results relating to wastes generated, stored, transported, treated, or disposed of;

8. Photographing or videotaping any hazardous waste management facility, device, structure, or equipment;

9. Drilling test wells or groundwater monitoring wells on the property of any person where hazardous wastes are generated, stored, transported, treated, disposed of, discharged, or migrating off-site and obtaining samples from the wells; and

10. Conducting tests, analyses, and evaluations of soil, groundwater, surface water, and air to determine whether the requirements of these regulations are being met.

(b) If, during the inspection, unsafe or unpermitted hazardous waste management procedures are discovered, the operator of the facility may be instructed by the secretary or the secretary’s designee to retain and properly store hazardous wastes, pertinent records, samples, and other items. These materials shall be retained by the operator until the waste has been identified and the secretary determines the proper procedures to be used in handling the waste.

(c) When obtaining samples, the facility operator shall be allowed to collect duplicate samples for separate analyses.

(d) During the inspection, all reasonable security, safety, and sanitation measures employed at the facility shall be followed by the secretary or the secretary’s designee.

(e) A written report listing all deficiencies found during the inspection and stating the measures required to correct the deficiencies shall be prepared and sent to the operator. (Authorized by and implementing K.S.A. 65-3431; effective May 1, 1982; amended, T-85-42, Dec. 19, 1984; amended May 1, 1985; amended May 1, 1987; amended June 4, 1999; amended April 29, 2011.)

28-31-13. Variances. (a) Application. Any person may apply for a variance from one or more specific provisions of these regulations according to the following criteria:

1. An application for a variance may be submitted for any provision that is determined by the U.S. environmental protection agency to be more stringent or broader in scope than the federal hazardous waste regulations.

2. The application shall be submitted to the department on a form provided by the department.

3. The applicant shall state the reasons and circumstances that support the application and shall submit all other pertinent data to support the application.

(b) Review and public comment. A tentative decision to grant or deny a variance shall be made by the secretary according to the following criteria:

1. A tentative decision shall be made within 60 days of receipt of the application by the department.

2. A notice of the tentative decision and the opportunity for written public comment shall be published by the department in the following publications:

   A. The Kansas register; and

   B. The official county newspaper of the county in which the variance is requested or, if there is no official county newspaper, a newspaper published as provided in K.S.A. 64-101, and amendments thereto.

3. Upon the written request of any person, a public meeting may be held to consider comments on the tentative decision. The person requesting a public meeting shall state the issues to be raised and shall explain why written comments would not suffice to communicate the person’s views.

(c) Final decision. After all public comments
have been evaluated, a final decision shall be made by the secretary according to the following criteria:

(1) A variance may be granted by the secretary if the variance meets the following requirements:
   (A) The variance shall not be any less stringent than the federal hazardous waste regulations.
   (B) The variance shall be protective of public health and safety and the environment.

(2) A notice of the final decision shall be published by the department in the Kansas register.
   (A) If the variance is granted, all conditions and time limitations needed to comply with state or federal laws or to protect public health or safety or the environment shall be specified by the secretary.
   (B) The date the variance expires shall be provided in the final decision.

(d) Extension of a prior or existing variance. Any person may submit a request in writing to extend a prior or existing variance that meets the requirements of this regulation, according to the following criteria:
   (1) The person shall demonstrate the need for continuation of the variance.
   (2) The variance may be reissued or extended for another period upon a finding by the secretary that the reissuance or extension of the variance would not endanger public health or safety or the environment.
   (3) The review, public comment, and the final decision procedures shall be the same as those specified in subsections (b) and (c).

(e) Termination of a variance. Any variance granted pursuant to this regulation may be terminated, if the secretary finds one or more of the following conditions:
   (1) Violation of any requirement, condition, schedule, or limitation of the variance;
   (2) operation under the variance that fails to meet the minimum requirements established by state or federal law or regulations; or
   (3) operation under the variance that is unreasonably threatening public health or safety or the environment. Written notice of termination shall be provided by the secretary to the person granted the variance. (Authorized by and implementing K.S.A. 65-3431; effective May 1, 1988; amended Feb. 5, 1990; amended April 25, 1994; amended June 4, 1999; amended Sept. 20, 2002; revoked April 29, 2011.)


28-31-100. Substitution of state terms for federal terms; internal references to federal regulations. When used in any provision of 40 CFR part 124, parts 260 through 266, or part 268, 270, 273, or 279, as adopted by reference by K.A.R. 28-31-124 through 28-31-279, the following substitutions shall be made unless otherwise specified in K.A.R. 28-31-124 through 28-31-279:


(b) References to federal regulations that are not adopted by reference.

(1) 40 CFR part 124.
   (B) Each reference to 40 CFR 124, subpart A in its entirety shall be replaced with “K.A.R. 28-31-124 through 28-31-124e.”
   (C) Each reference to 40 CFR 124.2 or any portion of 40 CFR 124.2 shall be replaced with “40 CFR 270.2.”
   (D) Each reference to 40 CFR 124.3 or any portion of 40 CFR 124.3 shall be replaced with “K.A.R. 28-31-124a.”
   (E) Each reference to 40 CFR 124.5 or any portion of 40 CFR 124.5 shall be replaced with “K.A.R. 28-31-124b.”
   (F) Each reference to 40 CFR 124.6 or any portion of 40 CFR 124.6 shall be replaced with “K.A.R. 28-31-124c.”
   (G) Each reference to 40 CFR 124.8 or any portion of 40 CFR 124.8 shall be replaced with “K.A.R. 28-31-124d.”
   (H) Each reference to 40 CFR 124.10 or any
portion of 40 CFR 124.10 shall be replaced with “K.A.R. 28-31-124e,” except in 40 CFR 124.204(d)(10), where the phrase “§§ 124.10(e)(1)(ix) and (e)(1)(x)(A)” shall be replaced with “K.A.R. 28-31-124e(e)(1)(D) and (E).”

(I) The following phrases shall be replaced with “in accordance with K.S.A. 65-3440, and amendments thereto”:

(i) “[A]ccording to the procedures of § 124.19”;
(ii) “pursuant to 40 CFR 124.19”;
(iii) “under § 124.19”;
(iv) “under § 124.19 of this chapter”;
(v) “under § 124.19 of this part”;
(vi) “under the permit appeal procedures of 40 CFR 124.19.”

(2) 40 CFR 260.20 through 260.23. Each reference to 40 CFR 260.20, 260.21, 260.22, or 260.23, or any combination of these references, shall be replaced with the phrase “EPA’s rulemaking petition program.” (Authorized by and implementing K.S.A. 65-3431; effective April 29, 2011.)

28-31-100a. Substitution of state terms for federal terms; administrator. When used in any provision of 40 CFR part 124, parts 260 through 266, or part 268, 270, 273, or 279, as adopted by reference in K.A.R. 28-31-124 through 28-31-279, the following substitutions shall be made unless otherwise specified in K.A.R. 28-31-124 through 28-31-279:

(a) The following terms and phrases shall be replaced with “secretary,” except as noted in subsection (b):

(1) “Administrator”;
(2) “[a]dministrator or State Director”;
(3) “applicable EPA Regional Administrator”;
(4) “appropriate Regional Administrator or state Director”;
(5) “[a]sistant Administrator”;
(6) “[a]sistant Administrator for Solid Waste and Emergency Response”;
(7) “EPA Regional Administrator”;
(8) “EPA Regional Administrator(s)”;
(9) “EPA Regional Administrator (or his designated representative) or State authorized to implement part 268 requirements”;
(10) “EPA Regional Administrator for the Region in which the generator is located”;
(11) “EPA Regional Administrator(s) for the Region(s) in which the facility(ies) is(are) located”;
(12) “EPA Regional Administrator(s) of the EPA Region(s) in which the bonded facility(ies) is (are) located”;
(13) “EPA Regional Administrators of the Regions in which the facilities are located, or their designees”;
(14) “[r]egional Administrator”;
(15) “[r]egional Administrator(s)”;
(16) “[r]egional Administrator of every Region in which facilities for which financial responsibility is to be demonstrated through the financial test are located”;
(17) “[r]egional Administrator or state Director”;
(18) “[r]egional Administrator, or State Director, as the context requires, or an authorized representative (‘director’ as defined in 40 CFR 270.2)”;
(19) “[r]egional Administrator, or State Director (if located in an authorized state)”;
(20) “[r]egional Administrator(s) of the EPA Region(s) in which the facility(ies) is(are) located”;
(21) “USEPA Regional Administrator for Region [Region #].”

(b) The terms listed in subsection (a) shall not be replaced with “secretary” in the following federal regulations:

(1) 40 CFR 260.10, in the following definitions:
   (A) “Administrator”;
   (B) “equivalent method”;
   (C) “hazardous waste constituent”;
   (D) “industrial furnace”; and
   (E) “regional administrator”;
(2) 40 CFR part 261, in the following locations:
   (A) 40 CFR 261.10;
   (B) 40 CFR 261.11; and
   (C) 40 CFR 261.21;
(3) 40 CFR part 262, subparts E and H and the appendix;
   (4) 40 CFR part 264, in the following locations:
      (A) 40 CFR 264.12(a);
      (B) 40 CFR 264.151(b), in the first paragraph of the financial guarantee bond;
      (C) 40 CFR 264.151(c), in the first paragraph of the performance bond; and
   (D) 40 CFR 265.12(a);
(5) 40 CFR part 268, in the following locations:
   (A) 40 CFR 268.5;
   (B) 40 CFR 268.6;
   (C) 40 CFR 268.40(b);
   (D) 40 CFR 268.42(b); and
   (E) 40 CFR 268.44; and
(6) 40 CFR part 270, in the following locations:
(A) 40 CFR 270.2, in the following definitions:
   (i) “Administrator”;
   (ii) “corrective action management unit or CAMU”;
   (iii) “director”;
   (iv) “major facility”;
   (v) “regional administrator”; and
   (vi) “state/EPA agreement”;
(B) 270.5;
(C) 270.10(e)(2) and (3);
(D) 270.10(f)(3); and
(E) 270.11(a)(3). (Authorized by and implementing K.S.A. 65-3431; effective April 29, 2011.)

28-31-100d. Substitution of state terms for federal terms; DOT, director. When used in any provision of 40 CFR part 124, parts 260 through 266, or part 268, 270, 273, or 279, as adopted by reference by K.A.R. 28-31-124 through 28-31-279, the following substitutions shall be made unless otherwise specified in K.A.R. 28-31-124 through 28-31-279:

(a) Department of transportation. The terms “Department of Transportation” and “DOT” shall be replaced with “U.S. department of transportation,” except in the following instances:
   (1) In an address;
   (2) in the term “DOT hazard class”;
   (3) in the term “U.S. Department of Transportation (DOT)”; and
   (4) in the term “U.S. DOT.”

(b) Director.
   (1) The following terms shall be replaced with “secretary” except as noted in paragraphs (b)(2) through (4):
      (A) “Director” and “Directors”;
      (B) “[d]irector of an EPA permitting agency”;
      (C) “[r]egional or State Directors to whom the claim was submitted”;
      (D) “[r]egional or State RCRA and CAA Directors, in whose jurisdiction the exclusion is being claimed and where the comparable/syngas fuel will be burned”;
      (E) “[s]tate and Regional Directors”; and
      (F) “[s]tate Director.”
   (2) The term “Director” shall not be replaced with “secretary” when used in the following terms:
      (A) “Director of the Federal Register”;
      (B) “[d]irector, Office of Hazardous Materials Regulations”; and
      (C) “EPA Director of the Office of Solid Waste.”

(3) The term “directors” shall not be replaced with “secretary” in the term “Board of Directors.”
(4) The terms “Director,” “Directors,” and “State Director” shall not be replaced with “secretary” in the following locations:
   (A) 40 CFR part 262, in the appendix;
   (B) 40 CFR 266.201 and 266.210, in the definition of “director”; and
   (C) 40 CFR 270.2, in the following definitions:
      (i) “Director”; and
      (ii) “state director.” (Authorized by and implementing K.S.A. 65-3431; effective April 29, 2011.)

28-31-100e. Substitution of state terms for federal terms; engineer, environmental appeals board, EPA. When used in any provision of 40 CFR part 124, parts 260 through 266, or part 268, 270, 273, or 279, as adopted by reference by K.A.R. 28-31-124 through 28-31-279, the following substitutions shall be made unless otherwise specified in K.A.R. 28-31-124 through 28-31-279:

(a) Engineer. The following terms shall be replaced with “Kansas professional engineer”:
   (1) “[G]eotechnical engineer”;
   (2) “PE”;
   (3) “professional engineer”;
   (4) “qualified engineer”;
   (5) “qualified Professional Engineer”;
   (6) “qualified registered professional engineer”;
   (7) “qualified, registered professional engineer”; and
   (8) “registered professional engineer.”

(b) Environmental appeals board.
   (1) The term “Environmental Appeals Board” shall be replaced with “secretary.”
   (2) The term “EPA’s Environmental Appeals Board” shall be replaced with “the secretary.”

(c) Environmental protection agency.
   (1) The following terms shall be replaced with “department” or “the department” except as noted in paragraphs (2) through (6) of this subsection:
      (A) “Agency”;
      (B) “applicable EPA Regional Office, Hazardous Waste Division”;
      (C) “appropriate regional EPA office”;
      (D) “[e]nvironmental Protection Agency”;
      (E) “[e]nvironmental Protection Agency (EPA)”;
      (F) “EPA”; and
      (G) “EPA Headquarters”; and
      (H) “EPA region”.

(3) The term “directors” shall not be replaced with “secretary” in the term “Board of Directors.”
(4) The terms “Director,” “Directors,” and “State Director” shall not be replaced with “secretary” in the following locations:
   (A) 40 CFR part 262, in the appendix;
   (B) 40 CFR 266.201 and 266.210, in the definition of “director”; and
   (C) 40 CFR 270.2, in the following definitions:
      (i) “Director”; and
      (ii) “state director.” (Authorized by and implementing K.S.A. 65-3431; effective April 29, 2011.)

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(I) “EPA region or authorized state”;  
(J) “EPA regional office”;  
(K) “regulatory agency”;  
(L) “United States Environmental Protection Agency”;  
(M) “United States Environmental Protection Agency (EPA)”;
(N) “U.S. Environmental Protection Agency”; and  
(O) “U.S. Environmental Protection Agency (EPA).”

(2) The terms listed in paragraph (1) of this subsection shall not be replaced with “the department” in the following instances:  
(A) Where the term is used in an address; and  
(B) where the term is part of an EPA document name or number.

(3) The term “Agency” shall not be replaced with “the department” when used as part of the following terms in the singular or plural:  
(A) “Agency of the Federal government”;  
(B) “agency of the Federal or State government”;  
(C) “[f]ederal Agency”;  
(D) “oversight agency”; and  
(E) “[s]tate agency.”

(4) The term “Environmental Protection Agency” shall not be replaced with “the department” when used as part of the term “Environmental Protection Agency identification number.”

(5) The term “EPA” shall not be replaced with “the department” when used as part of the following terms in the singular or plural:  
(A) “EPA Acknowledgment of Consent”;
(B) “EPA Director of the Office of Solid Waste”;
(C) “EPA facility ID number”;
(D) “EPA Form”;
(E) “EPA guidance”;
(F) “EPA Hazardous Waste”;
(G) “[EPA Hazardous Waste Code”;
(H) “EPA Hazardous Waste No.”;
(I) “EPA Hazardous Waste Number”;
(J) “EPA identification number”;
(K) “EPA Manual”;
(L) “EPA Publication”;
(M) “EPA Protocol”;
(N) “EPA standard method”;
(O) “EPA test method”;
(P) “EPA waste code”; and
(Q) “U.S. EPA Identification Number.”

(6) The terms listed in paragraph (c)(1) shall not be replaced with “the department” in the following locations:  
(A) 40 CFR part 124, in the following locations:  
 (i) 124.200; and  
 (ii) 124.207;  
(B) 40 CFR 260.10, in the following definitions:  
(i) “Administrator”;  
(ii) “EPA hazardous waste number”;  
(iii) “EPA identification number”;  
(iv) “EPA region”;  
(v) “federal agency”;  
(vi) “regional administrator”; and  
(vii) “replacement unit”;  
(C) 40 CFR part 261, appendix I;  
(D) 40 CFR part 262, in the following locations:  
(i) 40 CFR 262.21;  
(ii) 40 CFR 262.32(b); and  
(iii) 40 CFR part 262, subparts E, F, and H and the appendix;  
(E) 40 CFR part 264, in the following locations:  
(i) In 40 CFR 264.151, where only the term “agency” shall not be replaced; and  
(ii) in 40 CFR 264.1082(c)(4)(ii), the second occurrence of “EPA”;  
(F) in 40 CFR 265.1083(c)(4)(ii), the second occurrence of “EPA”;  
(G) 40 CFR part 266, appendix IX, sections 4 through 9, except that the first occurrence of the term “EPA” in section 8.0 shall be replaced with “the department”;  
(H) 40 CFR 267.143;  
(I) 40 CFR part 268, in the following locations:  
(i) 40 CFR 268.1(e)(3);  
(ii) 40 CFR 268.2(j);  
(iii) 40 CFR 268.5;  
(iv) 40 CFR 268.7(e); and
 (v) 40 CFR 268.44;  
(J) 40 CFR part 270, in the following locations:  
(i) 40 CFR 270.2, in the definitions of “administrator,” “application,” “approved program or approved state,” “director,” “environmental protection agency (EPA),” “EPA,” “final authorization,” “interim authorization,” “permit,” “regional administrator,” and “state/EPA agreement”;  
(ii) 40 CFR 270.5;  
 (iii) 40 CFR 270.10(e)(2);  
(iv) 40 CFR 270.11(a)(3);  
(v) 40 CFR 270.51(d);  
(vi) 40 CFR 270.72(a)(5) and (b)(5); and  
(vii) 40 CFR 270.225; and  
(K) 40 CFR part 273, in the following locations:  
(i) 40 CFR 273.32(a)(3); and  
(ii) 40 CFR 273.52.
(d) EPA form 8700-12. The term “EPA Form 8700-12” shall be replaced with “KDHE form 8700-12.”

(e) EPA form 8700-13B. The term “EPA form 8700-13B” shall be replaced with “KDHE form 8700-13b.” (Authorized by and implementing K.S.A. 65-3431; effective April 29, 2011.)

28-31-100f. Substitution of state terms for federal terms; federal register. When used in any provision of 40 CFR part 124, parts 260 through 266, or part 268, 270, 273, or 279, as adopted by reference by K.A.R. 28-31-124 through 28-31-279, the following substitutions shall be made unless otherwise specified in K.A.R. 28-31-124 through 28-31-279:

(a) 40 CFR 266.203(c) and 266.205(e);
(b) 40 CFR 268.5(e);
(c) 40 CFR 268.6(j);
(d) 40 CFR part 268, subpart D; and
(e) 40 CFR 270.10(e)(2). (Authorized by and implementing K.S.A. 65-3431; effective April 29, 2011.)

28-31-100p. Substitution of state terms for federal terms; permitting agency or authority. When used in any provision of 40 CFR part 124, parts 260 through 266, or part 268, 270, 273, or 279, as adopted by reference by K.A.R. 28-31-124 through 28-31-279, the following substitutions shall be made unless otherwise specified in K.A.R. 28-31-124 through 28-31-279:

(a) Part B. The following phrases shall be replaced with “department” or “the department”:
(1) “[P]art B of the RCRA application”; and
(2) “RCRA part B application.”
(b) Permitting agency or authority. The following terms shall be replaced with “department” or “the department”:
(1) “[P]ermitting agency”;
(2) “permitting authority”;
(3) “permitting authority for the facility”;
(4) “permitting authority of the state or territory where the facility is located”; and
(5) “permitting authority of the state or territory where the facility(ies) is(are) located.” (Authorized by and implementing K.S.A. 65-3431; effective April 29, 2011.)

28-31-100q. Substitution of state terms for federal terms; qualified geologist, qualified soil scientist. When used in any provision of 40 CFR part 124, parts 260 through 266, or part 268, 270, 273, or 279, as adopted by reference by K.A.R. 28-31-124 through 28-31-279, the following substitutions shall be made unless otherwise specified in K.A.R. 28-31-124 through 28-31-279:

(a) Qualified geologist. The term “qualified geologist” shall be replaced with “Kansas licensed geologist.”
(b) Qualified soil scientist. The term “qualified soil scientist” shall be replaced with “Kansas licensed geologist.” (Authorized by and implementing K.S.A. 65-3431; effective April 29, 2011.)

28-31-100r. Substitution of state terms for federal terms; RCRA. When used in any provision of 40 CFR part 124, parts 260 through 266, or part 268, 270, 273, or 279, as adopted by reference by K.A.R. 28-31-124 through 28-31-279, the following substitutions shall be made unless otherwise specified in K.A.R. 28-31-124 through 28-31-279:

(a) General references to the RCRA program and subtitle C.
(1) The following terms shall be replaced with “Kansas hazardous waste program” or “the Kansas hazardous waste program” except as noted in paragraphs (2) and (3) and subsections (o) through (q):
(A) “RCRA”;
(B) “RCRA hazardous waste”;
(C) “RCRA hazardous waste management”;
(D) “RCRA program”;
(E) “RCRA subtitle C”;
(F) “[r]esource Conservation and Recovery Act”;
(G) “[r]esource Conservation and Recovery Act as amended (RCRA)”;
(H) “[r]esource Conservation and Recovery Act of 1976 as amended”;
(I) “[s]ubtitle C”;
(J) “subtitle C of RCRA”; and
(K) “subtitle C of the Resource Conservation and Recovery Act (RCRA).”
(2) The term “RCRA” shall not be replaced with “Kansas hazardous waste program” when used in the following terms, in the singular or plural:
(A) “RCRA facility ID number”;
(B) “RCRA hazardous waste code”;
(C) “RCRA ID number”;
(D) “RCRA identification number”;
(E) “non-RCRA tank”;
(F) “RCRA/Superfund Hotline’’;
(G) “RCRA waste code’’; and
(H) “RCRA Subtitle D.”

(3) The terms listed in paragraph (1) of this subsection shall not be replaced with “Kansas hazardous waste program” when used in the following locations:

(A) The parenthetical authority cited at the end of a section;
(B) 40 CFR 260.10, in the definition of “‘act’ or ‘RCRA’”;
(C) 40 CFR part 261, in the following locations:
   (i) 40 CFR 261.4(e)(2)(iv); and
   (ii) 40 CFR 261.38(c)(1)(ii);
(D) 40 CFR part 262, in the following locations:
   (i) Subpart H; and
   (ii) the appendix;
(E) 40 CFR part 266, in the following locations:
   (i) 40 CFR 266.202(d); and
   (ii) 40 CFR 266.210 and 266.240, where “RCRA hazardous waste” shall be replaced with “hazardous waste”; and
(F) 40 CFR 270.2, in the definition of “RCRA.”

(b) References to specific sections, subsections, or paragraphs of RCRA.

(1) Section 3010. The following phrases shall be replaced with “K.A.R. 28-31-4”:
   (A) “RCRA section 3010”;
   (B) “section 3010 of RCRA”;
   (C) “section 3010 of the Act”; and
   (D) “section 3010(a) of RCRA.”

(2) Section 7003. The following terms shall be replaced with “K.S.A. 65-3443 and 65-3445”:
   (A) “[S]ection 7003’’; and
   (B) “section 7003 of RCRA.”

(c) References to RCRA and subtitle C facilities and disposal units.

(1) The term “RCRA hazardous waste land disposal unit” shall be replaced with “Kansas hazardous waste land disposal unit.”

(2) The term “RCRA hazardous waste management facility” shall be replaced with “Kansas hazardous waste management facility.”

(3) The term “Subtitle C landfill cell” shall be replaced with “Kansas hazardous waste landfill cell.”

(4) The term “Subtitle C monofill” shall be replaced with “Kansas hazardous waste monofill.”

(d) References to permits. The following substitutions shall apply in the singular and plural:

(1) The following phrases shall be replaced with “Kansas hazardous waste facility permit” except as noted in paragraph (d)(2):
   (A) “Permit issued under section 3005 of this act’’;
   (B) “permit under RCRA 3005(c)”;
   (C) “permit under RCRA section 3005(c)”;
   (D) “permit under section 3005 of this act’’;
   (E) “RCRA hazardous waste permit’’;
   (F) “RCRA operating permit’’;
   (G) “RCRA permit’’;
   (H) “RCRA permit under RCRA section 3005(c)”;
   (I) “RCRA, UIC, or NPDES permit’’;
   (J) “RCRA, UIC, PSD, or NPDES permit’’; and
   (K) “[s]tate RCRA permit.”

(2) In 40 CFR 270.51(d), the first occurrence of the phrase “RCRA permit” shall not be replaced with “Kansas hazardous waste facility permit.”

(3) The phrase “RCRA-permitted” shall be replaced with “Kansas-permitted.”

(4) The following phrases shall be replaced with “Kansas hazardous waste facility standardized permit”:
   (A) “RCRA standardized permit”; and
   (B) “RCRA standardized permit (RCRA).”

(5) The phrase “a final permit under RCRA section 3005” shall be replaced with “a final permit issued by EPA under RCRA section 3005 or a Kansas hazardous waste facility permit” in the following locations:
   (A) 40 CFR 264.1030(c);
   (B) 40 CFR 264.1050(c);
   (C) 40 CFR 264.1080(c); and
   (D) 40 CFR 265.1080(c). (Authorized by and implementing K.S.A. 65-3431; effective April 29, 2011.)

28-31-100s. Substitution of state terms for federal terms; state. When used in any provision of 40 CFR part 124, parts 260 through 266, or part 268, 270, 273, or 279, as adopted by reference by K.A.R. 28-31-124 through 28-31-279, the following substitutions shall be made unless otherwise specified in K.A.R. 28-31-124 through 28-31-279:

(a) The following terms when used in the singular shall be replaced with “state of Kansas” or “the state of Kansas” except as noted in subsections (b) and (c):
   (1) “State” and “a State” when referring to a political entity;
   (2) “approved State” and “an approved State”; and
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“authorized State” and “an authorized State.”

(b) The term “State” shall not be replaced when used in the following terms in the singular or plural:

1. “Agreement State”;
2. “[s]tate agency.”

(c) The terms listed in subsection (a) shall not be replaced in the following locations:

1. 40 CFR 124.207(a)(3);
2. 40 CFR 260.10, in the following definitions:
   A. “Designated facility”;
3. “explosives or munitions emergency response specialist”;
4. “person”;
5. “publicly owned treatment works”; and
6. “state”;
7. 40 CFR part 261, in the following definitions:
   A. “Designated facility”;
7. “explosives or munitions emergency response specialist”;
8. “state”;
9. 40 CFR part 265, in the following locations:
    A. 40 CFR 265.71(e); and
    B. 40 CFR 265.147;
10. 40 CFR 266.210, in the following definitions:
    A. “Agreement state”;
    B. “naturally occurring and/or accelerator-produced radioactive material (NARM)”;
11. 40 CFR part 267, subparts C, D, and H;
12. 40 CFR part 270, in the following locations:
    A. 40 CFR 270.2, in the following definitions:
        i. “Approved program or approved state”;
        ii. “director”;
    iii. “final authorization”;
    iv. “interim authorization”;
    v. “person”;
    vi. “POTW”;
    vii. “state”;
13. 40 CFR 273.14(c)(1)(ii), where only the term “approved State” shall not be replaced;

28-31-124. Procedures for permitting; adoption and modification of federal regulations. (a) Adoption. The provisions of 40 CFR 124.11 through 124.17 and 40 CFR part 124, subparts B and G, as in effect on July 1, 2006, are hereby adopted by reference subject to the following:

1. The substitution of terms listed in K.A.R. 28-31-100 through 28-31-100s;
2. the exclusions from adoption listed in subsection (b); and
3. the modifications listed in subsection (c).

(b) Exclusions. The following portions of 40 CFR 124.12 through 124.17 and 40 CFR part 124, subpart G shall be excluded from adoption:

1. 40 CFR 124.12(b);
2. 40 CFR 124.16(b)(2);
3. 40 CFR 124.17(b);
4. 40 CFR 124.204(d)(1), (4) through (7), and (9); and
5. 40 CFR 124.205(a), (c), and (i) through (l).

(c) Modifications. The following modifications shall be made to 40 CFR 124.11 through 124.17 and 40 CFR part 124, subparts B and G:

1. Each occurrence of the term “decisionmaking” shall be replaced with “permitting.”
2. Each parenthetical statement starting with “Applicable to State programs” shall be deleted.
3. In 40 CFR 124.11, the text “or the permit application for 404 permits when no draft permit is required (see § 233.39)” shall be deleted.
4. In 40 CFR 124.12(a)(3), the phrase “For RCRA permits only,” shall be deleted.
5. In 40 CFR 124.13, the term “EPA documents” shall be replaced with “EPA or department documents.”
6. The first sentence of 40 CFR 124.14(a)(4) shall be deleted.
7. In 40 CFR 124.14(b)(2), the phrase “a revised statement of basis under § 124.7,” shall be deleted.
8. The following text shall be added to the end of 40 CFR 124.15(b)(2): “by a person who filed comments on the draft permit or participated in the public hearing through written or oral comments. Stays of contested permit conditions are subject to § 124.16.”
9. In 40 CFR 124.16(a)(1), the following text shall be deleted:
(A) "(No stay of a PSD permit is available under this section.)";
(B) "or new injection well, new source, new discharger or a recommencing discharger"; and
(C) "injection well, source or discharger pending final agency action. See also § 124.60."

(10) In 40 CFR 124.16(a)(2)(i), the following text shall be deleted:
(A) "injection wells, and sources"; and
(B) "injection well, or source."

(11) In 40 CFR 124.16(a)(2)(ii), the following text shall be deleted:
(A) "Receiving notification from the EAB of";
(B) "the EAB,"; and
(C) "for NPDES permits only, the notice shall comply with the requirements of § 124.60(b)."

(12) In 40 CFR 124.16(b), the text "and he or she has accepted each appeal" shall be deleted.

(13) In 40 CFR 124.17(a), the text "States are" shall be replaced with "The department is."

(14) In 40 CFR 124.17(a)(2), the phrase "or the permit application (for section 404 permits only)" shall be deleted.

(15) In 40 CFR 124.31(a), 124.32(a), and 124.33(a), the following sentence shall be deleted:
"For the purposes of this section only, 'hazardous waste management units over which EPA has permit issuance authority' refers to hazardous waste management units for which the State where the units are located has not been authorized to issue RCRA permits pursuant to 40 CFR part 271."

(16) In 40 CFR 124.204(d)(3), the sentence shall be replaced with "All subsections shall apply."

(17) In 40 CFR 124.205(d), the text "(b)," shall be deleted.

(18) In 40 CFR 124.208(e), the phrase "§ 124.12(b), (c), and (d)" shall be replaced with "§ 124.12(c) and (d)." (Authorized by K.S.A. 65-3431; implementing K.S.A. 65-3431, 65-3433, and 65-3437; effective April 29, 2011.)

28-31-124a. Procedures for permitting; application for a permit. Each reference in this regulation to 40 CFR part 270 shall mean 40 CFR part 270 as adopted by reference in K.A.R. 28-31-270. (a) Each person that is required to have a Kansas hazardous waste facility permit, as specified in 40 CFR part 270, K.S.A. 65-3433 and amendments thereto, or K.S.A. 65-3437 and amendments thereto, shall submit a completed, signed application to the department.

(b) Before submitting the application, the applicant shall submit to the department a disclosure statement that contains all information necessary for the secretary to conduct the background investigation required by K.S.A. 65-3437, and amendments thereto.

(1) The disclosure statement shall be submitted on forms provided by the department.

(2) If there is a parent company, the parent company shall submit a separate disclosure statement to the department on forms provided by the department.

(c) The application shall be reviewed by the department after the applicant has fully complied with the requirements of 40 CFR 270.10 and 270.13.

(d) The application signature and certification shall meet the requirements of 40 CFR 270.11.

(B) The permittee requests a modification in accordance with 40 CFR 270.42(c).

(2) The draft permit shall be prepared by the department according to the following criteria:
(A) The draft permit shall incorporate the proposed changes.
(B) Additional information from the permittee may be requested by the secretary.
(C) If a permit is modified, the permittee may be required by the secretary to submit an updated application.
(D) If a permit is revoked and reissued for a cause not listed in 40 CFR 270.41(b)(3), the permittee shall submit a new application to the department.
(E) If a permit is revoked and reissued in accordance with 40 CFR 270.41(b)(3), the requirements in 40 CFR part 124, subpart G for standardized permits shall be met by the secretary and the permittee.

(3) If a permit is modified, only those conditions to be modified shall be reopened by the department when a new draft permit is prepared. All other aspects of the existing permit shall remain in effect for the duration of the unmodified permit.

(4) If a permit is revoked and reissued, the entire permit shall be reopened by the department as if the permit had expired and was being reissued. During the revocation and reissuance proceedings, the permittee shall comply with all conditions of the existing permit until a new final permit is reissued.

(5) “Class 1 modifications” and “Class 2 modifications,” as defined in 40 CFR 270.42(a) and (b), shall not be subject to the requirements of this regulation.

(d) Termination of permit. If the secretary tentatively decides to terminate a permit in accordance with 40 CFR 270.43 and the permittee objects, a notice of intent to terminate shall be issued by the secretary. Each notice of intent to terminate shall be deemed a type of draft permit and shall be subject to the procedures specified in K.A.R. 28-31-124c and in K.S.A. 65-3440 and amendments thereto. (Authorized by K.S.A. 65-3431; implementing K.S.A. 65-3431, 65-3437, and 65-3439; effective April 29, 2011.)

28-31-124c. Procedures for permitting; draft permits. Each reference in this regulation to a federal regulation shall mean that federal regulation as adopted by reference in K.A.R. 28-31-124 through 28-31-279. (a) Each permit application shall be reviewed by the secretary to determine compliance with the requirements of the hazardous waste regulations.

(b) If the permit application does not meet the requirements of this article, the application shall be denied by the secretary.

(c) If the application meets the requirements of this article, a draft permit shall be prepared by the secretary according to the following criteria:
(1) The draft permit shall contain the following information:
(A) All conditions specified in 40 CFR 270.30 and 270.32;
(B) all compliance schedules specified in 40 CFR 270.33;
(C) all monitoring requirements specified in 40 CFR 270.31; and
(D) standards for treatment, storage, or disposal, or any combination of these activities, and other permit conditions under 40 CFR 270.30.

(2) The draft permit shall be accompanied by a fact sheet that meets the requirements of K.A.R. 28-31-124d.

(3) Public notice shall be given as specified in K.A.R. 28-31-124e.

(4) The draft permit shall be made available for public comment as specified in 40 CFR 124.11.

(5) Notice of opportunity for a public hearing shall be given as specified in 40 CFR 124.12.

(d) A final decision to issue the permit shall be issued by the secretary if the findings of fact show that the facility or activity will be protective of human health and safety and the environment. A final decision to deny the permit shall be issued by the secretary if the findings of fact show that the facility or activity will not be protective of human health and safety and the environment.

(e) A response to comments shall be issued by the secretary in accordance with 40 CFR 124.17.

(f) Any person may appeal the decision in accordance with K.S.A. 65-3440 and K.S.A. 65-3456a(b), and amendments thereto. (Authorized by K.S.A. 65-3431; implementing K.S.A. 65-3431, 65-3433, 65-3437, and 65-3439; effective April 29, 2011.)

28-31-124d. Procedures for permitting; fact sheet. A fact sheet for each draft permit shall be prepared and distributed by the department according to the following requirements:
(a) The fact sheet shall be sent by the depart-
ment to the applicant and to each person who requests the fact sheet.

(b) The fact sheet shall briefly describe the principal facts and the significant factual, legal, methodological, and policy questions considered in preparing the draft permit.

(c) The fact sheet shall include the following information:

(1) A brief description of the type of facility or activity that is the subject of the draft permit;

(2) the type and quantity of wastes, fluids, or pollutants that are proposed to be or are being treated, stored, disposed of, injected, emitted, or discharged;

(3) the reasons why each requested variance or alternative to required standards do or do not appear justified;

(4) a description of the procedures for reaching a final decision on the draft permit, including the following information:
   (A) The beginning and ending dates of the comment period as specified in K.A.R. 28-31-124e and the address where comments will be received;
   (B) the procedures for requesting a hearing and the nature of that hearing; and
   (C) all other procedures by which the public may participate in the final decision; and

(5) the name and telephone number of a person to contact for additional information. (Authorized by and implementing K.S.A. 65-3431; effective April 29, 2011.)

28-31-124e. Procedures for permitting; public notice of permit actions and public comment period. Public notices shall be given by the department according to the following criteria:

(a) A public notice shall be given if one or more of the following actions have occurred:

   (1) A permit application has been tentatively denied under K.A.R. 28-31-124c.

   (2) A draft permit has been prepared under K.A.R. 28-31-124c.

   (3) A hearing has been scheduled under 40 CFR 124.12, as adopted by reference in K.A.R. 28-31-124.

(b) No public notice shall be required if a request for permit modification, revocation and reissuance, or termination is denied under K.A.R. 28-31-124b. Written notice of the denial shall be provided by the department to the person who made the request and to the permittee.

(c) The public notice may describe more than one permit or permit action.

(d) The public notice shall be given in accordance with the following time frames:

(1) The public notice of the preparation of a draft permit, including a notice of intent to deny a permit application, required under subsection (a) shall allow at least 45 days for public comment.

(2) The public notice of the public hearing shall be given at least 30 days before the hearing.

(3) The public notice of the hearing may be given at the same time as the public notice of the draft permit and the two notices may be combined.

(e) Public notice of the activities described in subsection (a) shall be given using the following methods:

   (1) Mailing a copy of the notice to the following persons, except to any person that has waived the right to receive notices for the class or category of the permit described in the notice:

      (A) The applicant;

      (B) each agency that has issued or is required to issue a permit for the same facility or activity, including EPA;

      (C) all federal and state agencies with jurisdiction over fish, shellfish, or wildlife resources, the advisory council on historic preservation, state historic preservation officers, and all affected states and Indian tribes;

      (D) each person on the mailing list, which shall be developed by the department using the following methods:

         (i) Each person who requests in writing to be on the mailing list shall be added to the mailing list;

         (ii) participants in past proceedings in that area shall be solicited for inclusion on the mailing list;

         (iii) the public shall be notified of the opportunity to be put on the mailing list through periodic publication in the public press and in publications which may include regional and state-funded newsletters, environmental bulletins, and state law journals; and

         (iv) the mailing list may be updated by the department by requesting written indication of continued interest from persons on the list. The name of any person who fails to respond to such a request may be deleted from the list by the department;

      (E) each unit of local government having jurisdiction over the area where the facility is proposed to be located; and
(F) each state agency having any authority under state law with respect to the construction or operation of the facility;
(2) publishing a notice in the official newspaper of the county in which the facility is located or proposed to be located or, if there is no official county newspaper, a newspaper published as provided in K.S.A. 64-101, and amendments thereto;
(3) broadcasting over local radio stations;
(4) giving notice in a manner constituting legal notice to the public under state of Kansas law; and
(5) using any other method chosen by the department to give notice of the action in question to the persons potentially affected by it, including press releases or any other forum or medium to elicit public participation.

(f) Each public notice shall contain the following information:
(1) The name and address of the office processing the permit;
(2) the name and address of the permittee or the permit applicant and, if different, of the facility or activity regulated by the permit;
(3) a brief description of the business conducted at the facility or the activities described in the permit application or the draft permit;
(4) the name, address, and telephone number of a person from whom interested persons may obtain further information, including copies of the draft permit, the fact sheet, and the application;
(5) a brief description of the comment procedures required by 40 CFR 124.11 and 124.12, as adopted by reference in K.A.R. 28-31-124;
(6) the time and place of each hearing that has been scheduled;
(7) a statement of the procedures to request a hearing, unless a hearing has already been scheduled;
(8) all other procedures required for public participation in the final permit decision;
(9) the times when the record will be open for public inspection and a statement that all data submitted by the applicant is available as part of the administrative record; and
(10) any additional information necessary to allow full public participation in the final permit decision.

(g) The public notice of each hearing held pursuant to 40 CFR 124.12, as adopted by reference in K.A.R. 28-31-124, shall contain all of the information described in subsection (f) of this regulation plus the following information:

(1) Reference to the date of previous public notices relating to the permit;
(2) the date, time, and place of the hearing; and
(3) a brief description of the nature and purpose of the hearing, including the rules and procedures.

(h) In addition to the general public notice described in subsection (f), a copy of each of the following documents shall be mailed by the department to all persons identified in paragraphs (e)(1)(A) through (D):
(1) The fact sheet; and
(2) the permit application or the draft permit.
(Authorized by K.S.A. 65-3431; implementing K.S.A. 65-3431 and 65-3433; effective April 29, 2011.)

28-31-260. General provisions and definitions; adoption and modification of federal regulations. (a) Adoption. The provisions of 40 CFR part 260, as in effect on July 1, 2006, are hereby adopted by reference subject to the following:
(1) The substitution of terms listed in K.A.R. 28-31-100 through 28-31-100s;
(2) the exclusions from adoption listed in subsection (b); and
(3) the modifications listed in subsection (c).

(b) Exclusions. The following portions of 40 CFR part 260 shall be excluded from adoption:
(1) All comments and all notes;
(2) 40 CFR 260.1;
(3) in 40 CFR 260.10, the definition of “performance track member facility”;
(4) 40 CFR 260.11;
(5) 40 CFR 260.20 through 260.23;
(6) 40 CFR 260.40 and 260.41; and
(7) appendix I.

(c) Modifications. The following modifications shall be made to 40 CFR part 260:
(1) The text of 40 CFR 260.2 shall be replaced with the following: “The Kansas open records act and K.S.A. 65-3447 shall apply to all information provided to the department.”
(2) The following definitions in 40 CFR 260.10 shall be modified as follows:
(A) The definition of “existing tank system or existing component” shall be modified by replacing “on or prior to July 14, 1986” with “on or before July 14, 1986 for HSWA tanks and on or before May 1, 1987 for non-HSWA tanks.”
(B) The definition of “facility” shall be modified
by deleting the phrase “under RCRA Section 3008(h).”

(C) The definition of “new tank system or new tank component” shall be modified by replacing both occurrences of “July 14, 1986” with “July 14, 1986 for HSWA tanks and May 1, 1987 for non-HSWA tanks.”

(D) The definition of “qualified ground-water scientist” shall be replaced with the following definition: “qualified ground-water scientist” means a licensed geologist or professional engineer who has sufficient training and experience in ground-water hydrology and related fields. Sufficient training may be demonstrated by a professional certification or by the completion of an accredited university program that enables the individual to make sound professional judgments regarding groundwater monitoring, contaminant fate and transport, and corrective action.”

(E) The definition of “small quantity generator” shall be replaced by the following definition: “small quantity generator” means a generator who meets all of the following criteria:

(i) Generates more than 100 kilograms (220 pounds) of hazardous waste in any single calendar month;

(ii) generates less than 1,000 kilograms (2,200 pounds) of hazardous waste in any single calendar month;

(iii) generates and accumulates acutely hazardous waste and other waste listed in 40 CFR 261.5(e) in quantities less than the generation limits listed in 40 CFR 261.5(e).”

(d) Differences between state and federal definitions. If the same term is defined differently both in K.S.A. 65-3430 et seq. and amendments thereto or this article and in any federal regulation adopted by reference in this article, the definition prescribed in the Kansas statutes or regulations shall control, except for the term “solid waste.”

(2) “HSWA drip pad” means a drip pad associated with the handling of waste designated as F032 waste in 40 CFR 261.31.

(3) “HSWA tank” means any of the following tanks:

(A) A tank owned or operated by a generator of less than 1,000 kilograms (2200 pounds) of hazardous waste in any single calendar month;

(B) a new underground tank; or

(C) an existing underground tank that cannot be entered for inspection.

(4) “Kansas hazardous waste facility permit” means a permit issued under the Kansas hazardous waste program.

(5) “Kansas hazardous waste program” means the hazardous waste management program operated by the state of Kansas in lieu of the U.S. environmental protection agency, authorized by and implementing K.S.A. 65-3430 et seq. and amendments thereto.

(6) “Kansas licensed geologist” means a person who has a current license to practice geology from the state board of technical professions pursuant to K.S.A. 74-7001 et seq., and amendments thereto.

(7) “Kansas professional engineer” means a person who has a current license to practice engineering from the state board of technical professions pursuant to K.S.A. 74-7001 et seq., and amendments thereto.

(8) “Kansas small quantity generator” means a generator that meets all of the following criteria:

(A) Generates 25 kilograms (55 pounds) or more of hazardous waste in any single calendar month;

(B) generates no more than 100 kilograms (220 pounds) of hazardous waste in any single calendar month; and

(C) generates and accumulates acutely hazardous waste and other waste listed in 40 CFR 261.5(e) in quantities less than the generation limits listed in 40 CFR 261.5(e).”

(9) “Large quantity generator” means a generator who meets either or both of the following criteria:

(A) Generates 1,000 kilograms (2,200 pounds)
or more of hazardous waste in any single calendar month; or
(B) generates or accumulates acutely hazardous waste and other waste listed in 40 CFR 261.5(e) in quantities equal to or greater than the generation limits listed in 40 CFR 261.5(e).


11. “Non-HSWA tank” means any tank except the following tanks:
(A) Tanks owned or operated by a generator of less than 1,000 kilograms (2,200 pounds) of hazardous waste in any single calendar month;
(B) new underground tanks; and
(C) existing underground tanks that cannot be entered for inspection.

(b) Differences between state and federal definitions. If the same term is defined differently both in K.S.A. 65-3430 et seq. and amendments thereto or this article and in any federal regulation adopted by reference in this article, the definition prescribed in the Kansas statutes or regulations shall control, except for the term “solid waste.” (Authorized by K.S.A. 65-3431; implementing K.S.A. 65-3431 and 65-3451; effective April 29, 2011.)

28-31-261. Identification and listing of hazardous waste; adoption and modification of federal regulations. (a) Adoption. The provisions of 40 CFR part 261, including appendices I, VII, and VIII, as in effect on July 1, 2006, are hereby adopted by reference subject to the following:
(1) The substitution of terms listed in K.A.R. 28-31-100 through 28-31-100s;
(2) the exclusions from adoption listed in subsection (b); and
(3) the modifications listed in subsection (c).

(b) Exclusions. The following portions of 40 CFR part 261 shall be excluded from adoption:
(1) All comments and all notes;
(2) 40 CFR 261.4(b)(16) through (18); and
(3) 40 CFR 261.6(a)(2)(v).

(c) Modifications. The following modifications shall be made to 40 CFR part 261:
(1) Each occurrence of the following phrases shall be deleted:
(A) “(incorporated by reference, see § 260.11)”;
(B) “, as incorporated by reference in § 260.11 of this chapter.”
(C) “, as incorporated by reference in § 260.11 of this chapter.”
(2) In 40 CFR 261.1(b)(2), the phrase “under sections 3007, 3013, and 7003 of RCRA” shall be deleted.
(3) In 40 CFR 261.1(b)(2)(i), the following replacements shall be made:
(B) The phrase “section 1004(27) of RCRA” shall be replaced with “40 CFR 261.2.”
(C) The phrase “section 1004(5) of RCRA” shall be replaced with “K.S.A. 65-3430.”
(4) In 40 CFR 261.4(e)(3)(iii), the text “in the Region where the sample is collected” shall be deleted.
(5) 40 CFR 261.5(a) shall be replaced by the definition of “conditionally exempt small quantity generator” in K.A.R. 28-31-260a.
(6) In 40 CFR 261.5(e), (f)(2), and (g)(2), the phrases “that acute hazardous waste” and “those accumulated wastes” shall be replaced with the phrase “the generator’s hazardous waste and acute hazardous waste.”
(7) In 40 CFR 261.5(g), the phrase “100 kilograms” shall be replaced with the phrase “25 kilograms (55 pounds).”
(8) In 40 CFR 261.5(g)(2), the phrase “generators of between 100 kg and 1000 kg of hazardous waste in a calendar month” shall be replaced with the phrase “small quantity generators.”
(9) In 40 CFR 261.5(g)(3), the phrase “or ensure delivery” shall be replaced with “or, subject to the restrictions of K.A.R. 28-31-262a, ensure delivery.”
(10) In 40 CFR 261.21(a)(3), the phrase “an ignitable compressed gas as defined in 49 CFR 173.300” shall be replaced with the phrase “a flammable gas as defined in 49 CFR 173.115(a).”
(11) In 40 CFR 261.21(a)(4), the phrase “49 CFR 173.151” shall be replaced with “49 CFR 173.127(a).”
(12) 40 CFR 261.23(a)(8) shall be replaced with the following: “It is a forbidden explosive as defined in 49 CFR 173.54, or it is a division 1.1, 1.2, or 1.3 explosive, as defined in 49 CFR 173.50 and 173.53.”
(13) In 40 CFR 261.33(e), the text “be the small quantity exclusion defined in” shall be deleted.
(14) In 40 CFR 261.33(f), the phrase “the small quantity generator exclusion defined in” shall be deleted.
(15) In 40 CFR 261.38(c)(1)(i), the introductory paragraph shall be replaced with “Notice to the secretary.”

(16) In 40 CFR part 261, appendix VII, the entries in both columns for “K064,” “K065,” “K066,” “K090,” and “K091” shall be deleted. (Authorized by and implementing K.S.A. 65-3431; effective April 29, 2011.)


28-31-262. Generators of hazardous waste; adoption and modification of federal regulations. (a) Adoption. The provisions of 40 CFR part 262, including the appendix, as in effect on July 1, 2006, are hereby adopted by reference subject to the following:

(1) The substitution of terms listed in K.A.R. 28-31-100 through 28-31-100s;
(2) the exclusions from adoption listed in subsection (b); and
(3) the modifications listed in subsection (c).

(b) Exclusions. The following portions of 40 CFR part 262 shall be excluded from adoption:

(1) All comments and all notes, except in the appendix;
(2) 40 CFR 262.10(j) and (k);
(3) 40 CFR 262.34(g) through (l);
(4) 40 CFR 262.89(e); and
(5) subparts I and J.

(c) Modifications. The following modifications shall be made to 40 CFR part 262:

(1) In 40 CFR 262.10(g), the phrase “and K.S.A. 65-3441(b) and (c) and 65-3444 through 65-3446” shall be inserted after the phrase “section 3008 of the Act.”
(2) 40 CFR 262.11(c)(1) shall be replaced with the following text: “Submitting the waste for testing according to the methods in 40 CFR part 261, subpart C, by a laboratory that is certified for these analyses by the department; or.”
(3) The first paragraph in 40 CFR 262.20(e) shall be replaced with the following text: “The requirements of this subpart do not apply to hazardous waste produced by Kansas small quantity generators and small quantity generators if all of the following criteria are met.”
(4) In 40 CFR 262.27(b), the phrase “or a Kansas small quantity generator” shall be inserted at the end of the first sentence.
(5) In 40 CFR 262.34(a)(2), the phrase “and tank” shall be inserted after the phrase “each container.”
(6) In 40 CFR 262.34(c)(1), the text “A generator may accumulate as much as 55 gallons of hazardous waste or one quart of acutely hazardous waste listed in § 261.33(e) in containers” shall be replaced with the following text: “Any generator may accumulate 55 gallons or less, in no more than one container, of each type of hazardous waste and one quart or less, in no more than one container, of each type of acutely hazardous waste listed in § 261.33(e).”
(7) 40 CFR 262.34(c)(1)(ii) shall be replaced with the following text: “Marks the containers with the words ‘Hazardous Waste.’”
(8) At the end of 40 CFR 262.34(d)(5)(ii)(C), the following text shall be inserted as new subparagraph (D): “If the generator relies solely on cell phones, the generator shall meet the following requirements: (1) Post the information addressed by subparagraphs (A) through (C) on walls so that they can be readily seen by employees; (2) train all employees that manage hazardous waste on the locations of these postings; and (3) program the telephone numbers into the cell phones of management personnel.”
(9) In 40 CFR 262.42(b), the phrase “greater than 100 kilograms” shall be replaced with the phrase “25 kilograms or more.”
(10) In 40 CFR 262.43, the text “as he deems necessary under sections 2002(a) and 3002(6) of the Act,” shall be deleted.
(11) In 40 CFR 262.44, the following modifications shall be made:

(A) In the title, the number “100” shall be replaced with the number “25.”
(B) In the first paragraph, the phrase “greater than 100 kilograms” shall be replaced with the phrase “25 kilograms or more.” (Authorized by K.S.A. 65-3431; implementing K.S.A. 65-3431 and 65-3451; effective April 29, 2011.)


(a) Transportation requirements.

(1) Each generator that transports hazardous waste shall comply with K.A.R. 28-31-263a.
(2) Each generator that uses another person to transport hazardous waste shall use only a transporter who has registered with the department in accordance with K.A.R. 28-31-6.

(b) Reporting requirements. Each generator of hazardous waste, except conditionally exempt small quantity generators (CESQGs), shall submit a report to the department that indicates whether the generator is a large quantity generator (LQG), a small quantity generator (SQG), or a Kansas small quantity generator (KSQG). The generator shall comply with the following requirements:

(1) Submit the report on a form provided by the department;

(2) submit the monitoring fee required by K.A.R. 28-31-10 with the report;

(3) submit the report according to the following schedule:

(A) Each LQG report shall be due on or before March 1 of each year that the biennial report is not required;

(B) each SQG report shall be due on or before April 1 of each year; and

(C) each KSQG report shall be due on or before April 1 of each year;

(4) keep a copy of each report for at least three years after the date of the signature on the report.

(c) Additional requirement for LQGs. Each LQG shall comply with 40 CFR 265.15(d).

(d) Additional requirements for SQGs.

(1) In addition to meeting the requirements of 40 CFR 262.34(d)(5)(iii), each SQG shall meet the following requirements:

(A) Provide the training to each employee no more than six months after the employee is hired or transferred to a new position;

(B) repeat the training at least annually;

(C) record the name of each employee, the date of the training, and the topics covered in the training;

(D) keep training records for each employee that has received the training for at least three years from the date of the training. Training records may accompany personnel transferred within the same company.

(2) Each SQG shall comply with the following regulations:

(A) 40 CFR 265.15(d);

(B) 40 CFR 265.111(a) and (b); and

(C) 40 CFR 265.114.

(e) Additional requirements for KSQGs.

(1) In the waste minimization certification found in item 15 of the uniform hazardous waste manifest, the phrase “small quantity generator” shall include KSQGs.

(2) Each KSQG shall inspect each area where one or more hazardous waste containers are stored at least once every 31 days and shall look for deterioration and leaks.

(3) Each KSQG shall comply with the following regulations:

(A) 40 CFR part 262, subpart A;

(B) 40 CFR part 262, subpart B, except KSQGs that are exempt from the transporter requirements of K.A.R. 28-31-263a;

(C) 40 CFR 262.30 through 262.33;

(D) 40 CFR 262.34(a)(2) and (3), (c), and (d)(5);

(E) 40 CFR 262.44;

(F) 40 CFR part 262, subparts E through H;

(G) 40 CFR 265.15(d);

(H) 40 CFR part 265, subpart C;

(I) 40 CFR 265.171 through 265.173 and 265.177;

(J) 40 CFR 265.201; and

(K) 40 CFR 268.7(a)(5).  

(4) In addition to meeting the requirements of 40 CFR 262.34(d)(5)(iii), each KSQG shall meet the following requirements:

(A) Provide the training to each employee no more than six months after the employee is hired or transferred to a new position;

(B) repeat the training at least annually;

(C) record the name of each employee, the date of the training, and the topics covered in the training;

(D) keep training records for each employee that has received the training for at least three years from the date of the training. Training records may accompany personnel transferred within the same company.

(5) Each KSQG that accumulates more than 1,000 kilograms (2,200 pounds) of hazardous waste shall comply with all of the requirements for SQGs.

(f) Additional requirements for CESQGs.

(1) No person shall send CESQG hazardous waste to a construction and demolition landfill located in Kansas.

(2) Each CESQG that accumulates 25 kilograms (55 pounds) or more of hazardous waste shall comply with all of the following requirements:

(A) The CESQG shall inspect each area where one or more hazardous waste containers are
stored at least once every 31 days looking for deterioration and leaks.

(B) If the CESQG sends 25 kilograms (55 pounds) or more of hazardous waste at any one time to an off-site facility in Kansas, that waste shall be sent only to one of the following facilities:

(i) A Kansas household hazardous waste facility that has a permit issued by the secretary and is approved by the secretary to accept CESQG waste; or

(ii) a disposal facility that meets the requirements of 40 CFR 261.5(g)(3)(i), (ii), (iii), or (vii).

(C) The CESQG shall comply with the following regulations:

(i) 40 CFR 262.30 through 262.33;

(ii) 40 CFR 262.34(a)(2) and (3);

(iii) 40 CFR 265.15(d);

(iv) 40 CFR 265.171 through 265.173 and 265.177; and

(v) 40 CFR 265.201, if 25 kilograms (55 pounds) or more of hazardous waste is accumulated in one or more tanks. (Authorized by K.S.A. 65-3431; implementing K.S.A. 65-3431 and 65-3451; effective April 29, 2011.)

28-31-263. Transporters of hazardous waste; adoption and modification of federal regulations. (a) Adoption. The provisions of 40 CFR part 263, as in effect on July 1, 2006, are hereby adopted by reference subject to the following:

(1) The substitution of terms listed in K.A.R. 28-31-100 through 28-31-100s;

(2) the exclusions from adoption listed in subsection (b); and

(3) the modifications listed in subsection (c).

(b) Exclusions. All notes shall be excluded from adoption.

(c) Modifications. The following modifications shall be made to 40 CFR part 263:

(1) In 40 CFR 263.10(a), the following modifications shall be made:

(A) The phrase “the United States” shall be replaced with “Kansas.”

(B) The phrase “or K.A.R. 28-31-262a” shall be inserted at the end of the sentence.

(2) In 40 CFR 263.20(h), the phrase “greater than 100 kilograms” shall be replaced with “25 kilograms (55 pounds) or more.” (Authorized by K.S.A. 65-3431; implementing K.S.A. 65-3431 and 65-3451; effective April 29, 2011.)


(a) Applicability. Each person that transports hazardous waste within, into, out of, or through Kansas shall comply with this regulation, except Kansas small quantity generators (KSEQGs) and conditionally exempt small quantity generators (CESQGs) that meet the following conditions:

(1) The generator is transporting the generator’s own hazardous waste to a household hazardous waste (HHW) facility that meets one of the following conditions:

(A) If the generator is a KSQG, the HHW facility is permitted to accept KSQG waste.

(B) If the generator is a CESQG, the HHW facility is permitted to accept CESQG waste.

(2) The generator obtains a receipt for each load of hazardous waste delivered to the HHW facility.

(3) The generator keeps a copy of each receipt for a minimum of three years after the date of delivery.

(b) Registration and insurance. Each transporter of hazardous waste shall comply with the requirements of K.A.R. 28-31-6.

(c) Transportation restrictions. Each transporter shall transport hazardous waste only for hazardous waste generators and facilities that are in compliance with the requirement to obtain an EPA identification number for the state in which the generator or facility is located.

(d) Routing restrictions.

(1) Each transporter of hazardous waste shall ensure that each vehicle containing hazardous waste is operated over a preferred route that minimizes risk to public health and safety and the environment. To select a preferred route, the transporter shall consider the following information, if available:

(A) Accident rates;

(B) the transit time;

(C) population density and activities; and

(D) the day of the week and the time of day during which transportation will occur.

(2) Each transporter shall confine the transportation of hazardous wastes to preferred routes. Unless notice to the contrary is published in the Kansas register, all portions of the major highway system may be used. For the purposes of this subsection, the major highway system shall be considered to be all interstate routes, U.S. highways, state highways, and temporary detours designated
by the Kansas department of transportation. An interstate system bypass or beltway around a city shall be used when available.

(3) Any transporter of hazardous waste may deviate from a preferred route under any of the following circumstances:

(A) Emergency conditions that make continued use of the preferred route unsafe;
(B) rest, fuel, and vehicle repair stops; or
(C) deviations that are necessary to pick up, deliver, or transfer hazardous wastes. (Authorized by K.S.A. 65-3431; implementing K.S.A. 65-3431 and 65-3451; effective April 29, 2011.)

28-31-264. Hazardous waste treatment, storage, and disposal facilities; adoption and modification of federal regulations. (a) Adoption. The provisions of 40 CFR part 264, including appendices I, IV, V, VI, and IX, as in effect on July 1, 2006, are hereby adopted by reference subject to the following:

(1) The substitution of terms listed in K.A.R. 28-31-100 through 28-31-100s;
(2) the exclusions from adoption listed in subsection (b); and
(3) the modifications listed in subsection (c).

(b) Exclusions. The following portions of 40 CFR part 264 shall be excluded from adoption:

(1) All comments and all notes;
(2) 40 CFR 264.1(f) and (g)(12);
(3) 40 CFR 264.15(b)(5);
(4) 40 CFR 264.149 and 264.150;
(5) 40 CFR 264.195(e);
(6) 40 CFR 264.301(l);
(7) 40 CFR 264.1030(d);
(8) 40 CFR 264.1050(g); and
(9) 40 CFR 264.1080(e), (f), and (g).

(c) Modifications. The following modifications shall be made to 40 CFR part 264:

(1) Each occurrence of the following text shall be deleted:
(A) “(incorporated by reference, see § 260.11)”;
(B) “(incorporated by reference as specified in § 260.11)”;
(C) “(incorporated by reference under 40 CFR 260.11)”;
(D) “40 CFR 260.11(11)”; and
(E) “as incorporated by reference in § 260.11 of this chapter.”
(2) In 40 CFR 264.1(g)(8)(D)(iii), the phrase “and K.A.R. 28-31-124a through 28-31-124e” shall be inserted after the phrase “through 124 of this chapter.”
(3) In 40 CFR 264.15(b)(4), the following text shall be deleted: “, except for Performance Track member facilities, that must inspect at least once each month, upon approval by the Director, as described in paragraph (b)(5) of this section.”
(4) In 40 CFR 264.112(d)(3), the phrase “under section 3008 of RCRA” shall be deleted.
(5) In 40 CFR 264.113(d)(2), the phrase “required under RCRA section 3019” shall be deleted.
(6) The phrase “determination pursuant to section 3008 of RCRA” shall be replaced with “determination by EPA pursuant to section 3008 of RCRA or by the state of Kansas under K.S.A. 65-3441, 65-3443, 65-3445, or 65-3439(e)” in the following locations:
(A) 40 CFR 264.143(c)(5);
(B) 40 CFR 264.143(d)(8);
(C) 40 CFR 264.145(c)(5); and
(D) 40 CFR 264.145(d)(9).
(7) The phrase “licensed to transact the business of insurance, or eligible to provide insurance as an excess or surplus lines insurer, in one or more States” shall be replaced with “licensed to transact the business of insurance in Kansas or eligible to provide insurance as an excess or surplus lines insurer in Kansas” in the following locations:
(A) 40 CFR 264.143(e)(1);
(B) 40 CFR 264.145(e)(1);
(C) 40 CFR 264.147(a)(1)(ii) and (b)(1)(ii); and
(D) 40 CFR 264.151(i) and (j).
(8) In 40 CFR 264.143(h) and 264.145(h), the text “If the facilities covered by the mechanism are in more than one Region, identical evidence of financial assurance must be submitted to and maintained with the Regional Administrators of all such regions” shall be replaced with the following: “If the facilities covered by the mechanism are in more than one state, identical evidence of financial assurance shall be submitted to and maintained with the state agency regulating hazardous waste, or with the appropriate regional administrator if the facility is located in an unauthorized state.”
(9) In 40 CFR 264.144(b) and (c), the phrase “and the post-closure period” shall be inserted after the phrase “During the active life of the facility.”
(10) In 40 CFR 264.144(b), the phrase “§ 264.145(b)(1) and (2)” shall be replaced with “paragraphs (b)(1) and (2) of this section.”
(11) In 40 CFR 264.147(a)(1)(i) and (b)(1)(i),
the phrase “Regional Administrator, or Regional Administrators” shall be replaced with “secretary, and regional administrators.”

(12) In 40 CFR 264.151(a)(1), (m)(1), and (n)(1), the phrase “United States Environmental Protection Agency, ‘EPA,’ an agency of the United States Government,” shall be replaced with the phrase “Kansas department of health and environment, or ‘department.’”

(13) In 40 CFR 264.151(b) and (c), the phrase “U.S. Environmental Protection Agency (hereinafter called EPA)” shall be replaced with “Kansas department of health and environment (hereinafter called ‘department’).”

(14) In 40 CFR 264.151(d) and (k), the text between the title “Irrevocable Standby Letter of Credit” and “Dear Sir or Madam:” shall be replaced with the following:

“Name and address of issuing institution: 
Secretary 
Kansas department of health and environment.”

(15) In 40 CFR 264.151(d), the following text shall be deleted: “[insert, if more than one Regional Administrator is a beneficiary, ‘by any one of you’].”

(16) In 40 CFR 264.151(f) and (g), in section 3 of the “Letter From Chief Financial Officer,” the text “In States where EPA is not administering the financial requirements of subpart H of 40 CFR part 264 or 265,” shall be deleted.

(17) In 40 CFR 264.151(l), in paragraph (1) of the “Governing Provisions” of the “Payment Bond,” the phrase “Section 3004 of the Resource Conservation and Recovery Act of 1976, as amended” shall be replaced with “40 CFR 264.147 and 265.147.”

(18) In 40 CFR 264.174, the following text shall be deleted: “, except for Performance Track member facilities, that may conduct inspections at least once each month, upon approval by the Director. To apply for reduced inspection frequencies, the Performance Track member facility must follow the procedures identified in § 264.15(b)(5) of this part.”

(19) In 40 CFR 264.191(a), the phrase “January 12, 1988” shall be replaced with “January 12, 1988 for HSWA tanks or by May 1, 1988 for non-HSWA tanks.”

(20) In 40 CFR 264.191(c), the text “July 14, 1986, must conduct this assessment within 12 months after the date that the waste becomes a hazardous waste” shall be replaced with the following text: “July 14, 1986 for HSWA tanks, or May 1, 1987 for non-HSWA tanks, shall conduct this assessment within 12 months after the date that the waste becomes a hazardous waste regulated by the state.”

(21) The phrase “or RCRA Section 3008(h)” shall be deleted from the following locations:
(A) 40 CFR 264.551(a); and
(B) 40 CFR 264.552(a).

(22) In 40 CFR 264.553(a), the phrase “or RCRA 3008(h)” shall be deleted.

(23) In 40 CFR 264.555(a), the term “RCRA” shall be deleted.

(24) In 40 CFR 264.570(a), the following replacements shall be made:
(A) Each occurrence of the text “December 6, 1990” shall be replaced with “December 6, 1990 for HSWA drip pads and April 25, 1994 for non-HSWA drip pads.”

(B) Each occurrence of the text “December 24, 1992” shall be replaced with “December 24, 1992 for HSWA drip pads and April 25, 1994 for non-HSWA drip pads.”

(25) In 40 CFR 264.570(c)(1)(iv), the term “Federal regulations” shall be replaced with “federal and state regulations.”

(26) In 40 CFR 264.1033(a)(2)(iii) and 264.1060(b)(3), the term “EPA” shall be deleted.

(27) In 40 CFR 264.1080(b)(5), the text “required under the corrective action authorities of RCRA sections 3004(u), 3004(v), or 3008(h); CERCLA authorities; or similar Federal or State authorities” shall be replaced with the following: “required by EPA under the corrective action authorities of RCRA sections 3004(u), 3004(v), or 3008(h); or under similar federal or state authorities.”

(28) In 40 CFR 264.1101(c)(4), the following text shall be deleted:
(A) “, except for Performance Track member facilities that must inspect at least once each month, upon approval by the Director.”; and
(B) “[t]o apply for reduced inspection frequency, the Performance Track member facility must follow the procedures described in § 264.15(b)(5).” (Authorized by K.S.A. 65-3431; implementing K.S.A. 65-3431 and 65-3443; effective April 29, 2011.)

28-31-264a. Hazardous waste treatment, storage, and disposal facilities; addi-
tional state requirements. Each reference in this regulation to a federal regulation shall mean that federal regulation as adopted by reference in K.A.R. 28-31-124 through 28-31-279. (a) Financial assurance.

(1) For the purposes of this subsection, the following definitions shall apply:

(A) “Captive insurance company” shall mean an insurance company that is established with the specific objective of financing risks emanating from its parent group or groups and that could or could not also insure risks of the parent groups’ customers.

(B) “Financial institution” shall mean a bank, an insurance company, a surety company, or a trust company.

(C) “Purchased financial instrument” shall mean a trust fund, a letter of credit, a surety bond, or an insurance policy.

(D) “Unrelated” shall mean that neither party has any ownership of the other party, or any controlling interest in the other party.

(2) Each financial institution that provides financial assurance for a hazardous waste facility in Kansas shall meet the following requirements, in addition to meeting the requirements of 40 CFR part 264, subpart H:

(A) Each bank and each trust company shall have the authority to issue letters of credit in Kansas or to act as trustee for the facility in Kansas, or both.

(B) Each insurance company shall meet the following criteria:

(i) Have a current minimum rating in the secure or investment grade category by the A.M. Best insurance rating agency; and

(ii) not be a captive insurance company.

(C) Each surety company shall meet the following criteria:

(i) Have a current minimum rating in the secure or investment grade category by the A.M. Best insurance rating agency; and

(ii) be licensed in Kansas.

(3) If the financial assurance required by 40 CFR part 264, 265, or 267 is a purchased financial instrument, the financial institution that provides the purchased financial instrument shall be unrelated to both the owner and the operator of the facility.

(4) Each person that is required to submit the information listed in one or more of the following regulations shall also submit a copy of the most recent corporate annual report:

(A) 40 CFR 264.143(f)(3);

(B) 40 CFR 264.145(f)(3);

(C) 40 CFR 265.143(e)(3);

(D) 40 CFR 265.145(e)(3); or

(E) 40 CFR 267.143(f)(2).

(5) The corporate annual report required by paragraph (a)(4) shall be submitted for both publicly and privately owned facilities and shall contain the following items:

(A) Financial statements;

(B) notes to financial statements; and

(C) a copy of the independent certified public accountant’s report, including an unqualified opinion.

(b) Notice in deed to property. Each owner of property on which a hazardous waste treatment, storage, or disposal facility is located shall record, in accordance with Kansas law, a notice with the register of deeds in the county where the property is located. The notice shall include the following information:

(1) The land has been used to manage hazardous waste.

(2) All records regarding permits, closure, or both are available for review at the department.

(c) Restrictive covenant and easement. Any owner of property on which a hazardous waste treatment, storage, or disposal facility is or has been located may be required by the secretary to execute a restrictive covenant or easement, or both, according to the following requirements:

(1) The restrictive covenant shall be filed with the county register of deeds, shall specify the uses that may be made of the property after closure, and shall include the following requirements:

(A) All future uses of the property after closure shall be conducted in a manner that preserves the integrity of waste containment systems designed, installed, and used during operation of the disposal areas, or installed or used during the post-closure maintenance period.

(B) The owner or tenant and all subsequent owners or tenants shall preserve and protect all permanent survey markers and benchmarks installed at the facility.

(C) The owner or tenant and all subsequent owners or tenants shall preserve and protect all environmental monitoring stations installed at the facility.

(D) The owner or tenant, all subsequent property owners or tenants, and any person granted easement to the property shall provide written notice to the secretary during the planning of any
improvement to the site and shall commence any of the following activities only after receiving approval from the secretary:

(i) Excavating or constructing any permanent structures or drainage ditches;
(ii) altering the contours;
(iii) removing any waste materials stored on the site;
(iv) changing the vegetation grown on areas used for waste disposal;
(v) growing food chain crops on land used for waste disposal; or
(vi) removing any security fencing, signs, or other devices installed to restrict public access to waste storage or disposal areas.

(2) The easement shall state that the department, its duly authorized agents, or contractors employed by or on behalf of the department may enter the premises to accomplish any of the following tasks:

(A) Complete items of work specified in the site closure plan;
(B) perform any item of work necessary to maintain or monitor the area during the postclosure period; or
(C) sample, repair, or reconstruct environmental monitoring stations constructed as part of the site operating or postclosure requirements.

(3) Each offer or contract for the conveyance of easement, title, or other interest to real estate used for treatment, storage, or disposal of hazardous waste shall disclose all terms, conditions, and provisions for care and subsequent land uses that are imposed by these regulations or the site permit authorized and issued under K.S.A. 65-3431, and amendments thereto. Conveyance of title, easement, or other interest in the property shall contain provisions for the continued maintenance of waste containment and monitoring systems.

(4) All covenants, easements, and other documents related to this regulation shall be permanent, unless extinguished by agreement between the property owner and the secretary.

(5) The owner of the property shall pay all recording fees.

(d) Marking requirements. Each operator of a hazardous waste container storage facility or a tank storage facility shall mark all containers and tanks in accordance with 40 CFR 262.34(a)(2) and (3).

(e) Environmental monitoring. All samples analyzed in accordance with 40 CFR part 264, subpart F or G or 40 CFR part 265, subpart F or G shall be conducted by a laboratory certified for these analyses by the secretary, except that analyses of time-sensitive parameters, including pH, temperature, and specific conductivity, shall be conducted at the time of sampling if possible.

(f) Laboratory certification. For hazardous waste received at a treatment, storage, or disposal facility with the intent of burning for destruction or energy recovery, all quantification analyses performed for the purpose of complying with permit conditions shall be performed by a laboratory certified for these analyses by the secretary, if this certification is available.

(g) Hazardous waste injection wells. The owner or operator of each hazardous waste injection well shall comply with the requirements of article 46 of these regulations. (Authorized by K.S.A. 65-3431; implementing K.S.A. 65-3431 and 65-3443; effective April 29, 2011.)

28-31-265. Interim status hazardous waste treatment, storage, and disposal facilities; adoption and modification of federal regulations. (a) Adoption. The provisions of 40 CFR part 265, including appendices I and III, IV, V, and VI, as in effect on July 1, 2006, are hereby adopted by reference subject to the following:

(1) The substitution of terms listed in K.A.R. 28-31-100 through 28-31-100s;

(2) the exclusions from adoption listed in subsection (b); and

(3) the modifications listed in subsection (c).

(b) Exclusions. The following portions of 40 CFR part 265 shall be excluded from adoption:

(1) All comments and all notes;
(2) 40 CFR 265.1(c)(4) and (15);
(3) 40 CFR 265.15(b)(5);
(4) 40 CFR 265.149 and 265.150;
(5) 40 CFR 265.195(d);
(6) 40 CFR 265.201(e);
(7) 40 CFR 265.1030(c);
(8) 40 CFR 265.1050(f); and
(9) 40 CFR 265.1080(e), (f), and (g).

(c) Modifications. The following modifications shall be made to 40 CFR part 265:

(1) Each occurrence of the following phrases shall be deleted:

(A) “(incorporated by reference, see § 260.11)”;
(B) “(incorporated by reference—refer to § 260.11 of this chapter)”;
(C) “(incorporated by reference as specified in § 260.11)”;

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(D) “(incorporated by reference under § 260.11)”;
(E) “(incorporated by reference under § 260.11 of this chapter)”;
(F) “as incorporated by reference in § 260.11”;
and
(G) “as incorporated by reference in § 260.11 of this chapter.”

(2) In 40 CFR 265.1(b), the phrase “issued under section 3005 of RCRA” shall be replaced with “issued by EPA under section 3005 of RCRA or a Kansas hazardous waste facility permit is issued by the department.”

(3) In 40 CFR 265.1(c)(11)(iii), the phrase “and K.A.R. 28-31-124a through 28-31-124e” shall be inserted after the phrase “through 124 of this chapter.”

(4) In 40 CFR 265.15(b)(4), the following text shall be deleted: “, except for Performance Track member facilities, that must inspect at least once each month, upon approval by the Director.”

(5) In 40 CFR 265.90(e), the term “qualified professional” shall be replaced with “Kansas professional engineer.”

(6) In 40 CFR 265.112(d)(3)(ii), the phrase “under section 3008 of RCRA” shall be deleted.

(7) In 40 CFR 265.113(d)(2), the phrase “required under RCRA section 3019” shall be deleted.

(8) In 40 CFR 265.118(e)(2), the phrase “under section 3008 of RCRA” shall be deleted.

(9) In 40 CFR 265.143(c)(8) and 265.145(c)(9), the phrase “determination pursuant to section 3008 of RCRA” shall be replaced by “determination by EPA pursuant to section 3008 of RCRA or by the state under K.S.A. 65-3441, 65-3443, 65-3445, or 65-3439(e).”

(10) In 40 CFR 265.143(g) and 265.145(g), the text “If the facilities covered by the mechanism are in more than one Region, identical evidence of financial assurance must be submitted to and maintained with the Regional Administrators of all such Regions” shall be replaced with the following: “If the facilities covered by the mechanism are in more than one state, identical evidence of financial assurance shall be submitted to and maintained with the state agency regulating hazardous waste, or with the appropriate regional administrator if the facility is located in an unauthorized state.”

(11) In 40 CFR 265.144(b) and (c), the phrase “and the post-closure period” shall be inserted after the phrase “During the active life of the facility.”

(12) In 40 CFR 265.144(b), the following replacements shall be made:

(A) The phrase “§ 265.145(d)(5)” shall be replaced with “§ 265.145(e)(5).”

(B) The phrase “§ 265.145(b)(1) and (2)” shall be replaced with “paragraphs (b)(1) and (2) of this section.”

(13) In 40 CFR 265.147(a)(1)(i), the text “Regional Administrator, or Regional Administrators” shall be replaced with “secretary, and regional administrators.”

(14) In 40 CFR 265.174, the following language shall be deleted: “, except for Performance Track member facilities, that must conduct inspections at least once each month, upon approval by the Director.”

(15) In 40 CFR 265.191(a), the text “January 12, 1988” shall be replaced with “January 12, 1988 for HSWA tanks, and May 1, 1988 for non-HSWA tanks.”

(16) In 40 CFR 265.191(c), the text “July 14, 1986 must conduct this assessment within 12 months after the date that the waste becomes a hazardous waste” shall be replaced with the following: “July 14, 1986 for HSWA tanks, or May 1, 1987 for non-HSWA tanks, shall conduct this assessment within 12 months after the date that the waste becomes a hazardous waste regulated by the state.”

(17) In 40 CFR 265.201, the following modifications shall be made:

(A) In the title, the phrase “between 100 and 1,000 kg/mo” shall be replaced with “less than 1,000 kg/mo.”

(B) Paragraph (a) shall be replaced with the following: “The requirements of this section shall apply to each small quantity generator, and to each Kansas small quantity generator and conditionally exempt small quantity generator that accumulates 25 kg (55 pounds) or more of hazardous waste in one or more tanks.”

(C) In paragraphs (b), (f), (g), and (h), the phrases “generators of between 100 and 1,000 kg/mo hazardous waste” and “generators of between 100 and 1,000 kg/mo” shall be replaced with “generators identified in paragraph (a) of this section.”

(D) In paragraphs (c) and (d), the number “100” shall be replaced with “25.”
(18) In 40 CFR 265.340(b)(2), the phrase “§ 264.351” shall be replaced with “§ 265.351.”

(19) In 40 CFR 265.440(a), the following replacements shall be made:

(A) Each occurrence of the text “December 6, 1990” shall be replaced with “December 6, 1990 for HSWA drip pads and April 25, 1994 for non-HSWA drip pads.”

(B) Each occurrence of the text “December 24, 1992” shall be replaced with “December 24, 1992 for HSWA drip pads and April 25, 1994 for non-HSWA drip pads.”

(20) In 40 CFR 265.440(c)(1)(iv), the term “Federal regulations” shall be replaced with “federal and state regulations.”

(21) In 40 CFR 265.1080(b)(5), the text “required under the corrective action authorities of RCRA sections 3004(u), 3004(v), or 3008(h); CERCLA authorities; or similar federal or state authorities” shall be replaced by the following: “required by EPA under the corrective action authorities of RCRA sections 3004(u), 3004(v), or 3008(h) or under CERCLA authorities; required by the state under K.S.A. 65-3443, 65-3445, and 65-3453; or required under similar Federal or State authorities.”

(22) In 40 CFR 265.1101(c)(4), the following text shall be deleted:

(A) “, except for Performance Track member facilities, that must inspect up to once each month, upon approval of the director;”;

(B) “[t]o apply for reduced inspection frequency, the Performance Track member facility must follow the procedures described in § 265.15(b)(5).” (Authorized by K.S.A. 65-3431; implementing K.S.A. 65-3431 and 65-3443; effective April 29, 2011.)

28-31-265a. Interim status hazardous waste treatment, storage, and disposal facilities; additional state requirements. Each owner or operator of an interim status hazardous waste treatment, storage, or disposal facility shall comply with K.A.R. 28-31-264a. (Authorized by K.S.A. 65-3431; implementing K.S.A. 65-3431 and 65-3443; effective April 29, 2011.)

28-31-266. Specific hazardous wastes and specific types of hazardous waste management facilities; adoption and modification of federal regulations. (a) Adoption. The provisions of 40 CFR part 266, including appendices I through IX and XI through XIII, as in effect on July 1, 2006, are hereby adopted by reference subject to the following:

(1) The substitution of terms listed in K.A.R. 28-31-100 through 28-31-100s;

(2) the exclusions from adoption listed in subsection (b); and

(3) the modifications listed in subsection (c).

(b) Exclusions. The following portions of 40 CFR part 266 shall be excluded from adoption:

(1) All notes, except in appendix IX;

(2) 40 CFR 266.103;

(3) in 40 CFR 266.210, the definition of “we or us”;

(4) subpart O.

(c) Modifications. The following modifications shall be made to 40 CFR part 266:

(1) Each occurrence of the following phrases shall be deleted:

(A) “(incorporated by reference, see § 260.11)”;

(B) “(incorporated by reference, in § 260.11)”;

(C) “(incorporated by reference in § 260.11)”;

(D) “, as incorporated by reference in § 260.11 of this chapter”; and

(E) “, incorporated by reference in § 260.11,”.

(2) In 40 CFR 266.23(a), the phrase “subparts A through N of parts 124, 264, 265, 268, and 270 of this chapter” shall be replaced with “subparts A through N of 40 CFR parts 264 and 265, 40 CFR parts 268 and 270, K.A.R. 28-31-124 through 124e,”.

(3) In 40 CFR 266.202(d), the following modifications shall be made:

(A) The phrase “For the purposes of RCRA section 1004(27),” shall be deleted.

(B) The text “or imminent and substantial endangerment authorities under section 7003” shall be replaced with “and the Kansas enforcement authorities at K.S.A. 65-3441(b) and (c), 65-3443, and 65-3445.”

(4) In 40 CFR 266.210 in the definition of “naturally occurring and/or accelerator-produced radioactive material (NARM),” the phrase “by the States” shall be replaced with “by the state of Kansas.”

(5) In 40 CFR part 266, subpart N, the following replacements shall be made:

(A) The term “us” shall be replaced with “the department.”

(B) The term “we” shall be replaced with “the secretary.” (Authorized by and implementing K.S.A. 65-3431; effective April 29, 2011.)

28-31-267. Hazardous waste facilities
operating under a standardized permit; adoption and modification of federal regulations. (a) Adoption. The provisions of 40 CFR part 267, as in effect on July 1, 2006, are hereby adopted by reference subject to the following:

(1) The substitution of terms listed in K.A.R. 28-31-100 through 28-31-100s;
(2) the exclusions from adoption listed in subsection (b); and
(3) the modifications listed in subsection (c).

(b) Exclusions. The following portions of 40 CFR part 268 shall be excluded from adoption:

(1) All comments and all notes, except in subpart D and appendix IX;
(2) 40 CFR 268.13; and
(3) 40 CFR 268.44(o).

(c) Modifications. The following modifications shall be made to 40 CFR part 268:

(1) Each occurrence of the following phrases shall be deleted:
   (A)“(incorporated by reference, see § 260.11 of this chapter)”;
   (B) “as incorporated by reference in § 260.11”;
   (C) “as incorporated by reference in § 260.11 of this chapter”;
   (D) “as incorporated by reference in 40 CFR 260.11”;
   (E) “as referenced in § 260.11 of this chapter.”

(2) In 40 CFR 268.12, the text “your state hazardous waste regulatory agency or from your EPA regional office” shall be replaced with “the department.”

(3) In 40 CFR 268.7(a)(3), the phrase “under section 3008 of RCRA” shall be deleted.

(4) In 40 CFR 268.7(d)(1) shall be replaced with the following: “A one-time notification, including the following information, shall be submitted to the department:”.

(5) In 40 CFR 268.7(d)(10), the phrase “and Kansas small quantity generators” shall be inserted after the term “Small quantity generators.”

(6) In 40 CFR 268.7(d), the phrase “§ 261.3(e)” shall be replaced with “§ 261.3(f).”

(7) 40 CFR 268.7(d)(1) shall be replaced with the following: “A one-time notification, including the following information, shall be submitted to the department:”.

(8) In 40 CFR 268.14(b) and (c), the phrase “section 3001” shall be replaced with “40 CFR part 261.”

(9) In 40 CFR 268.44(i), the phrase “in § 260.20(b)(1)-(4)” shall be replaced with “required by EPA’s rulemaking petition program.”

(10) In 40 CFR 268.50(a), the phrase “of RCRA section 3004” shall be deleted.

(11) In 40 CFR 268.50(e), the phrase “or RCRA section 3004” shall be deleted. (Authorized by and implementing K.S.A. 65-3431; effective April 29, 2011.)

28-31-268. Land disposal restrictions; adoption and modification of federal regulations. (a) Adoption. The provisions of 40 CFR part 268, including appendices III, IV, VI through IX, and XI, as in effect on July 1, 2006, are hereby adopted by reference subject to the following:

(1) The substitution of terms listed in K.A.R. 28-31-100 through 28-31-100s;
(2) the exclusions from adoption listed in subsection (b); and
(3) the modifications listed in subsection (c).

(b) Exclusions. The following portions of 40 CFR part 268 shall be excluded from adoption:

(1) All comments and all notes, except in subpart D and appendix IX;
(2) 40 CFR 268.13; and
(3) 40 CFR 268.44(o).

(c) Modifications. The following modifications shall be made to 40 CFR part 268:

(1) Each occurrence of the following phrases shall be deleted:
   (A)“(incorporated by reference, see § 260.11 of this chapter)”;
   (B) “as incorporated by reference in § 260.11”;
   (C) “as incorporated by reference in § 260.11 of this chapter”;
   (D) “as incorporated by reference in 40 CFR 260.11”;
   (E) “as referenced in § 260.11 of this chapter.”

(2) In 40 CFR 268.12, the text “your state hazardous waste regulatory agency or from your EPA regional office” shall be replaced with “the department.”

(3) In 40 CFR 268.112(d)(3), the phrase “under section 3008 of RCRA” shall be deleted.

(4) In 40 CFR 268.151(a) and (b), the text “[insert ‘subpart H of 40 CFR part 267’ or the citation to the corresponding state regulation]” shall be replaced with “K.A.R. 28-31-267.” (Authorized by K.S.A. 65-3431; implementing K.S.A. 65-3431 and 65-3443; effective April 29, 2011.)
part 270, including appendix I to §270.42, as in effect on July 1, 2006, are hereby adopted by reference subject to the following:

(1) The substitution of terms listed in K.A.R. 28-31-100 through 28-31-100s;
(2) the exclusions from adoption listed in subsection (b); and
(3) the modifications listed in subsection (c).

(b) Exclusions. The following portions of 40 CFR part 270 shall be excluded from adoption:
(1) In 40 CFR 270.1, subsections (a) and (b) and paragraphs (c)(1)(iii) and (c)(2)(ix);
(2) 40 CFR 270.3;
(3) 40 CFR 270.6;
(4) 40 CFR 270.10(g)(1)(i);  
(5) 40 CFR 270.14(b)(18);
(6) 40 CFR 270.42(i) and (l);
(7) 40 CFR 270.60(a); and
(8) 40 CFR 270.64.

(c) Modifications. The following modifications shall be made to 40 CFR part 270:
(1) In 40 CFR 270.1(c)(7), the following text shall be deleted: “including, but not limited to, a corrective action order issued by EPA under section 3008(h), a CERCLA remedial action, or a closure or post-closure plan.”

(2) In 40 CFR 270.2, the following definitions shall be modified as follows:
(A) Corrective action management unit.
(i) The phrase “or secretary” shall be inserted after the term “Regional Administrator.”
(ii) The word “and” shall be replaced with the term “or by the regional administrator under.”
(B) Emergency permit. The term “RCRA permit” shall be replaced with “RCRA or Kansas hazardous waste facility permit.”
(C) Permit.
(i) The reference to “124 of this chapter” shall be replaced with “124 of this chapter or K.A.R. 28-31-124 through 28-31-124e and 28-31-270.”
(ii) The term “RCRA” shall be deleted.
(iii) The term “agency” shall be replaced with the phrase “EPA or department.”

(D) Remedial action plan. The term “RCRA permit” shall be replaced with “RCRA or Kansas hazardous waste facility permit.”
(E) Standardized permit.
(i) The term “RCRA permit” shall be replaced with “RCRA or Kansas hazardous waste facility permit.”
(ii) The term “Director’s” shall be replaced with “director’s or secretary’s.”
(3) In 40 CFR 270.10(a), the following language shall be inserted after the title “Applying for a permit.”: “Each person that wants to apply for a permit to dispose of hazardous waste shall first petition the secretary for an exception to the Kansas prohibition against underground land burial under the requirements of K.A.R. 28-31-5.”
(4) In 40 CFR 270.10(e)(3), the text “,” or the secretary may under the authority of K.S.A. 65-3445,” shall be inserted after the phrase “section 3008 of RCRA.”
(5) In 40 CFR 270.10(e)(4), the second sentence shall be deleted.
(6) In 40 CFR 270.10(f)(2), the second sentence shall be replaced with the following: “The application shall be filed with the secretary.”
(7) In 40 CFR 270.10(g)(1)(ii), the text “if the facility is located in a State which has obtained interim authorization or final authorization,” shall be deleted.
(8) In 40 CFR 270.10(g)(1)(iii), the text “if the State in which the facility in question is located does not have interim authorization or final authorization; otherwise it shall be filed with the State Director (if the State has an analogous provision)” shall be deleted.
(9) 40 CFR 270.12 shall be replaced with “K.S.A. 65-3447 shall apply to all information claimed as confidential.”
(10) In 40 CFR 270.13(k)(1), the term “RCRA” shall be replaced with “RCRA or the Kansas hazardous waste program.”
(11) In 40 CFR 270.14(b)(20), the phrase “Federal laws as required in § 270.3 of this part” shall be replaced with “laws.”
(12) In 40 CFR 270.24(d)(3) and 270.25(e)(3), the phrase “(incorporated by reference as specified in § 270.6)” shall be deleted.
(13) In 40 CFR 270.32(a) the text “,” and for EPA issued permits only, 270.33(b) (alternate schedules of compliance) and 270.3 (considerations under Federal law)” shall be deleted.
(14) In 40 CFR 270.32(c), the following language shall be deleted:
(A) The second sentence, which starts “For a permit issued by EPA”;
(B) the term “EPA”; and
(C) the phrase “and EPA administered programs.”
(15) In 40 CFR 270.43(b), the phrase “or part 22” shall be deleted.
(16) In 40 CFR 270.51(a), the title shall be replaced with “Kansas hazardous waste facility per-
mits” and the phrase “under 5 U.S.C. 558(c)” shall be deleted.

(17) In 40 CFR 270.51(d), the title shall be replaced with “State continuation of an EPA permit” and the phrase “In a State with a hazardous waste program authorized under 40 CFR part 271,” shall be deleted.

(18) In 40 CFR 270.60, the phrase “facilities in Kansas” shall be inserted after the word “following” in the introductory paragraph.

(19) In 40 CFR 270.70(a) and 270.73(d), the phrase “under the Act” shall be deleted.

(20) 40 CFR 270.115 shall be replaced with the following: “K.S.A. 65-3447 shall apply to all information claimed as confidential.”

(21) In 40 CFR 270.155(a), the following phrases shall be deleted:
(A) “[T]o EPA’s Environmental Appeals Board”;
(B) “[i]nstead of the notice required under §§ 124.19(c) and 124.10 of this chapter.”;
(C) “by the Environmental Appeals Board”;
(D) “as provided by the Board”; and
(E) “with the Board.”

(22) In 40 CFR 270.195, the phrase “in RCRA sections 3004 and 3005” shall be deleted.

(23) In 40 CFR 270.255(a)(3), each occurrence of the term “we” shall be replaced with “the secretary.”


28-31-270a. Hazardous waste permits; petition to be granted an exception to the prohibition against underground burial of hazardous waste. This regulation shall apply to each person that wants to apply for a permit for the underground burial of hazardous waste. For the purposes of this regulation, this person shall be called a “potential applicant.”

(a) Exception petition. Before applying for a permit according to the requirements of K.A.R. 28-31-124 through 28-31-124e and 28-31-270, each potential applicant shall submit to the secretary a petition for an exception to the prohibition against the underground burial of hazardous waste, as specified in K.S.A. 65-3458 and amendments thereto.

(b) Contents of the exception petition. Each exception petition shall include the following items:

(1) A complete chemical and physical analysis of the waste;
(2) a list and description of all technologically feasible methods that could be considered to treat, store, or dispose of the waste;
(3) for each method described in paragraph (b)(2), an economic analysis based upon a 30-year time period. The analysis shall determine the costs associated with treating, storing, disposing of, and monitoring the waste during this time period; and
(4) a demonstration that underground burial is the only economically reasonable or technologically feasible methodology for the disposal of that specific hazardous waste.

(c) Review and public notice for exception petitions. The review and public notice shall be conducted according to the following requirements:

(1) The potential applicant shall submit the exception petition to the department. If the exception petition is not complete, the potential applicant shall be notified of the specific deficiencies by the department.

(2) Upon receipt of a complete exception petition, a public notice shall be published by the department once each week for three consecutive weeks according to the following requirements:

(A) The notice shall be published in the following publications:
(i) The Kansas register; and
(ii) the official county newspaper of the county in which the proposed underground burial would occur or, if there is no official county newspaper, a newspaper published as provided in K.S.A. 64-101 and amendments thereto.

(B) The public notice shall include the following information:
(i) The name of the potential applicant;
(ii) a description of the specific waste;
(iii) a description of the proposed disposal methods;
(iv) a map indicating the location of the proposed underground burial;
(v) the address of the location where the exception petition and related documents can be reviewed;
(vi) the address of the location where copies of the exception petition and related documents can be obtained;
(vii) a description of the procedure by which the exception petition will be reviewed; and
(viii) the date and location of the public hearing.

(3) A copy of the public notice shall be transmitted by the department to the clerk of each city
that is located within three miles of the proposed underground burial site.

(d) Public hearing and public comment period. The public hearing and public comment period shall be conducted according to the following requirements:

1. The public hearing shall be conducted in the same county as that of the proposed underground burial facility.
2. The public hearing shall be scheduled no earlier than 30 days after the date of the first public notice.
3. A hearing officer shall be designated by the secretary.
4. At the hearing, any person may submit oral comments, written comments, or data concerning the exception petition. Reasonable limits may be set by the hearing officer on the time allowed for oral statements, and the submission of statements in writing may be required by the hearing officer.
5. The public comment period shall end no earlier than the close of the public hearing. The hearing officer may extend the public comment period at the hearing.
6. A recording or written transcript of the hearing shall be made available to the public by the department upon request.
7. A report shall be submitted by the hearing officer to the secretary detailing all written and oral comments submitted during the public comment period. The hearing officer may also recommend findings and determinations.

(e) Approval or denial of the exception petition. The following procedures shall be followed by the secretary and the department:

1. If the secretary determines, based on the criteria specified in K.S.A. 65-3458 and amendments thereto, that the exception petition should be approved, an order shall be issued by the secretary. The order may require conditions that the secretary deems necessary to protect public health and safety and the environment.
2. If the secretary determines that there is not sufficient evidence to approve the exception petition, the potential applicant shall be notified by the department of the reasons why the exception petition is denied.
3. A public notice of the final decision to approve or deny the exception petition shall be published by the department in the following publications:
   A. The Kansas register; and
   B. The official county newspaper of the county in which the proposed underground burial would occur or, if there is no official county newspaper, a newspaper published as provided in K.S.A. 64-101 and amendments thereto.
4. A copy of the final decision shall be transmitted by the department to the clerk of each city that is located within three miles of the proposed underground burial site. (Authorized by K.S.A. 65-3431; implementing K.S.A. 2010 Supp. 65-3458; effective April 29, 2011.)

28-31-273. Universal waste; adoption and modification of federal regulations. (a) Adoption. The provisions of 40 CFR part 273, as in effect on July 1, 2006, are hereby adopted by reference subject to the following:

1. The substitution of terms listed in K.A.R. 28-31-100 through 28-31-100s; and
2. The exclusions from adoption listed in subsection (b).

(b) Exclusions. The following portions of 40 CFR part 273 shall be excluded from adoption:

1. All comments and all notes; and
2. Subpart G. (Authorized by and implementing K.S.A. 65-3431; effective April 29, 2011.)

28-31-279. Used oil; adoption and modification of federal regulations. (a) Adoption. The provisions of 40 CFR part 279, as in effect on July 1, 2006, are hereby adopted by reference subject to the following:

1. The substitution of terms listed in K.A.R. 28-31-100 through 28-31-100s; and
2. The exclusions from adoption listed in subsection (b); and
3. The modifications listed in subsection (c).

(b) Exclusions. The following portions of 40 CFR part 279 shall be excluded from adoption:

1. All comments and all notes; and
2. 40 CFR 279.82.

(c) Modifications. The following modifications shall be made to 40 CFR part 279:

1. In 40 CFR 279.10(a), the text “EPA presumes” shall be replaced with “EPA and the department presume.”
2. In 40 CFR 279.12(b), the text “, except when such activity takes place in one of the states listed in § 279.82(c)” shall be deleted.
3. The text “and which has occurred after the effective date of the recycled used oil management program in effect in the State in which the release is located” shall be deleted in the following locations:
   A. 40 CFR 279.22(d);
(B) 40 CFR 279.45(h);
(C) 40 CFR 279.54(g); and
(D) 40 CFR 279.64(g).

(4) The parenthetical text in paragraph (b)(1) concerning the “RCRA/Superfund Hotline” and the sentence in paragraph (b)(2) concerning the “RCRA/Superfund Hotline” shall be deleted in the following sections:
(A) 40 CFR 279.42;
(B) 40 CFR 279.51; and
(C) 40 CFR 279.62.

(5) In 40 CFR 279.81(b), the phrase “parts 257 and 258 of this chapter” shall be replaced with “K.S.A. 65-3401 et seq. and article 29.” (Authorized by and implementing K.S.A. 65-3431; effective April 29, 2011.)

28-31-279a. Used oil; additional state prohibitions and requirements. (a) Prohibitions.

(1) No person shall dispose of used oil on or into any of the following:
(A) Sewers;
(B) storm drainage systems;
(C) surface water;
(D) groundwater; or
(E) the ground.

(2) No person shall apply used oil as any of the following:
(A) A coating;
(B) a sealant;
(C) a dust suppressant;
(D) a pesticide carrier; or
(E) any other similar application.

(b) Transporter registration and insurance.
Each transporter of used oil shall comply with the requirements of K.A.R. 28-31-6. (Authorized by and implementing K.S.A. 65-3431; effective April 29, 2011.)

Article 34.—HOSPITALS

28-34-126. Definitions. For the purposes of K.A.R. 28-34-126, 28-34-127, and 28-34-129 through 28-34-144, the following terms shall have the meanings specified in this regulation. (a) “Admitting privileges” means permission extended by a hospital to a physician to allow the physician to admit a patient to that hospital either as active or courtesy staff.
(b) “Ancillary services” means laboratory, radiology, or pharmacy services.
(c) “Ancillary staff member” means an individual who performs laboratory, radiology, or pharmacy services at a facility.
(d) “Applicant” means a person who has applied for a license but who has not yet been granted a license to operate a facility.
(e) “Clinical privileges” means permission extended by a hospital to a physician to allow the physician to provide treatment to a patient in that hospital.
(f) “Health professional” means an individual, other than a physician, who is one of the following:
(1) A nurse licensed by the Kansas state board of nursing; or
(2) a physician assistant licensed by the Kansas state board of healing arts.

(g) “Licensee” means a person who has been granted a license to operate a facility.
(h) “Medical staff member” means an individual who is one of the following:
(1) A physician licensed by the Kansas state board of healing arts;
(2) a health professional; or
(3) an ancillary staff member.

(i) “Newborn child” means a viable child delivered during an abortion procedure.

(j) “Person” means any individual, firm, partnership, corporation, company, association, or joint-stock association, and the legal successor thereof.

(k) “Reportable incident” means an act by a medical staff member which:
(1) Is or may be below the applicable standard of care and has a reasonable probability of causing injury to a patient; or
(2) may be grounds for disciplinary action by the appropriate licensing agency.

(l) “Risk manager” means the individual designated by the applicant or licensee to administer the facility’s internal risk management program and to receive reports of reportable incidents within the facility.

(m) “Staff member” means an individual who provides services at the facility and who is compensated for those services.

(n) “Unborn child” means a living individual organism of the species homo sapiens, in utero, at any stage of gestation from fertilization to birth.

(o) “Viable” shall have the same meaning ascribed in K.S.A. 65-6701, and amendments thereto.

(p) “Volunteer” means an individual who provides services at the facility and who is not compensated for those services. (Authorized by L. 2011, ch. 82, sec. 9; implementing L. 2011, ch. 82,
28-34-127. Application process. (a) Any person desiring to operate a facility shall apply for a license on forms provided by the department.

(b) Each applicant shall submit a fee of $500 for a license. The applicable fee shall be submitted at the time of license application and shall not be refundable.

(c) Before initial licensing each applicant shall submit to the department the following information:

(1) Written verification from the applicable local authorities showing that the premises are in compliance with all local codes and ordinances, including all building, fire, and zoning requirements;

(2) written verification from the state fire marshal showing that the premises are in compliance with all applicable fire codes and regulations;

(3) documentation of the specific arrangements that have been made for the removal of biomedical waste and human tissue from the premises; and

(4) documentation that the facility is located within 30 miles of an accredited hospital.

(d) The granting of a license to any applicant may be denied by the secretary if the applicant is not in compliance with all applicable laws, rules, and regulations. (Authorized by L. 2011, ch. 82, sec. 9; implementing L. 2011, ch. 82, secs. 2 and 9; effective, T-28-7-1-11, July 1, 2011; effective Nov. 14, 2011.)

28-34-129. Terms of a license. (a) Each license shall be effective for one year following the date of issuance.

(b) Each license shall be valid for the licensee and the address specified on the license. When an initial, renewed, or amended license becomes effective, all licenses previously granted to the applicant or licensee at the same address shall become invalid.

(c) Only one physical location shall be described in each license.

(d) Any applicant may withdraw the application for a license.

(e) Any licensee may submit, at any time, a request to close the facility permanently and to surrender the license.

(f) If a facility is closed, any license granted for that facility shall become void. (Authorized by L. 2011, ch. 82, sec. 9; implementing L. 2011, ch. 82, sec. 2; effective, T-28-7-1-11, July 1, 2011; effective Nov. 14, 2011.)

28-34-130. Renewals; amendments. (a) No earlier than 90 days before but no later than the renewal date, each licensee wishing to renew the license shall submit the following:

(1) The nonrefundable license fee of $500; and

(2) an application to renew the license on the form provided by the department.

(b) Each licensee shall submit a request for an amended license to the department within 30 days after either of the following:

(1) A change of ownership by purchase or by lease; or

(2) a change in the facility’s name or address. (Authorized by L. 2011, ch. 82, sec. 9; implementing L. 2011, ch. 82, secs. 2, 3, and 4; effective, T-28-7-1-11, July 1, 2011; effective Nov. 14, 2011.)

28-34-131. Operation of the facility. (a) Each applicant and each licensee shall be responsible for the operation of the facility.

(b) Each applicant and each licensee shall:

(1) Ensure compliance with all applicable federal, state, and local laws;

(2) serve as or designate a medical director who is a physician licensed by the Kansas state board of healing arts and who has no limitations to the license that would prohibit the physician’s ability to serve in the capacity as a medical director of a facility; and

(3) ensure the following documents are conspicuously posted at the facility:

(A) The current facility license issued by the department; and

(B) the current telephone number and address of the department.

(c) Each applicant and each licensee shall ensure that written policies and procedures are developed and implemented for the operation of the facility. The policies and procedures shall include the following requirements:

(1) An organized recordkeeping system to meet the requirements in K.A.R. 28-34-144;

(2) documentation of personnel qualifications, duties, and responsibilities to meet the requirements in K.A.R. 28-34-132;

(3) that the facility is designed, constructed, equipped, and maintained to protect the health and safety of patients, staff, and visitors to meet the requirements in K.A.R. 28-34-133 through 28-34-136;
(4) ensure proper and adequate medical screening and evaluation of each patient to meet the requirements in K.A.R. 28-34-137;

(5) consent is obtained from each patient before the procedure;

(6) safe conduct of abortion procedures to meet the requirements in K.A.R. 28-34-138;

(7) the appropriate use of anesthesia, analgesia and sedation to meet the requirements in K.A.R. 28-34-138;

(8) ensure the use of appropriate precautions for any patient undergoing a second or third trimester abortion to meet the requirements in K.A.R. 28-34-138;

(9) post-procedure care of patients to meet the requirements in K.A.R. 28-34-139;

(10) identify and ensure a physician with admitting privileges at an accredited hospital located within 30 miles of the facility is available during facility hours of operation;

(11) if indicated, the transfer of any patient and newborn child to a hospital to meet the requirements in K.A.R. 28-34-140;

(12) follow-up and aftercare for each patient receiving an abortion procedure in the facility to meet the requirements in K.A.R. 28-34-141;

(13) a written plan for risk management to meet the requirements in K.A.R. 28-34-142, including policies and procedures for staff member or volunteer reporting of any clinical care concerns; and

(14) ensure that incidents that require reporting to the department are completed as required in K.A.R. 28-34-143. (Authorized by L. 2011, ch. 82, sec. 9; implementing L. 2011, ch. 82, secs. 2 and 9; effective, T-28-7-1-11, July 1, 2011; effective Nov. 14, 2011.)

28-34-132. Staff requirements. (a) Each applicant and each licensee shall ensure that each physician performing surgery in a facility is approved by the medical director, licensed to practice medicine and surgery in the state of Kansas, and demonstrates competence in the procedure involved in the physician’s duties at the facility. Competence shall be demonstrated through both of the following means and methods:

(1) Documentation of education and experience; and

(2) observation by or interaction with the medical director.

(b) Each applicant and each licensee shall ensure the following:

(1) A physician with admitting privileges at an accredited hospital located within 30 miles of the facility is available.

(2) Any physician performing or inducing abortion procedures in the facility has clinical privileges at a hospital located within 30 miles of the facility.

(c) Each applicant and each licensee shall ensure that each individual who performs an ultrasound is one of the following:

(1) A physician licensed in the state of Kansas who has completed a course for the type of ultrasound examination the physician performs; or

(2) an individual who performs ultrasounds under the supervision of a physician and who meets all of the following requirements:

(A) Has completed a course in performing ultrasounds;

(B) has completed a training for the specific type of ultrasound examination the individual performs; and

(C) is not otherwise precluded by law from performing ultrasound examinations.

(d) Each applicant and each licensee shall ensure that each staff member employed by or contracted with the facility is licensed, if required by state law, is qualified, and provides services to patients consistent with the scope of practice of the individual’s training and experience.

(e) Each applicant and each licensee shall ensure that each surgical assistant employed by or contracted with the facility receives training in the specific responsibilities of the services the surgical assistant provides in the facility.

(f) Each applicant and each licensee shall ensure that each volunteer receives training as identified by the medical director in the specific responsibilities the volunteer provides at the facility.

(g) Each applicant and each licensee shall ensure that at least one physician or registered nurse is certified in advanced cardiovascular life support and is present at the facility when any patient who is having an abortion procedure or recovering from an abortion procedure is present at the facility. (Authorized by and implementing L. 2011, ch. 82, sec. 9; effective, T-28-7-1-11, July 1, 2011; effective Nov. 14, 2011.)

28-34-133. Facility environmental standards. (a) Each applicant and each licensee shall ensure that the facility is designed, constructed, equipped, and maintained to protect the health and safety of patients, staff members, volunteers, and visitors.
(b) Each facility shall include the following rooms and areas:

(1) At least one room designated for patient interviews, counseling, and medical evaluations, located and arranged to preserve patient privacy;
(2) at least one dressing room for patients only and arrangements for storage of patient clothing and valuables;
(3) at least one dressing room for staff members, including a toilet, hand washing station, and arrangements for storage for staff member clothing and valuables;
(4) a toilet room and hand washing station designated for patients;
(5) hand washing stations for pre-procedure hand washing by staff members;
(6) private procedure rooms and doorways of those rooms of sufficient size to accommodate the following:
   (A) The equipment, supplies, and medical staff members required for performance of an abortion procedure; and
   (B) emergency equipment and personnel in the event of a transfer, as described in K.A.R. 28-34-140;
(7) a recovery area that meets all of the following requirements:
   (A) Has a nurse station with visual observation of each patient in the recovery area;
   (B) provides privacy for each patient in the recovery area with at least cubicle curtains around each patient gurney or bed; and
   (C) has sufficient space to accommodate emergency equipment and personnel in the event of a transfer, as described in K.A.R. 28-34-140;
(8) a waiting area for patients and visitors;
(9) an administrative area, including office space for the secure filing and storage of facility patient records;
(10) a workroom separate from the procedure rooms for cleaning, preparation, and sterilization of instruments, arranged to separate soiled or contaminated instruments from clean or sterilized instruments, including the following:
   (A) A hand washing station;
   (B) receptacles for waste and soiled items;
   (C) designated counter space for soiled or contaminated instruments;
   (D) a sink for cleaning soiled or contaminated instruments;
   (E) designated counter space for clean instruments; and
   (F) an area for sterilizing instruments, if sterilization is completed at the facility;
(11) storage space for clean and sterile instruments and supplies; and
(12) at least one room equipped with a service sink or a floor basin and space for storage of janitorial supplies and equipment. (Authorized by and implementing L. 2011, ch. 82, sec. 9; effective, T-28-7-1-11, July 1, 2011; effective Nov. 14, 2011.)

28-34-134. Health and safety requirements. (a) Each applicant and each licensee shall ensure that the facility meets the following health and safety requirements:

(1) The temperature in each procedure room and in each recovery area shall be between 65 and 75 degrees Fahrenheit unless otherwise ordered by a physician in order to meet the comfort or medical needs of the patient.
(2) Fixed or portable lighting units shall be present in each examination, procedure, and recovery room or area, in addition to general lighting.
(3) Each emergency exit shall accommodate a stretcher or a gurney.
(4) The facility shall be maintained in a clean condition.
(5) The facility shall not be infested by insects and vermin.
(6) A warning notice shall be placed at the entrance to any room or area where oxygen is in use.
(7) Soiled linen and clothing shall be kept in covered containers in a separate area from clean linen and clothing.
(b) A written emergency plan shall be developed and implemented, including procedures for protecting the health and safety of patients and other individuals in any of the following circumstances:

(1) A fire;
(2) a natural disaster;
(3) loss of electrical power; or
(4) threat or incidence of violence.
(c) An evacuation drill shall be conducted at least once every six months, including participation by all individuals in the facility at the time of the drill. Documentation shall be maintained at the facility for one year from the date of the drill and shall include the date and time of the drill. (Authorized by and implementing L. 2011, ch. 82, sec. 9; effective, T-28-7-1-11, July 1, 2011; effective Nov. 14, 2011.)
28-34-135. Equipment; supplies; drugs and medications. (a) Each applicant and each licensee shall ensure that supplies, equipment, drugs, and medications are immediately available for use or in an emergency.

(b) Equipment and supplies shall be maintained in the amount required to assure sufficient quantities of clean and sterilized durable equipment to meet the needs of each patient during any abortion procedure and for monitoring each patient throughout the procedure and recovery period.

(c) Each applicant and each licensee shall ensure that the following equipment and supplies are maintained in the facility for airway management:

1. An oxygen source with flowmeter;
2. Face masks, in child and adult sizes for assisting ventilation;
3. A non self-inflating bag with face mask;
4. Suction, either wall or machine;
5. Suction catheters, in sizes 8, 10, 14F, and Yankauer;
6. Oral airways, in child and adult sizes;
7. Nasal cannulas, in child and adult sizes; and
8. The following additional equipment and supplies for airway management for any abortion procedure performed when the gestational age of the unborn child is 22 weeks or more:
   A. A self-inflating bag with reservoir, 500 cc and 1000 cc;
   B. Oral airways, in infant sizes;
   C. A laryngoscope handle with batteries;
   D. Straight blades or curved blades, in sizes 0, 1, 2, and 3;
   E. Endotracheal tubes, uncuffed, in sizes 3.0, 3.5, 4.0, 4.5, 5.0, 6.0, 7.0, and 8.0;
   F. Stylets, small and large; and
   G. Adhesive tape to secure airway.

(d) Each applicant and each licensee shall ensure that the following supplies are maintained in the facility for fluid management:

1. Intravenous needles, 15 or 18 gauge;
2. Intravenous catheters, 18, 20, 22, and 24 gauge;
3. Butterfly needles, 23 gauge;
4. Tourniquets, alcohol swabs, and tape;
5. Isotonic fluids, either normal saline or lactated Ringer's solution; and
6. For any abortion procedure performed when the gestational age of the unborn child is 22 weeks or more, pediatric drip chambers and tubing.

(e) Each applicant and each licensee shall ensure that the following miscellaneous equipment and supplies are maintained in the facility:

1. Blood pressure cuffs, in small, medium and large adult sizes;
2. Adult nasogastric tubes;
3. Manual sphygmomanometer; and
4. For any abortion procedure performed when the gestational age of the unborn child is 22 weeks or more, blood pressure cuffs in preemie and infant sizes.

(f) Each applicant and each licensee shall ensure that all equipment is safe for each patient and for the staff.

(g) Each applicant and each licensee shall ensure that each item of equipment is installed and used according to the manufacturer's recommendations for use.

(h) Each applicant and each licensee shall ensure that each item of equipment is checked annually to ensure safety and required calibration.

(i) Each applicant and each licensee shall ensure that equipment and supplies are clean and sterile, if applicable, before each use.

(j) Each applicant and each licensee shall ensure that the facility meets the following requirements for equipment:

1. All equipment shall be clean, functional, and maintained in accordance with the manufacturer's instructions.

2. The following equipment shall be available at all times:

   A. Ultrasound equipment;
   B. Intravenous equipment;
   C. Laboratory equipment;
   D. Patient resuscitation and suction equipment;
   E. Equipment to monitor vital signs in each room in which an abortion is performed;
   F. A surgical or gynecologic examination table;
   G. Equipment to measure blood pressure;
   H. A stethoscope; and
   I. A scale for weighing a patient.

(k) Each applicant and each licensee shall ensure that, for any abortion procedure performed when the gestational age of the unborn child is 22 weeks or more, the following equipment and supplies are maintained in the facility:

1. Equipment to monitor cardiopulmonary status; and
2. Drugs to support cardiopulmonary function.

(l) Each applicant and each licensee shall ensure that equipment and appropriate medications are located in the recovery area as needed for the
provision of appropriate emergency resuscitative and life support procedures pending the transfer to a hospital of a patient or a newborn child.

(1) Each applicant and each licensee shall maintain a stock supply of drugs and medications for the use of the physician in treating the emergency needs of patients.

(2) The medications shall be stored in such a manner as to prohibit access by unauthorized personnel.

(3) The stock supplies of medications shall be regularly reviewed to ensure proper inventory control with removal or replacement of expired drugs and medications.

(4) Drugs and equipment shall be available within the facility to treat the following conditions consistent with standards of care for advanced cardiovascular life support:
   (A) Cardiac arrest;
   (B) a seizure;
   (C) an asthma attack;
   (D) allergic reaction;
   (E) narcotic or sedative toxicity;
   (F) hypovolemic shock;
   (G) vasovagal shock; and
   (H) anesthetic reactions.

(m) Drugs and medications shall be administered to individual patients only by a facility physician or a facility health professional.

(n) If a stock of controlled drugs is to be maintained at the facility, the applicant or licensee shall ensure that the facility is registered by the Kansas board of pharmacy. Each applicant and each licensee shall ensure the proper safeguarding and handling of controlled substances within the facility, and shall ensure that all possible control measures are observed and that any suspected diversion or mishandling of controlled substances is reported immediately.

(o) Records shall be kept of all stock supplies of controlled substances giving an accounting of all items received or administered. (Authorized by and implementing L. 2011, ch. 82, sec. 9; effective, T-28-7-1-11, July 1, 2011; effective Nov. 14, 2011.)

28-34-136. Ancillary services. (a) Each applicant and each licensee shall document that the facility maintains a certificate of compliance from the centers for medicare and medicaid services pursuant to section 353 of the public health services act, 42 U.S.C. 263a, as revised by the clinical laboratory and current clinical laboratory improvement amendments for the purpose of performing examinations or procedures.

(b) Each applicant and each licensee shall ensure that the facility meets the following requirements for radiology services:
   (1) Allow only trained and qualified individuals to operate radiology equipment;
   (2) document annual checks and calibration of radiology equipment and maintain records of the annual checks and calibrations;
   (3) ensure that all radiology and diagnostic procedures are provided only on the order of a physician; and
   (4) maintain signed and dated clinical reports of the radiological findings in each patient's record.

(c) Each applicant and each licensee shall ensure that written policies and procedures are developed and implemented relating to drugs, including the following:
   (1) Storage of drugs;
   (2) security of drugs;
   (3) labeling and preparation of drugs;
   (4) administration of drugs; and
   (5) disposal of drugs.

(d) Each applicant and each licensee shall ensure that all drugs and medications shall be administered pursuant to a written order from a facility physician or a facility health professional.

(e) Each applicant and each licensee shall ensure that each adverse drug reaction is reported to the physician responsible for the patient and is documented in the patient record.

(f) Each applicant and each licensee shall ensure that each drug and each medication requiring refrigeration is stored in a refrigerator that is used only for drug and medication storage.

(g) Each applicant and each licensee shall ensure that there is a mechanism for the ongoing review and evaluation of the quality and scope of laboratory, radiology, and pharmaceutical services. (Authorized by and implementing L. 2011, ch. 82, sec. 9; effective, T-28-7-1-11, July 1, 2011; effective Nov. 14, 2011.)

28-34-137. Patient screening and evaluation. (a) Each applicant and each licensee shall ensure written policies and procedures are developed and implemented for the medical screening and evaluation of patients. A medical screening and evaluation shall be completed on each patient before an abortion procedure is performed.
(b) The medical screening and evaluation shall consist of the following:

(1) A medical history shall be completed, including the following:
   (A) Reported allergies to medications, antiseptic solution, or latex;
   (B) obstetric and gynecologic history;
   (C) past surgeries;
   (D) medication currently being taken by the patient; and
   (E) any other medical conditions.

(2) A physical examination shall be performed by a physician, including a bimanual examination to estimate uterine size and palpation of the adnexa.

(3) An ultrasound evaluation shall be completed for any patient who elects to have an abortion of an unborn child. The physician shall estimate the gestational age of the unborn child based on the ultrasound examination and obstetric standards in keeping with established standards of care regarding the estimation of the age of the unborn child and shall verify the estimate in the patient’s medical history. The physician shall keep the original prints of each ultrasound examination for each patient in the patient’s medical history file. The original prints may consist of a digitized record or an electronic record.

(4) The appropriate laboratory tests shall be completed, including the following:
   (A) For an abortion performed in a medical emergency and in which an ultrasound examination is not performed before the abortion procedure, urine or blood tests for pregnancy, which shall be completed before the abortion procedure;
   (B) a test for anemia as indicated;
   (C) determination of Rh factor or Rh typing, unless the patient provides written documentation of blood type acceptable to the physician; and
   (D) other tests recommended by the physician or the medical director on the basis of the physical examination, which may include tests for chlamydia and gonorrhea and other cultures, syphilis serology, and a papanicolaou procedure.

(c) Each licensee shall ensure that another individual is present in the room during a pelvic examination or an abortion procedure. If the physician conducting the examination or the procedure is male, the other individual in the room shall be female.

(d) The physician or health care professional shall review, at the request of the patient, the ultrasound evaluation results with the patient before the abortion procedure is performed, including the probable gestational age of the unborn child.

(Authorized by and implementing L. 2011, ch. 82, sec. 9; effective, T-28-7-1-11, July 1, 2011; effective Nov. 14, 2011.)

28-34-138. Abortion procedure. (a) Each applicant and each licensee shall ensure that written policies and procedures are developed and implemented for the following procedures:

(1) Safe conduct of abortion procedures that conform to obstetric standards in keeping with established standards of care regarding the estimated gestational age of the unborn child;

(2) the appropriate use of local anesthesia, analgesia, and sedation if ordered by the physician; and

(3) the use of appropriate precautions, including the establishment of intravenous access for any patient undergoing a second or third trimester abortion, unless the physician determines that establishing intravenous access is not appropriate for the patient and documents that fact in the medical record of the patient.

(b) Each licensee shall ensure that the following procedures are followed for each patient after completion of all requirements for patient screening and evaluation required in K.A.R. 28-34-137 and before performance of an abortion:

(1) Information is provided to the patient on the abortion procedure, including alternatives, risks, and potential complications.

(2) Written consent is signed and dated by the patient.

(c) Each licensee shall ensure that a physician and at least one health professional is available to each patient throughout the abortion procedure.

(d) Each licensee shall ensure that an infection control program is established which includes the following:

(1) Measures for surveillance, prevention, and control of infections;

(2) policies and procedures outlining infection control and aseptic techniques to be followed by staff members and volunteers; and

(3) training on infection control and aseptic techniques for all staff members and volunteers.

(e) Each licensee shall ensure that each abortion is performed according to the facility’s policies and procedures and in compliance with all applicable laws, rules, and regulations.

(f) Each licensee shall ensure that health professionals monitor each patient’s vital signs
throughout the abortion procedure to ensure the health and safety of the patient.

(g) Each licensee shall ensure that the following steps are performed if an abortion procedure results in the delivery of a newborn child:

1. Resuscitative measures are used to support life;
2. the newborn child is transferred to a hospital; and
3. resuscitative measures and the transfer to a hospital are documented. (Authorized by and implementing L. 2011, ch. 82, sec. 9; effective, T-28-7-1-11, July 1, 2011; effective Nov. 14, 2011.)

28-34-139. Recovery procedures; discharge. (a) Each applicant and each licensee shall ensure that written policies and procedures are developed and implemented for the post-procedure care of patients who are administered local anesthesia, analgesia, or sedation, including the following:

1. Immediate post-procedure care for each patient shall consist of observation in a supervised recovery area.
2. The vital signs and bleeding of each patient shall be monitored by a physician or a health professional.
3. Each patient shall remain in the recovery area following the abortion procedure for the following time periods, based on the gestational age of the unborn child:
   A. For a gestational age of 12 weeks or less, a minimum of 30 minutes;
   B. for a gestational age of 13 to 15 weeks, a minimum of 45 minutes; and
   C. for a gestational age of 16 weeks or more, a minimum of 60 minutes. The patient shall remain in the recovery area for a longer period of time when necessary based on the physician’s evaluation of the patient’s medical condition.

(b) Each licensee shall ensure that a physician arranges the transfer of a patient to a hospital if any complications beyond the medical capability of the health professionals of the facility occurs or is suspected.

(c) Each licensee shall ensure that a physician arranges the transfer of a newborn child to a hospital if the child requires emergency care.

(d) A physician or a nurse who is certified in advanced cardiovascular life support shall remain on the premises of the facility to facilitate the transfer of an emergency case if hospitalization of a patient or a newborn child is required. (Authorized by and implementing L. 2011, ch. 82, sec. 9; effective, T-28-7-1-11, July 1, 2011; effective Nov. 14, 2011.)

28-34-140. Transfers. (a) Each applicant and each licensee shall ensure that written policies and procedures are developed and implemented for the transfer of patients and newborn children to a hospital.

(b) Each licensee shall ensure that a physician arranges the transfer of a patient to a hospital if any complications beyond the medical capability of the health professionals of the facility occurs or is suspected.

(c) Each licensee shall ensure that a physician arranges the transfer of a newborn child to a hospital if the child requires emergency care.

(d) A physician or a nurse who is certified in advanced cardiovascular life support shall remain on the premises of the facility to facilitate the transfer of an emergency case if hospitalization of a patient or a newborn child is required. (Authorized by and implementing L. 2011, ch. 82, sec. 9; effective, T-28-7-1-11, July 1, 2011; effective Nov. 14, 2011.)

28-34-141. Follow-up contact and care. Each applicant and each licensee shall ensure that written policies and procedures are developed and implemented for follow-up and aftercare for each patient receiving an abortion procedure in the facility, including the following:

(a) With the consent of the patient, a health professional from the facility shall make a good faith effort to contact the patient by telephone within 24 hours after the procedure to assess the patient’s recovery.

(b) Each patient shall be offered a follow-up visit and, if requested by the patient, shall be scheduled no more than four weeks after completion of the procedure. The follow-up visit shall include the following:
(1) A physical examination;  
(2) a review of all laboratory tests performed as required in K.A.R. 28-34-137; and  
(3) a urine pregnancy test.

If a continuing pregnancy is suspected, a physician who performs abortion procedures shall be consulted.

(c) The physician who performs or induces the abortion, or an individual designated by the physician, shall make all reasonable efforts to ensure that the patient returns for a subsequent examination so the physician can assess the patient’s medical condition. A description of the efforts made to comply with this regulation, including the date, time, and name of the individual making the efforts, shall be included in the patient’s medical record. (Authorized by and implementing L. 2011, ch. 82, sec. 9; effective, T-28-7-1-11, July 1, 2011; effective Nov. 14, 2011.)

28-34-142. Risk management. (a) Each applicant and each licensee shall develop and implement a written risk management plan.  
(b) The risk management plan shall be reviewed and approved annually by the licensee.  
(c) Findings, conclusions, recommendations, actions taken, and results of actions taken shall be documented and reported through procedures established within the risk management plan.  
(d) All patient services, including those services provided by outside contractors or consultants, shall be periodically reviewed and evaluated in accordance with the risk management plan.  
(e) Each risk management plan shall include the following:  
(1) Section I. A description of the system implemented by the facility for investigation and analysis of the frequency and causes of reportable incidents within the facility;  
(2) Section II. A description of the measures used by the facility to minimize the occurrence of reportable incidents and the resulting injuries within the facility;  
(3) Section III. A description of the facility’s implementation of a reporting system based upon the duty of all medical staff members staffing the facility and all agents and staff members of the facility directly involved in the delivery of health care services to report reportable incidents; and  
(4) Section IV. A description of the organizational elements of the plan, including the following:  
(A) Name and address of the facility;  
(B) name and title of the facility’s risk manager;  
(C) description of involvement and organizational structure of medical staff members as related to the risk management program, including names and titles of medical staff members involved in investigation and review of reportable incidents.  
(f) The standards-of-care determinations shall include the following:  
(1) Each facility shall assure that analysis of patient care incidents complies with the definition of a “reportable incident”. Each facility shall use categories to record its analysis of each incident, and those categories shall be in substantially the following form:  
(A) Standards of care met;  
(B) standards of care not met, but with no reasonable probability of causing injury;  
(C) standards of care not met, with injury occurring or reasonably probable; or  
(D) possible grounds for disciplinary action by the appropriate licensing agency. (Authorized by and implementing L. 2011, ch. 82, sec. 9; effective, T-28-7-1-11, July 1, 2011; effective Nov. 14, 2011.)

28-34-143. Reporting requirements. In addition to the reporting requirements for risk management required in K.A.R. 28-34-142, each licensee shall ensure that the following incidents are reported to the department, on a form provided by the department:  
(a) Each incident resulting in serious injury of a patient or a viable unborn child shall be reported to the department within 10 days after the incident.  
(b) The death of a patient, other than the death of an unborn child, shall be reported to the department not later than the next department business day. (Authorized by and implementing L. 2011, ch. 82, sec. 9; effective, T-28-7-1-11, July 1, 2011; effective Nov. 14, 2011.)

28-34-144. Records. (a) Each applicant and each licensee shall maintain an organized rec-
ordkeeping system that provides for identification, security, confidentiality, control, retrieval, and preservation of all staff member and volunteer records, patient medical records, and facility information.

(b) Each applicant and each licensee shall ensure that only individuals authorized by the applicant or licensee have access to patient medical records.

(c) All records shall be available at the facility for review by the secretary or the authorized agent of the secretary.

(d) For staff member and volunteer records, each applicant and each licensee shall ensure that an individual record is maintained at the facility. The record shall include all of the following information:

(1) The staff member’s or volunteer’s name, position, title, and the first and last date of employment or volunteer service;
(2) verification of qualifications, training, or licensure, if applicable;
(3) documentation of cardiopulmonary resuscitation certification, if applicable;
(4) if a physician, documentation of verification of competence, as required in K.A.R. 28-34-132, signed and dated by the medical director;
(5) if an individual who performs ultrasounds, documentation of ultrasound training required in K.A.R. 28-34-132;
(6) if a surgical assistant, documentation of training required in K.A.R. 28-34-132; and
(7) if a volunteer, documentation of training required in K.A.R. 28-34-132.

e) For patient records, each licensee shall ensure that a record is maintained for the documentation of the following:

(1) Patient identification, including the following:
   (A) Name, address, and date of birth; and
   (B) name and telephone number of an individual to contact in an emergency;
(2) medical history as required in K.A.R. 28-34-137;
(3) the physical examination required in K.A.R. 28-34-137;
(4) laboratory test results required in K.A.R. 28-34-137;
(5) ultrasound results required in K.A.R. 28-34-137;
(6) the physician’s estimated gestational age of the unborn child as required in K.A.R. 28-34-137;
(7) each consent form signed by the patient;
(8) a record of all orders issued by a physician, physician assistant, or nurse practitioner;
(9) a record of all medical, nursing, and health-related services provided to the patient;
(10) a record of all adverse drug reactions as required in K.A.R. 28-34-136; and
(11) documentation of the efforts to contact the patient within 24 hours of the procedure and offer and schedule a follow-up visit no more than four weeks after the procedure, as required in K.A.R. 28-34-141.

(f) For facility records, each applicant and each licensee shall ensure that a record is maintained for the documentation of the following:

(1) All facility, equipment, and supply requirements specified in K.A.R. 28-34-133 through 28-34-136;
(2) ancillary services documentation required in K.A.R. 28-34-136;
(3) risk management activities required in K.A.R. 28-34-142; and
(4) submission of all reports required in K.A.R. 28-34-143. (Authorized by L. 2011, ch. 82, sec. 9; implementing L. 2011, ch. 82, secs. 5 and 9; effective, T-28-7-1-11, July 1, 2011; effective Nov. 14, 2011.)

Article 35.—RADIATION

28-35-135l. Definitions. As used in these regulations, each of the following terms shall have the meaning assigned in this regulation: (a) “Lead equivalent” means the thickness of lead affording the same attenuation, under specified conditions, as the material in question.

(b) “Leakage radiation” means radiation emanating from the device source assembly, except for the following:

(1) The useful beam; and
(2) radiation produced when the exposure switch or timer is not activated for diagnosis or therapy.

(c) “Leakage technique factors” means the technique factors associated with the tube housing assembly that are used in measuring leakage radiation. The leakage technique factors shall be defined as follows:

(1) For diagnostic source assemblies intended for capacitor energy storage equipment, the maximum rated number of exposures in an hour for operation at the maximum rated peak tube potential, with the quantity of charge per exposure be-
(2) for diagnostic source assemblies intended for field emission equipment rated for pulsed operation, the maximum rated number of X-ray pulses in an hour for operation at the maximum rated peak tube potential; and

(3) for all other diagnostic or therapeutic source assemblies, the maximum rated peak tube potential and the maximum rated continuous tube current for the maximum rated peak tube potential.

(d) “License” means a document issued in accordance with these regulations specifying the conditions of use of radioactive material.

(e) “Licensed or registered material” means radioactive material received, possessed, used, transferred, or disposed of under a general or specific license or registration issued by the department.

(f) “Licensee” means any person who is licensed in accordance with these regulations.

(g) “Licensing state” means any state that has been granted final designation by the conference of radiation control program directors, inc., for the regulatory control of NARM, as defined in K.A.R. 28-35-135n.

(h) “Light field” means that area of the intersection of the light beam from the beam-limiting device and one plane in the set of planes parallel to and including the plane of the image receptor, whose perimeter is the locus of points at which the illumination is one-fourth of the maximum in the intersection.

(i) “Line-voltage regulation” means the difference between the no-load and the load line potentials, expressed as a percent of the load line potential, using the following equation:

\[
\text{Percent line-voltage regulation} = 100 \left( \frac{V_n - V_l}{V_l} \right)\]

where

\[V_n = \text{No-load line potential and} \]
\[V_l = \text{Load line potential.}\]

(j) “Local component” means any part of an analytical X-ray system. This term shall include components that are struck by X-rays, including radiation source housings, port and shutter assemblies, collimators, sample holders, cameras, goniometers, detectors, and shielding. This term shall not include power supplies, transformers, amplifiers, readout devices, and control panels.

(k) “Logging supervisor” means the individual who uses sources of radiation or provides personal supervision of the utilization of sources of radiation at a well site.

(l) “Logging tool” means a device used subsurface to perform well logging.

(m) “Lost or missing licensed or registered source of radiation” means a licensed or registered source of radiation whose location is unknown. This term shall include licensed or registered material that has been shipped but has not reached its planned destination and whose location cannot be readily traced in the transportation system.

(n) “Lot tolerance percent defective” means the poorest quality, expressed as the percentage of defective units, in an individual inspection lot that may be accepted.

(o) “Low dose-rate remote afterloader” means a brachytherapy device that remotely delivers a dose rate of less than or equal to two gray per hour at the point or surface where the dose is prescribed. (Authorized by K.S.A. 48-1607; implementing K.S.A. 48-1603 and 48-1607; effective Dec. 30, 2005; amended March 18, 2011.)
ual identified as the qualified teletherapy physicist on a department license.

(f) “Temporary job site” means a location where operations are performed and where sources of radiation may be stored, other than the location or locations of use authorized on the license or registration.

(g) “Tenth-value layer (TVL)” means the thickness of a specified material that attenuates X-radiation or gamma radiation to the extent that the air kerma rate, exposure rate, or absorbed dose rate is reduced to one-tenth of the value measured without the material at the same point.

(h) “Termination of irradiation” means the stopping of irradiation in a fashion not permitting the continuance of irradiation without the resetting of operating conditions at the control panel.

(i) “Test” means the process of verifying compliance with an applicable regulation.

(j) “Therapeutic dosage” means a dosage of unsealed by-product material that is intended to deliver a radiation dose to a patient or human research subject for palliative or curative treatment.

(k) “Therapeutic dose” means a radiation dose delivered from a source containing by-product material to a patient or human research subject for palliative or curative treatment.

(l) “Therapeutic-type tube housing” means the following:

1. For X-ray equipment not capable of operating at 500 kVp or above, an X-ray tube housing constructed so that the leakage radiation, at a distance of one meter from the source, does not exceed one roentgen in an hour when the tube is operated at its maximum rated continuous current for the maximum rated tube potential; and

2. for X-ray equipment capable of operating at 500 kVp or above, an X-ray tube housing constructed so that the leakage radiation, at a distance of one meter from the source, does not exceed 0.1 percent of the useful beam dose rate at one meter from the source for any of the tube’s operating conditions.

Areas of reduced protection shall be acceptable if the average reading over any area of 100 cm², at a distance of one meter from the source, does not exceed any of the values specified in this subsection.

(m) “These regulations” means article 35 in its entirety.

(n) “Tomogram” means the depiction of the X-ray attenuation properties of a section through the body.

(o) “Total effective dose equivalent” and “TEDE” mean the sum of the effective dose equivalent for external exposures and the committed effective dose equivalent for internal exposures.

(p) “Total organ dose equivalent” and “TODE” mean the sum of the deep dose equivalent and the committed dose equivalent delivered to the organ receiving the highest dose.

(q) “Traceable to a national standard” means that a quantity or a measurement has been compared to a national standard directly or indirectly through one or more intermediate steps and that all comparisons are documented.

(r) “Transport index” means the dimensionless number, rounded up to the first decimal place, placed on the label of a package to designate the degree of control to be exercised by the carrier during transportation. The transport index is the maximum radiation level in millirems per hour at one meter from the external surface of the package.

(s) “Tritium neutron-generator-target source” means a tritium source used within a neutron generator tube to produce neutrons for use in well-logging applications.

(t) “Tube” means an X-ray tube, unless otherwise specified.

(u) “Tube housing assembly” means the tube housing with a tube installed, including high-voltage transformers or filament transformers, or both, and other appropriate elements when contained within the tube housing.

(v) “Treatment site” means the anatomical description of the tissue intended to receive a radiation dose, as specified in a written directive.

(w) “Tube rating chart” means the set of curves that describes the rated limits of operation of the tube in terms of the technique factors.

(x) “Type A package” means packaging that, together with the radioactive contents limited to A₁ or A₂ as appropriate, is designed to retain the integrity of containment and shielding under normal conditions of transport as demonstrated by the tests specified in 49 CFR 173.465 or 49 CFR 173.466, as appropriate.

(y) “Type B package” and “type B transport container” mean packaging that meets the applicable requirements specified in 10 CFR 71.51.

28-35-135w. Definitions. As used in these regulations, each of the following terms shall have the meaning assigned in this regulation: (a) “Waste” means any low-level radioactive waste that is acceptable for disposal in a land disposal facility. Low-level radioactive waste shall mean radioactive waste that meets both of the following conditions:

1. Is not classified as any of the following:
   (A) High-level radioactive waste;
   (B) spent nuclear fuel;
   (C) “byproduct material,” as defined in paragraphs (2), (3), and (4) in the definition of “byproduct material” in 10 CFR 20.1003, dated December 1, 2009;
   (D) uranium or thorium tailings; and
   (E) transuranic waste; and
2. is classified as low-level radioactive waste consistent with existing law and in accordance with paragraph (a)(1) by the nuclear regulatory commission.

(b) “Waste-handling licensee” means any person licensed to receive and store radioactive wastes before disposal, any person licensed to dispose of radioactive waste, or any person licensed to both receive and dispose of radioactive waste.

(c) “Wedge filter” means an added filter effecting continuous, progressive attenuation of all or part of the useful beam.

(d) “Week” means seven consecutive days, starting on Sunday.

(e) “Weighting factor \( w_T \) for an organ or tissue \( T \)” means the proportion of the risk of stochastic effects resulting from irradiation of that organ or tissue to the total risk of stochastic effects when the whole body is irradiated uniformly. For calculating the effective dose equivalent, the values of \( w_T \) shall be as follows:

<table>
<thead>
<tr>
<th>Organ or Tissue (T)</th>
<th>( w_T )</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gonads</td>
<td>0.25</td>
</tr>
<tr>
<td>Breast</td>
<td>0.15</td>
</tr>
<tr>
<td>Red bone marrow</td>
<td>0.12</td>
</tr>
<tr>
<td>Lung</td>
<td>0.12</td>
</tr>
<tr>
<td>Thyroid</td>
<td>0.03</td>
</tr>
<tr>
<td>Bone surfaces</td>
<td>0.03</td>
</tr>
<tr>
<td>Remainder organs</td>
<td>0.30(^a)</td>
</tr>
<tr>
<td>Whole body</td>
<td>1.00(^b)</td>
</tr>
</tbody>
</table>

\(^a\) 0.30 results from 0.06 for each of the five remainder organs that receive the highest doses, excluding the skin and the lens of the eye.

\(^b\) For the purpose of weighting the external whole body dose in determining the total effective dose equivalent, a single weighting factor, \( w_T = 1.0 \), is specified. The use of other weighting factors for external exposure may be approved by the secretary if the licensee or registrant demonstrates that the effective dose to be received is within the limits specified in these regulations.

(f) “Well bore” means a drilled hole in which wireline service operations and subsurface tracer studies are performed.

(g) “Well logging” means the lowering and raising of measuring devices or tools that could contain sources of radiation into well bores or cavities for the purpose of obtaining information about the well or adjacent formations.

(h) “Wet-source-change irradiator” means an irradiator whose sources are replaced underwater.

(i) “Wet-source-storage irradiator” means an irradiator whose sources are stored underwater.

(j) “Whole body,” for purposes of external exposure, means the head and trunk, including the male gonads, and shall include the arms above the elbow and the legs above the knee.

(k) “Wireline” means a cable containing one or more electrical conductors that is used to raise and lower logging tools in the well bore.

(l) “Wireline service operation” means any evaluation or mechanical service that is performed in the well bore using devices on a wireline.

(m) “Worker” means an individual, contractor, or subcontractor engaged in work that is performed under a license or registration, or both, issued by the department and that is controlled by a licensee or registrant, or both. This term shall not include a specific licensee or registrant.

(n) “Working level (WL)” means any combination of short-lived radon daughters in one liter of air that will result in the ultimate emission of \( 1.3 \times 10^5 \) MeV of potential alpha particle energy. The short-lived radon daughters are the following:

1. For radon-222, the following:
   (A) Polonium-218;
   (B) lead-214;
   (C) bismuth-214; and
   (D) polonium-214; and
2. for radon-220, the following:
   (A) Polonium-216;
   (B) lead-212;
   (C) bismuth-212; and
   (D) polonium-212.
(o) “Working-level month (WLM)” means an exposure to one working level for 170 hours.
(p) “Written directive” means a written order for a specific patient that is dated and signed by an authorized user before the administration of a radiopharmaceutical or radiation and that contains any of the following sets of information:

1. For any administration of quantities greater than 1.11 megabecquerels (30 μCi) of sodium iodide I-125 or I-131, the radionuclide and dosage;
2. For a therapeutic administration of a radiopharmaceutical other than sodium iodide I-125 or I-131, the radiopharmaceutical, dosage, and route of administration;
3. For gamma stereotactic radiosurgery, the target coordinates, collimator size, plug pattern, and total dose;
4. For teletherapy, the total dose, dose per fraction, treatment site, and overall treatment period;
5. For high dose-rate remote afterloading brachytherapy, the radionuclide, treatment site, and total dose; or
6. For all other brachytherapy, the following information:
   (A) Before implantation, the radionuclide, number of sources, and source strengths; and
   (B) after implantation but before completion of the procedure, the radionuclide, treatment site, and either the total source strength and exposure time or the total dose. (Authorized by and implementing K.S.A. 48-1607; effective, T-86-37, Dec. 11, 1985; effective May 1, 1986; amended Dec. 30, 2005; amended March 18, 2011.)

28-35-175a. Persons licensed. (a) A licensed person shall not manufacture, produce, receive, use, possess, acquire, own, transfer, or dispose of radioactive material, except as authorized in a specific or general license issued pursuant to these regulations. Each manufacturer, producer, or processor of any equipment, device, commodity, or other product containing source or “by-product material,” as defined in 10 CFR 20.1003, dated December 1, 2009, for which subsequent receipt, use, possession, acquisition, ownership, transfer, and disposal by any other person is exempted from these regulations shall obtain authority to transfer possession or control to the other person from the nuclear regulatory commission.
(b) In addition to the requirements of this part, each licensee shall be subject to the requirements of part 1, part 4, and part 10 of these regulations. In addition to being subject to part 1, part 4, and part 10, specific licensees shall be subject to all of the following requirements:

1. Licensees using radioactive material in the healing arts shall be subject to the requirements of part 6.
2. Licensees using radioactive material in industrial radiography shall be subject to the requirements of part 7.
3. Licensees using radioactive material in wireline and subsurface tracer studies shall be subject to the requirements of part 11 of these regulations. (Authorized by and implementing K.S.A. 48-1607; effective, T-86-37, Dec. 11, 1985; effective May 1, 1986; amended Dec. 30, 2005; amended March 18, 2011.)

28-35-178b. General license; certain detecting, measuring, gauging, or controlling devices and certain devices for producing light or an ionized atmosphere. (a)(1) Subject to the provisions of subsections (b) and (c), each commercial and industrial firm, research, educational, and medical institution, individual in the conduct of the individual’s business, and federal, state, or local government agency shall be deemed to have been issued a general license to acquire, receive, possess, use, or transfer radioactive material that is contained in any device designed, manufactured, and used for one or more of the following purposes:

(A) Detecting, measuring, gauging, or controlling thickness, density, level interface location, radiation leakage, or qualitative or quantitative chemical composition; or
(B) producing light or an ionized atmosphere.
(2) The general license specified in paragraph (1) of this subsection shall apply only to radioactive material contained in any device that has been manufactured and labeled by a manufacturer in accordance with the specifications of a specific license issued to that manufacturer by the secretary, the nuclear regulatory commission, or an agreement state.
(3) The general license specified in paragraph (1) of this subsection shall not apply to radioactive material in any device containing at least 370 MBq (10 mCi) of cesium-137, 3.7 MBq (0.1 mCi) of strontium-90, 37 MBq (1 mCi) of cobalt-60, 3.7 MBq (0.1 mCi) of radium-226, or 37 MBq (1 mCi) of americium-241 or any other transuranic element, based on the activity indicated on the label.
(4) Each device shall have been received from one of the specific licensees described in paragraph (a)(2) or through a transfer made under paragraph (b)(9).

(b) Each person who acquires, receives, possesses, uses, or transfers radioactive material in a device pursuant to the general license specified in subsection (a) shall comply with all of the following requirements:

(1) Each person subject to this subsection shall ensure that all labels affixed to the device at the time of receipt and bearing a statement that removal of the label is prohibited are maintained and shall comply with all instructions and precautions provided by these labels.

(2) Each person subject to this subsection shall ensure that the device is tested for leakage of radioactive material and proper operation of the on-off mechanism and indicator, if any, at no longer than six-month intervals or at any other intervals specified in any manufacturer’s label affixed to the device, except as follows:

(A) The person shall not be required to test devices containing only krypton for leakage of radioactive material.

(B) The person shall not be required to test, for any purpose, any device containing only tritium, not more than 100 microcuries of other beta-emitting or gamma-emitting material, or 10 microcuries of alpha-emitting material or any device held in storage in the original shipping container before initial installation.

(3) Each person subject to this subsection shall ensure that the tests required by paragraph (b)(2) and other operations involving testing, installation, servicing, and removal from installation of the radioactive material, its shielding, or containment are performed in compliance with one of the following:

(A) In accordance with instructions provided on labels affixed to the device; or

(B) by a person holding a specific license issued under this part or equivalent regulations of NRC or an agreement state to perform the tests and other operations.

(4) (A) Each person subject to this subsection shall maintain records showing compliance with the requirements of paragraphs (b)(2) and (b)(3). The records shall show the results of each test. The records also shall show the dates of the testing, installation, servicing, or removal from installation of the radioactive material, its shielding, or containment and the name of each person performing one or more of these tests and other operations.

(B) Each person shall maintain records of tests for leakage of radioactive material required by paragraph (b)(2) for three years after the next required leak test is performed or until the sealed source is transferred or disposed of. Each person shall maintain records of tests of the on-off mechanism and indicator, as required by paragraph (b)(2), for three years after the next required test of the on-off mechanism and indicator is performed or until the sealed source is transferred or disposed of. Each person shall maintain the records required by paragraph (b)(3) for three years from the date of the recorded event or until the device is transferred or disposed of.

(5) Upon a failure of or damage to, or any indication of a possible failure of or damage to, the shielding of the radioactive material or the on-off mechanism or indicator, or upon the detection of 0.005 microcurie or more removable radioactive material, each person subject to this subsection shall take the following actions:

(A) Immediately suspend operation of the device until either of the following conditions is met:

(i) The device has been repaired by the manufacturer or other person holding a specific license issued under this part or equivalent regulations of NRC or an agreement state to repair the device; or

(ii) the device is transferred to a person authorized by a specific license to receive the radioactive material contained in the device;

(B) within 30 days, furnish to the secretary a report containing a brief description of the event and the remedial action taken; and

(C) within 30 days, if contamination of the premises or the environs is likely, furnish to the secretary a plan for ensuring that the premises and environs are acceptable for unrestricted use. The criteria for unrestricted use specified in K.A.R. 28-35-205 may be applicable, as determined by the secretary.

(6) A person subject to this subsection shall not abandon the device.

(7) A person shall not export any device containing radioactive material except in accordance with 10 CFR part 110.

(8) (A) Each person shall transfer or dispose of any device containing radioactive material only by export as provided in paragraph (b)(7), by transfer to another general licensee as authorized in paragraph (b)(9), or to a person authorized to receive
the device by a specific license issued under this part or equivalent regulations of NRC or an agreement state.

(B) Each person shall furnish a report to the department within 30 days after the export of the device or the transfer of the device to a specific licensee. The report shall contain the following information:

(i) The identification of the device by manufacturer’s name, model number, and serial number;

(ii) the name, address, and license number of the person receiving the device; and

(iii) the date of the transfer.

(C) Each person shall obtain written department approval before transferring the device to any other specific licensee not specifically identified in paragraph (b)(8)(A). The holder of a specific license may transfer a device for possession and use under its own specific license without approval, if the holder performs the following:

(i) Either verifies that the specific license authorizes the possession and use or applies for and obtains an amendment to the license authorizing the possession and use;

(ii) ensures that the device is labeled in compliance with these regulations. The label shall retain the name of the manufacturer, the model number, and the serial number;

(iii) obtains the manufacturer’s or initial transferor’s information concerning maintenance, including leak testing procedures that are applicable under the specific license; and

(iv) reports the transfer as required by paragraph (b)(8)(B).

(9) Any person subject to this subsection may transfer the device to another general licensee only if either of the following conditions is met:

(A) The device remains in use at a particular location. In this case, the transferor shall give the transferee a copy of this regulation and any safety documents identified in any label affixed to the device and, within 30 days of the transfer, provide a written report to the secretary containing identification of the device by manufacturer’s name, model number, and serial number; the name and address of the transferee; and the name, telephone number, and position of an individual who can be contacted by the secretary concerning the device.

(B) The device is held in storage in the original shipping container at its intended location of use before initial use by a general licensee.

(10) Each person subject to this subsection shall comply with the provisions of K.A.R. 28-35-228a and K.A.R. 28-35-229a relating to reports of radiation incidents, theft, or loss of licensed material, but shall be exempt from the other requirements of parts 4 and 10 of these regulations.

(11) Each person shall respond to all written requests from the department to provide information relating to the general license within 30 calendar days of the date of the request or on or before any other deadline specified in the request. If the person cannot provide the requested information within the allotted time, the person, within that same time period, shall request a longer period to supply the information by submitting a letter to the department and shall provide written justification as to why the person cannot comply.

(12) Each general licensee shall appoint an individual responsible for having knowledge of the appropriate regulations and requirements and the authority for taking required actions to comply with appropriate regulations and requirements. The general licensee, through this individual, shall ensure day-to-day compliance with the appropriate regulations and requirements. This appointment shall not relieve the general licensee of any of the licensee’s responsibility in this regard.

(13)(A) Each person shall register, in accordance with paragraph (b)(13)(B), each device generally licensed as required by this regulation. Each address for a location of use, as described in paragraph (b)(13)(B)(iv), shall represent a separate general licensee and shall require a separate registration and fee.

(B) In registering each device, the general licensee shall furnish the following information and any other information specifically requested by the department:

(i) The name and mailing address of the general licensee;

(ii) information about each device as indicated on the label, including the manufacturer’s name, the model number, the serial number, and the radioisotope and activity;

(iii) the name, title, and telephone number of the responsible person appointed as a representative of the general licensee under paragraph (b)(12);

(iv) the address or location at which each device is used or stored, or both. For each portable device, the general licensee shall provide the address of the primary place of storage;

(v) certification by the responsible represen-
(vi) certification by the responsible representative of the general licensee that the person is aware of the requirements of the general license.

(14) Each person shall report any change in the mailing address for the location of use, including any change in the name of the general licensee, to the department within 30 days of the effective date of the change. For a portable device, a report of address change shall be required only for a change in the primary place of storage of the device.

(15) No person may store a device that is not in use for longer than two years. If any device with shutters is not being used, the shutters shall be locked in the closed position. The testing required by paragraph (b)(2) shall not be required to be performed during the period of storage only. If the device is put back into service or transferred to another person and was not tested at the required test interval, the device shall be tested for leakage before use or transfer, and all shutters shall be tested before use. Each device kept in storage for future use shall be excluded from the two-year time limit if the general licensee performs quarterly physical inventories of the device while the device is in storage.

(c) Nothing in this regulation shall be deemed to authorize the manufacture or import of any device containing radioactive material.


28-35-178e. Americium-241 or radium-226 in the form of calibration or reference sources. (a) A general license to acquire, possess, use and transfer, in accordance with the provisions of subsections (b) and (c), americium-241 or radium-226 in the form of calibration or reference sources is hereby issued to any person who holds a specific license issued by the nuclear regulatory commission that authorizes the agency to acquire, possess, use, and transfer by-product material, source material, or special nuclear material.

(b) The general license issued in subsection (a) shall apply only to calibration or reference sources that have been manufactured or initially transferred in accordance with the specifications contained in a specific license issued by the secretary, the nuclear regulatory commission, or an agreement state.

(c) The general license issued in subsection (a) shall be subject to the provisions of K.A.R. 28-35-184a, and to all of the provisions of parts 4 and 10 of these regulations. In addition, persons who acquire, possess, use, and transfer one or more calibration or reference sources pursuant to this general license shall meet the following requirements:

(1) Not possess, at any one time, at any one location of storage or use, more than 5 microcuries of either americium-241 or radium-226 in such sources;

(2) not receive, possess, use, or transfer such a source unless the source, or the storage container, bears a label that includes the following statement or a substantially similar statement that contains the information called for in the following statement:

"The receipt, possession, use and transfer of this source, Model _____ Serial No. _____ are subject to a general license and the regulations of the United States Nuclear Regulatory Commission or of a State with which the commission has entered into an agreement for the exercise of regulatory authority. Do not remove this label. CAUTION—RADIOACTIVE MATERIAL—THIS SOURCE CONTAINS AMERICIUM-241 (or RADIUM-226). DO NOT TOUCH RADIOACTIVE PORTION OF THIS SOURCE."

(Name of manufacturer or initial transferor);

(3) not transfer, abandon, or dispose of such source except by transfer to a person authorized by a license issued by the secretary, the nuclear regulatory commission, or an agreement state to receive the source;

(4) store such source, except when the source is being used, in a closed container designed and constructed to contain either americium-241 or radium-226 that might otherwise escape during storage; and

(5) not use the source for any purpose other than the calibration of radiation detectors or the standardization of other sources.

(d) The general license issued in this regulation shall not authorize the manufacture, or the importation or exportation, of calibration or reference sources containing either americium-241 or

28-35-178j. General license for use of radioactive material for certain in vivo clinical or laboratory testing. (a) Except as provided in subsections (b) and (c), each person shall be exempt from the license requirements in part 3 and part 6 of these regulations if the person receives, possesses, uses, transfers, owns, or acquires any capsules containing 37 kBq (1 μCi) of carbon-14 urea, allowing for nominal variation that may occur during the manufacturing process for in vivo diagnostic use for humans.

(b) Before using the capsules specified in subsection (a) for research involving human subjects, each person shall apply and shall be considered for approval for a specific license. Each person shall be required to have a specific license before engaging in the research specified in this subsection.

(c) Before manufacturing, preparing, processing, producing, packaging, repackaging, or transferring the capsules specified in subsection (a) for commercial distribution, each person shall apply and shall be considered for approval for a specific license. Each person shall be required to have a specific license before performing any of the actions specified in this subsection.

(d) Nothing in this regulation shall exempt any person from applicable FDA requirements, other federal requirements, and state requirements governing receipt, administration, and use of drugs.

(28-35-180b. Financial assurance for decommissioning. (a) Each applicant for a specific license authorizing the possession and use of unsealed radioactive material with a half-life greater than 120 days and in quantities exceeding $1,125,000.00 shall submit a decommissioning funding plan as described in K.A.R. 28-35-201. Each applicant shall also submit the decommissioning funding plan if a combination of isotopes is involved and if R divided by 10^5 is greater than one, where R is defined here as the sum of the ratios of the quantity of each isotope to the applicable value specified in K.A.R. 28-35-201.

(b) Each applicant for a specific license authorizing the possession and use of radioactive material with a half-life greater than 120 days and in quantities specified in table I shall submit either of the following:

(1) A decommissioning funding plan as described in subsection (e); or

(2) A certification that financial assurance for decommissioning has been provided in the amount prescribed by table I, using one of the methods described in subsection (f). The certification may state that the appropriate assurance is to be obtained after the application has been approved and the license has been issued, but before the receipt of licensed material. If the applicant defers execution of the financial instrument required under subsection (f) until after the license has been issued, a signed original of the financial instrument shall be submitted to the department before the applicant receives the licensed material. If the applicant does not defer execution of the financial instrument required under subsection (f), the applicant shall submit to the department, as part of the certification, a signed original of the financial instrument.

(c) Each holder of a specific license that is a type specified in subsection (a) or (b) shall provide financial assurance for decommissioning in accordance with the following requirements:

(1) Each holder of a specific license that is a type specified in subsection (a) shall submit a decommissioning funding plan as specified in subsection (e) or a certification of financial assurance for decommissioning in an amount equal to at least $1,125,000.00. Each licensee shall submit the plan or certification to the department in accordance with the criteria specified in this regulation. If the licensee submits a certification of financial assurance rather than a decommissioning funding plan, the licensee shall include a decommissioning funding plan in any application for license renewal.

(2) Each holder of a specific license that is a type specified in subsection (b) shall submit a decommissioning funding plan as specified in subsection (e) or a certification of financial assurance for decommissioning. Each licensee shall submit the plan or certification to the department, in accordance with the requirements specified in this regulation.

(d) The amounts of financial assurance required for decommissioning, by quantity of material, shall be those specified in table I.
Financial assurance for decommissioning
by quantity of material

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>If the possession limit is greater than $10^4$ but less than or equal to $10^6$ times the applicable quantities specified in K.A.R. 28-35-201, in unsealed form</td>
<td>$1,125,000.00</td>
</tr>
<tr>
<td>For a combination of isotopes, in unsealed form, if $R$, as defined in subsection (a), divided by $10^4$ is greater than one, but $R$ divided by $10^8$ is equal to or less than one</td>
<td>$1,125,000.00</td>
</tr>
<tr>
<td>If the possession limit is greater than $10^7$ but less than or equal to $10^8$ times the applicable quantities specified in K.A.R. 28-35-201, in unsealed form</td>
<td>$225,000.00</td>
</tr>
<tr>
<td>For a combination of isotopes, in unsealed form, if $R$, as defined in subsection (a), divided by $10^4$ is greater than one, but $R$ divided by $10^8$ is less than or equal to one</td>
<td>$225,000.00</td>
</tr>
<tr>
<td>If the possession limit is greater than $10^9$ times the applicable quantities specified in K.A.R. 28-35-201, in sealed sources or foils</td>
<td>$113,000.00</td>
</tr>
<tr>
<td>For a combination of isotopes, in sealed sources or foils, if $R$, as defined in subsection (a), divided by $10^9$ is greater than one</td>
<td>$113,000.00</td>
</tr>
</tbody>
</table>

(e) Each decommissioning funding plan shall contain the following:

1. A cost estimate for decommissioning;
2. A description of the method of ensuring funds for decommissioning, selected from the methods specified in subsection (f);
3. A description of the means for periodically adjusting cost estimates and associated funding levels over the life of the facility;
4. A certification by the licensee that financial assurance for decommissioning has been provided in the amount of the cost estimate for decommissioning; and
5. A signed original of the financial instrument obtained to satisfy the requirements specified in subsection (f).

(f) Each licensee shall provide financial assurance for decommissioning by one or more of the following methods.

1. Prepayment. “Prepayment” shall mean cash or liquid assets that meet the following criteria:
   - Before the start of operation, are deposited into an account that is segregated from the licensee’s assets and outside of the licensee’s administrative control; and
   - Consist of an amount that is sufficient to pay decommissioning costs.
   The prepayment may be in the form of a trust, escrow account, government fund, certificate of deposit, or deposit of government securities.

2. A surety instrument, insurance policy, or other guarantee method. The licensee may use a surety instrument, insurance policy, or other similar means to guarantee that decommissioning costs will be paid. A surety instrument may be in the form of a surety bond, letter of credit, or line of credit. A parent company’s guarantee of funds for decommissioning costs based on a financial test may be used if the guarantee and test meet the requirements of K.A.R. 28-35-203. A parent company’s guarantee shall not be used in combination with other financial methods to meet the requirements in this regulation. A guarantee of funds by the applicant or licensee for decommissioning costs based on a financial test may be used if the guarantee and test meet the requirements of K.A.R. 28-35-203. A guarantee by the applicant or licensee shall not be used in combination with any other financial methods to meet the requirements in this regulation or in any situation in which a parent company of the applicant or licensee holds majority control of the voting stock of the company. Each surety instrument or insurance policy used to provide financial assurance for decommissioning shall contain the following requirements:
   - (A) The surety instrument or insurance policy shall be open-ended or, if written for a specified term, shall be renewed automatically, unless 90 days or more before the renewal date, the insurer notifies the department, the beneficiary, and the licensee of the insurer’s intention not to renew. The surety instrument or insurance policy shall also provide that the full face amount will be paid to the beneficiary automatically before the expiration without proof of forfeiture if the licensee fails to provide a replacement that meets the requirements of this regulation within 30 days after receipt of notification of cancellation.
   - (B) The surety instrument or insurance policy shall be payable to an approved trust established for decommissioning costs. The trustee may include an appropriate state or federal agency or an entity that has the authority to act as a trustee and whose trust operations are regulated and examined by a federal or state agency.
   - (C) The surety instrument or insurance policy shall remain in effect until the license is terminated by the department.
   - (3) External sinking fund. A licensee may provide financial assurance for decommissioning costs based on a financial test and meet the requirements of K.A.R. 28-35-203.
through an external sinking fund in which deposits are made at least annually, coupled with a surety instrument or insurance policy. The value of the surety instrument or insurance policy may decrease by the amount accumulated in the sinking fund. “External sinking fund” shall mean a fund that meets both of the following conditions:

(A) Is established and maintained by setting aside funds periodically in an account segregated from the licensee’s assets and outside the licensee’s administrative control; and

(B) contains a total amount of funds sufficient to pay the decommissioning costs when termination of the operation is expected. An external sinking fund may be in the form of a trust, escrow account, government fund, certificate of deposit, or deposit of government securities. The surety or insurance provisions shall meet the requirements specified in this subsection.

(4) Statement of intent. Any federal, state, or local government licensee may submit a statement of intent containing a cost estimate for decommissioning or an amount based on table I of this regulation and indicating that funds for decommissioning will be obtained when necessary.

(g) Each person licensed under subsections (a) through (g) shall keep records of all information that is relevant to the safe and effective decommissioning of the facility. The records shall be kept in an identified location until the license is terminated by the department. If records of relevant information are kept for other purposes, the licensee may refer to these records and the location of these records within the records kept pursuant to this subsection.

(h) Each licensee shall maintain decommissioning records, which shall consist of the following information:

(1) Records of spills or other unusual occurrences involving the spread of contamination in and around the facility, equipment, or site. These records may be limited to records of instances in which contamination remains after any cleanup procedures or when there is reasonable likelihood that contaminants could have spread to inaccessible areas. These records shall include any known information identifying the nuclides, quantities, forms, and concentrations involved in the spill or occurrence;

(2) drawings of the following, both as originally built and, if applicable, as modified:

(A) The structures and equipment in restricted areas where radioactive materials are used or stored, or both; and

(B) the locations of possible inaccessible contamination. If the licensee refers to required drawings other than those kept pursuant to this regulation, the licensee shall not be required to index each relevant document individually. If drawings are not available, the licensee shall substitute available information concerning these areas and locations;

(3) a list of the following information, which shall be contained in a single document and updated every two years:

(A) All areas designated and formerly designated as restricted areas;

(B) all areas outside of restricted areas that require the documentation specified in this subsection;

(C) all areas outside of restricted areas where current and previous wastes have been buried and documented as specified in K.A.R. 28-35-227j; and

(D) all areas outside of restricted areas that contain material so that, if the license expired, the licensee would be required either to decontaminate the area to unrestricted release levels or to apply for approval for disposal as specified in K.A.R. 28-35-225a.

Those areas containing sealed sources only shall not be included in the list if the sources have not leaked, no contamination remains in the area after any leak, or the area contains only radioactive materials having half-lives of less than 65 days; and

(4) the following records:

(A) Records of the cost estimate performed for the decommissioning funding plan or records of the amount certified for decommissioning; and

(B) if either a funding plan or certification is used, records of the funding method used for assuring funds.

(i) Each applicant for a specific license shall make arrangements for a long-term care fund pursuant to K.S.A. 48-1623, and amendments thereto. Each applicant for any of the following types of specific licenses shall establish the long-term care fund before the issuance of the license or before the termination of the license if the applicant chooses, at the time of licensure, to provide a surety instrument in lieu of a long-term care fund:

(1) Waste-handling licenses;

(2) source material milling licenses; and

(3) licenses for any facilities formerly licensed
by the U.S. atomic energy commission or the nuclear regulatory commission, if required.

(j)(1) Each applicant shall agree to notify the department, in writing, immediately following the filing of a voluntary or involuntary petition for bankruptcy under any chapter of title 11, bankruptcy, of the United States code by or against any of the following:
(A) The licensee;
(B) any person controlling the licensee or listing the license or licensee as property of the estate; or
(C) any affiliate of the licensee.
(2) The bankruptcy notification shall indicate the following:
(A) The name of the bankruptcy court in which the petition for bankruptcy was filed; and
(B) the date on which the petition was filed.
(Authorized by and implementing K.S.A. 48-1607; effective Dec. 30, 2005; amended March 18, 2011.)

28-35-181a. Specific licenses for human use of radioactive material in medical institutions. An application for a specific license for human use of radioactive material in institutions shall not be approved unless all of the following conditions are met:
(a) The applicant has appointed a radiation safety committee as specified in 10 CFR 35.24(f), which is adopted by reference in K.A.R. 28-35-264.
(b) The applicant possesses adequate facilities for the clinical care of patients.
(c) The physician or physicians designated on the application as the user or users have substantial experience in handling and administering radioactive materials and, if applicable, clinical management of radioactive patients.
(d) If the application is for a license to use unspecified quantities or multiple types of radioactive material, the applicant or applicant’s staff has substantial experience in the use of a variety of radioactive materials for a variety of human uses.
(Authorized by and implementing K.S.A. 48-1607; effective, T-86-37, Dec. 11, 1985; effective May 1, 1986; amended March 18, 2011.)


28-35-181j. Specific licenses to manufacture and distribute calibration sources containing americium-241 or radium-226. (a) An application for a specific license to manufacture or initially transfer calibration or reference sources containing americium-241 or radium-226 for distribution to persons generally licensed under K.A.R. 28-35-178e shall not be approved unless the following requirements are met:
(1) The applicant shall satisfy the general requirements of part 3 of these regulations.
(2) The applicant shall submit sufficient information regarding each type of calibration or reference source pertinent to evaluation of the potential radiation exposure, including the following:
(A) Chemical and physical form and maximum quantity of americium-241 or radium-226 in the source;
(B) details of construction and design;
(C) details of the method of incorporation and binding of the americium-241 or radium-226 in the source;
(D) procedures for and results of prototype testing of sources that are designed to contain more than 0.005 microcurie of americium-241 or radium-226, to demonstrate that the americium-241 or radium-226 contained in each source will not be released or be removed from the source under normal conditions of use;
(E) details of quality control procedures to be followed in manufacture of the source;
(F) description of labeling to be affixed to the source or the storage container for the source; and
(G) any additional information, including experimental studies and tests, required by the department to facilitate a determination of the safety of the source.
(3) Each source shall contain no more than 5 μCi of americium-241 or radium-226.
(4) The method of incorporation and binding of more than 0.005 μCi of the americium-241 or radium-226 in the source shall prevent the release or removal of americium-241 or radium-226 from the source under normal conditions of use and handling of the source.
(5) The applicant shall conduct prototype tests, in the order listed, on each of five prototypes of the source containing more than 0.185 kilobecquerel (0.005 microcurie) of americium-241 or radium-226, and the five prototype sources shall have passed the prototype test, as follows:
(A) Initial measurement. The quantity of radioactive material deposited on the source shall be measured by direct counting of the source.
(B) Dry wipe test. The entire radioactive sur-
face of the source shall be wiped with filter paper with the application of moderate finger pressure. Removal of radioactive material from the source shall be determined by measuring the radioactivity on the filter paper or by direct measurement of the radioactivity on the source following the dry wipe.

(C) Wet wipe test. The entire radioactive surface of the source shall be wiped with filter paper, moistened with water, with the application of moderate finger pressure. Removal of radioactive material from the source shall be determined by measuring the radioactivity on the filter paper after the paper has dried or by direct measurement of the radioactivity on the source following the wet wipe.

(D) Water soak test. The source shall be immersed in water at room temperature for 24 consecutive hours. The source shall then be removed from the water. Removal of radioactive material from the source shall be determined by direct measurement of the radioactivity on the source after the source has dried or by measuring the radioactivity in the residue obtained by evaporation of the water in which the source was immersed.

(E) Dry wipe test. On completion of the water soak test, the dry wipe test described in paragraph (a)(5)(B) shall be repeated.

(F) Observations. Removal of more than 0.005 microcurie of radioactivity in any test prescribed by paragraph (a)(5) shall be cause for rejection of the source design. Results of prototype tests submitted to the nuclear regulatory commission shall be given in terms of radioactivity in microcuries and percent of removal from the total amount of radioactive material deposited on the source.

(6) Each source or storage container for the source shall have a label affixed that contains sufficient information about safe use and storage of the source and includes the following or an equivalent statement:

"The receipt, possession, use and transfer of this source, Model __________ Serial No. __________ are subject to a general license and the regulations of the United States Nuclear Regulatory Commission or of a State with which the commission has entered into an agreement for the exercise of regulatory authority. Do not remove this label.

CAUTION—RADIOACTIVE MATERIAL—THIS SOURCE CONTAINS AMERICIUM-241 (or RADIUM-226). DO NOT TOUCH RADIOACTIVE PORTION OF THIS SOURCE.

(Name of manufacturer or initial transferor)."

(b) Each person licensed under this regulation shall perform a dry wipe test upon each source containing more than 3.7 kilobecquerels (0.1 microcurie) of americium-241 or radium-226 before transferring the source to a general licensee in accordance with K.A.R. 28-35-178e or equivalent regulations of an agreement state or the nuclear regulatory commission. This test shall be performed by wiping the entire radioactive surface of the source with a filter paper with the application of moderate finger pressure.

The radioactivity on the paper shall be measured by using radiation detection instrumentation capable of detecting 0.185 kilobecquerel (0.005 microcurie) of americium-241 or radium-226. If this test discloses more than 0.185 kilobecquerel (0.005 microcurie) of radioactive material, the source shall be deemed to be leaking or losing americium-241 or radium-226 and shall not be transferred to a general licensee in accordance with K.A.R. 28-35-178e or equivalent regulations of an agreement state or the nuclear regulatory commission. (Authorized by and implementing K.S.A. 48-1607; effective, T-86-37, Dec. 11, 1985; effective May 1, 1986; amended March 18, 2011.)
is not subject to the federal food, drug, and cosmetic act or the public health service act.

(c) Each applicant shall submit evidence of at least one of the following:

(1) The applicant is registered or licensed with the U.S. food and drug administration as a drug manufacturer.

(2) The applicant is registered or licensed with a state agency as a drug manufacturer.

(3) The applicant is licensed as a pharmacy by the state board of pharmacy.

(4) The applicant is operating as a nuclear pharmacy within a federal medical institution.

(5) The applicant is operating a positron emission tomography (PET) drug production facility.

(d) Each applicant shall submit the following information on the radionuclide:

(1) The chemical and physical form of the material;

(2) the packaging in which the radionuclide is shipped, including the maximum activity per package; and

(3) evidence that the shielding provided by the packaging of the radioactive material is appropriate for the safe handling and storage of radiopharmaceuticals by group licensees.

(e)(1) Each applicant shall submit a description of the following:

(A) A label that shall be affixed to each transport radiation shield, whether the shield is constructed of lead, glass, plastic, or other material, of a radioactive drug to be transferred for commercial distribution. The label shall include the following:

(i) The radiation symbol and the words “CAUTION — RADIOACTIVE MATERIAL” or “DANGER — RADIOACTIVE MATERIAL”;

(ii) the name of the radioactive drug and the abbreviation; and

(iii) the quantity of radioactivity at a specified date and time. For radioactive drugs with a half-life greater than 100 days, the time may be omitted; and

(B) a label that shall be affixed to each syringe, vial, or other container used to hold a radioactive drug to be transferred for commercial distribution. The label shall include the radiation symbol and the words “CAUTION — RADIOACTIVE MATERIAL” or “DANGER — RADIOACTIVE MATERIAL” and an identifier that ensures that the syringe, vial, or other container can be correlated with the information on the transport radiation shield label.

(2) The labels, leaflets, or brochures required by this regulation shall be made in addition to the labeling required by the FDA. The labels, leaflets, or brochures may be separate from the FDA labeling, or with the approval of the FDA, the labeling may be combined with the labeling required by the FDA.

(f) All of the following shall apply to each licensee described in paragraph (c)(3) or (c)(4), or both:

(1) The licensee may prepare radioactive drugs for medical use, if each radioactive drug is prepared by either an authorized nuclear pharmacist, as specified in paragraphs (2) and (4) of this subsection, or an individual under the supervision of an authorized nuclear pharmacist.

(2) The licensee may allow a pharmacist to work as an authorized nuclear pharmacist if at least one of the following conditions is met:

(A) The pharmacist qualifies as an authorized nuclear pharmacist.

(B) The pharmacist meets the requirements specified in 10 CFR 35.55(b) and 35.59, and the licensee has received an approved license amendment identifying this individual as an authorized nuclear pharmacist.

(C) The pharmacist is designated as an authorized nuclear pharmacist in accordance with paragraph (4) of this subsection.

(3) The actions authorized in paragraphs (1) and (2) of this subsection shall be permitted in spite of more restrictive language in license conditions.

(4) The licensee may designate a pharmacist as an authorized nuclear pharmacist if the individual is a nuclear pharmacist preparing radioactive drugs and identified as an “authorized user” on a nuclear pharmacy license issued under this part.

(5) Each licensee shall provide the following to the department no later than 30 days after the date that the licensee allows, pursuant to paragraphs (2)(A) and (2)(C) of this subsection, the individual to work as an authorized nuclear pharmacist:

(A) A copy of each individual’s certification by a specialty board whose certification process has been recognized as specified in 10 CFR 35.55(a), as adopted by reference in K.A.R. 28-35-264, the department or agreement state license, the permit issued by a licensee of broad scope, or nuclear regulatory commission master materials permittee; and
a copy of the state pharmacy license or registration.

(g) Each licensee shall possess and use instrumentation to measure the radioactivity of radioactive drugs. Each licensee shall have procedures for using the instrumentation. Each licensee shall measure, by direct measurement or by combination of measurements and calculations, the amount of radioactivity in dosages of alpha-, beta-, or photon-emitting radioactive drugs before transfer for commercial distribution. Each licensee shall meet the following requirements:

(1) Perform tests before initial use, periodically, and following repair on each instrument for accuracy, linearity, and geometry dependence, as appropriate for the use of the instrument, and make adjustments if necessary; and

(2) check each instrument for constancy and proper operation at the beginning of each day of use.

(h) Nothing in these regulations shall exempt the licensee from the requirement to comply with applicable FDA requirements and other federal and state requirements governing radioactive drugs. (Authorized by and implementing K.S.A. 48-1607; effective, T-86-37, Dec. 11, 1985; effective May 1, 1986; amended Dec. 30, 2005; amended July 27, 2007; amended March 18, 2011.)

28-35-181o. Specific licenses to manufacture and distribute sources and devices for use as a calibration, transmission, or reference source or for certain medical uses. (a) Each application for a specific license to manufacture and distribute sources and devices containing radioactive material to persons licensed as specified in K.A.R. 28-35-181d for use as a calibration, transmission, or reference source or for one or more of the uses listed in 10 CFR 35.400, 35.500, 35.600, and 35.1000, as adopted by reference in K.A.R. 28-35-264, shall include the following information regarding each type of source or device:

(1) The radioactive material contained, its chemical and physical form, and amount;

(2) details of design and construction of the source or device;

(3) procedures for, and results of, prototype tests to demonstrate that the source or device will maintain its integrity under stresses likely to be encountered in normal use and in accidents;

(4) for devices containing radioactive material, the radiation profile for a prototype device;

(5) details of quality control procedures to ensure that the production sources and devices meet the standards of the design and prototype tests;

(6) procedures and standards for calibrating sources and devices;

(7) legend and methods for labeling sources and devices as to their radioactive content;

(8) radiation safety instructions for handling and storing the source or device. These instructions shall be included on a durable label attached to the source or device. However, instructions that are too lengthy for the label may be summarized on the label and printed in detail on a brochure that is referenced on the label; and

(9) the label that is to be affixed to the source or device or to the permanent storage container for the source or device. The label shall contain information on the radionuclide, quantity, and date of assay, and a statement that the source or device is licensed by the department for distribution to persons licensed under K.A.R. 28-35-181d or under an equivalent license of the nuclear regulatory commission or an agreement state. Labeling for sources that do not require long-term storage may be on a leaflet or brochure that is to accompany the source.

(b) (1) If the applicant wants to have the source or device required to be tested for leakage of radioactive material at intervals longer than six months, the applicant shall include in the application sufficient information to demonstrate that the longer interval is justified by performance characteristics of the source or device, or similar sources or devices, and by design features that have a significant bearing on the probability or consequences of leakage of radioactive material from the source.

(2) In determining the acceptable interval between tests for leakage of radioactive material, information that includes the following shall be considered by the secretary:

(A) The nature of the primary containment;

(B) the method for protection of the primary containment;

(C) the method of sealing the containment;

(D) containment construction materials;

(E) the form of the contained radioactive material;

(F) the maximum temperature withstood during prototype tests;
(G) the maximum pressure withstood during prototype tests;
(H) the maximum quantity of contained radioactive material;
(I) the radiotoxicity of contained radioactive material; and
(J) the applicant’s operating experience with identical sources or devices or with similarly designed and constructed sources or devices. (Authorized by and implementing K.S.A. 48-1607; effective, T-86-37, Dec. 11, 1985; effective May 1, 1986; amended July 27, 2007; amended March 18, 2011.)

28-35-192b. Exemptions; exempt concentrations of radioactive materials. (a) Except as provided in K.A.R. 28-35-184a(e), a person shall be exempt from these regulations to the extent that the person acquires, possesses, uses, transfers, or owns products or materials containing radioactive material in concentrations not exceeding those specified in K.A.R. 28-35-198a.

(b) A person shall be exempt from these regulations to the extent that the person acquires, possesses, uses, or transfers products containing naturally occurring radionuclides of elements with an atomic number less than 82, in isotopic concentrations not in excess of those that occur naturally.

(c) This regulation shall not be deemed to authorize the import of radioactive material or products containing radioactive material.

(d) A person who manufactures, processes, or produces a product or material shall be exempt from the requirements for a license as set forth in these regulations to the extent that the transfer of the radioactive material contained in the product or material is in concentrations not in excess of the amounts specified in K.A.R. 28-35-198a and is introduced into the product or material by a licensee holding a specific license issued by the department expressly authorizing such introduction. This exemption shall not apply to the transfer of radioactive material contained in any food, beverage, cosmetic, drug, or other commodity or product designed for ingestion or inhalation by, or application to, a human being.

(e) No person shall introduce radioactive material into a product or material knowing, or having reason to believe, that the product or material will be transferred to a person exempt from these regulations under subsection (a) or under an equivalent regulation of the nuclear regulatory commission or an agreement state, except in accordance with a specific license issued under K.A.R. 28-35-181e or the general license issued in K.A.R. 28-35-194a. (Authorized by and implementing K.S.A. 48-1607; effective, T-86-37, Dec. 11, 1985; effective May 1, 1986; amended March 18, 2011.)

28-35-192c. Exceptions; other radioactive material. Except for persons who apply tritium, promethium-147, or radium to, or persons who incorporate tritium, promethium-147, or radium into, the products listed in this regulation, any person shall be exempt from these regulations to the extent that the person acquires, possesses, uses, or transfers any of the following products:

(a) Timepieces or hands or dials containing radium, or timepieces, hands, or dials containing not more than the following specified quantities of other radioactive materials:

(1) 25 millicuries of tritium per timepiece;
(2) 5 millicuries of tritium per hand;
(3) 15 millicuries of tritium per dial. Bezels, when used, shall be considered as part of the dial;

(b) Balances of precision containing not more than one millicurie of tritium per balance or not more than 0.5 millicurie of tritium per balance part manufactured before November 30, 2007, 0.037 megabecquerel (1 microcurie) of radium-226 per timepiece;

(c) Marine compasses containing not more than 750 millicuries of tritium gas and other ma-
rines navigational instruments containing not more than 250 millicuries of tritium gas manufactured before December 17, 2007;

(d) ionization chamber smoke detectors containing not more than one microcurie (μCi) of americium-241 per detector in the form of a foil and designed to protect life and property from fires;

(e) electron tubes. The levels of radiation from each electron tube containing radioactive material shall not exceed one milliрад per hour at one centimeter from any surface when measured through seven milligrams per square centimeter of absorber. For purposes of this subsection, "electron tubes" shall include spark gap tubes, power tubes, gas tubes including glow lamps, receiving tubes, microwave tubes, indicator tubes, pickup tubes, radiation detection tubes, and any other completely sealed tube that is designed to conduct or control electrical currents. An electron tube shall not contain more than one of the following specified quantities of radioactive material:

1. 150 millicuries of tritium per microwave receiver protector tube or 10 millicuries of tritium per any other electron tube;
2. 1 microcurie cobalt-60;
3. 5 millicuries nickel-63;
4. 30 microcuries krypton-85;
5. 5 microcuries cesium-137; or
6. 30 microcuries promethium-147; and

(f) ionizing radiation-measuring instruments containing, for purposes of internal calibration or standardization, sources of radioactive material. No source shall exceed the applicable quantity set forth in K.A.R. 28-35-197a. No single instrument shall contain more than 10 sources. For the purposes of this subsection, 0.05 μCi of Am-241 shall be considered an exempt quantity. (Authorized by and implementing K.S.A. 48-1607; effective, T-86-37, Dec. 11, 1985; effective May 1, 1986; re-enacted, amended March 18, 2011.)


28-35-192e. Exemptions; exempt quantities. (a) Except as provided in subsections (c) through (e), each person who acquires, possesses, uses, owns, receives, or transfers radioactive material in individual quantities that do not exceed the applicable quantity specified in K.A.R. 28-35-197a shall be exempt from these regulations.

(b) Each person who possesses radioactive material received or acquired before January 1, 1972 under the general license then provided in K.A.R. 28-35-178a shall be exempt from these regulations to the extent that the person possesses, uses, or transfers that radioactive material. This exemption shall not apply to radium-226.

(c) This regulation shall not authorize the production, packaging, repackaging, or transfer of radioactive material for purposes of commercial distribution, or the incorporation of radioactive material into products intended for commercial distribution.

(d) No person shall, for purposes of commercial distribution, transfer radioactive material in the individual quantities specified in K.A.R. 28-35-197a knowing, or having reason to believe, that
those quantities of radioactive material will be transferred to a person exempt under this regulation or an equivalent regulation of the nuclear regulatory commission or an agreement state, except in accordance with a specific license issued by the secretary under K.A.R. 28-35-181r, an equivalent regulation of the nuclear regulatory commission, or an equivalent regulation of an agreement state.

(e) No person shall, for purposes of producing an increased radiation level, combine quantities of radioactive material covered by this exemption so that the aggregate quantity exceeds the individual quantities specified in K.A.R. 28-35-197a. (Authorized by and implementing K.S.A. 48-1607; effective, T-86-37, Dec. 11, 1985; effective May 1, 1986; amended March 18, 2011.)

28-35-194a. Reciprocal recognition of licenses. (a) Subject to other provisions in this regulation, any person may apply for a general license to conduct activities within this state without obtaining a specific license from the secretary, if all of the following conditions are met:

(1) The person possesses a specific license issued by the nuclear regulatory commission or an agreement state, other than this state, that authorizes the proposed activities.

(2) The person does not conduct any activities authorized by any general license issued under this regulation for a period totalling more than 180 days in a calendar year.

(3) The specific license does not limit the activity authorized to a specified installation or location.

(4) The person notifies the department in writing at least five days before engaging in the activity. The notification shall indicate the location, period, and type of proposed possession and use within the state and shall be accompanied by a copy of the specific license. If, for a specific case, the five-day period would impose an undue hardship, the person may, upon application to the department, obtain permission by letter, facsimile, or electronic communication to proceed.

(5) The person complies with all applicable regulations of the secretary and with all the terms and conditions of the specific license, except any term or condition of the license that is inconsistent with these regulations.

(6) The person supplies any information requested by the department.

(7) The person does not transfer or dispose of radioactive material possessed or used under the general license provided in this regulation except by transfer to a person who meets either of the following conditions:

(A) Is specifically licensed by the department or the nuclear regulatory commission to receive the material; or

(B) Is exempt from the requirements for a license for that material under K.A.R. 28-35-192a, 28-35-192b, 28-35-192c, 28-35-192d, 28-35-192e, 28-35-192f, or 28-35-192g.

(b) Any person who holds a specific license issued by the nuclear regulatory commission, or an agreement state that authorizes the person to manufacture, transfer, install, or service a device described in K.A.R. 28-35-178b within areas subject to the jurisdiction of the licensing body is issued a general license to manufacture, install, transfer, or service those devices in this state subject to the following requirements:

(1) The person shall satisfy the requirements of K.A.R. 28-35-184a(e)(1) and (2).

(2) The device shall be manufactured, labeled, installed, and serviced in accordance with the provisions of the specific license issued to the person by the nuclear regulatory commission or the agreement state.

(3) The person shall ensure that any labels required to be affixed to the device, under regulations of the authority that licensed the manufacture of the device, and that bear the statement “Removal of this label is prohibited” are affixed to the device.

(4) The person shall furnish to each general licensee to whom the person transfers the device, or on whose premises the person installs the device, a copy of the general license issued in K.A.R. 28-35-178b.

(c) Acceptance of any specific license recognized under this regulation or any product distributed pursuant to such a license may be withdrawn, limited, or qualified by the secretary, upon determining that the action is necessary in order to protect health or minimize danger to life or property. (Authorized by and implementing K.S.A. 48-1607; effective, T-86-37, Dec. 11, 1985; effective May 1, 1986; amended March 18, 2011.)

28-35-212a. Occupational dose limits for adults. (a) Each licensee or registrant shall control the occupational dose to individual adults, except for planned special exposures to the following dose limits:
(1) The annual limit shall be the more limiting of either of the following:
(A) The total effective dose equivalent being equal to 0.05 Sv (5 rem); or
(B) the sum of the deep dose equivalent and the committed dose equivalent to any individual organ or tissue other than the lens of the eye being equal to 0.50 Sv (50 rem).

(2) The annual limits to the lens of the eye, to the skin, and to the extremities shall be the following:
(A) An eye dose equivalent of 0.15 Sv (15 rem); and
(B) a shallow dose equivalent of 0.50 Sv (50 rem) to the skin or to any extremity.

(b) Doses received in excess of the annual limits, including doses received during accidents, emergencies, and planned special exposures, shall be subtracted from the limits for planned special exposures that the individual could receive during the current year and during the individual’s lifetime.

c) When the external exposure is determined by measurement with an external personal monitoring device, the deep dose equivalent shall be used in place of the effective dose equivalent, unless the effective dose equivalent is determined by a dosimetry method approved by the secretary. The assigned deep dose equivalent shall be for the portion of the body receiving the highest exposure. The assigned shallow dose equivalent shall be the dose averaged over the contiguous 10 square centimeters of skin receiving the highest exposure.

(1) The deep dose equivalent, eye dose equivalent, and shallow dose equivalent may be assessed from surveys or other radiation measurements for the purpose of demonstrating compliance with the occupational dose limits, if the individual monitoring device was not in the region of highest potential exposure or the results of individual monitoring are unavailable.

(2) If a protective apron is worn by medical fluoroscopists performing special and interventional fluoroscopic procedures and monitoring is conducted as specified in K.A.R. 28-35-217a, the use of weighting factors in determining the effective dose equivalent for external radiation may be approved by the secretary upon receipt of a written request. In no case shall the use of weighting factors be approved unless the request is accompanied by a list of the procedures to be used to ensure that exposures are maintained ALARA and the effective dose equivalent is determined as follows:
(A) If only one individual monitoring device is used and the device is located at the neck outside the protective apron, the reported deep dose equivalent shall be the effective dose equivalent for external radiation.
(B) If only one individual monitoring device is used, the device is located at the neck outside the protective apron, and the reported dose exceeds 25 percent of the limit specified in this regulation, then the reported deep dose equivalent value multiplied by 0.3 shall be the effective dose equivalent for external radiation.
(C) If individual monitoring devices are worn, both under the protective apron at the waist and outside the protective apron at the neck, the effective dose equivalent for external radiation shall be assigned the value of the sum of the deep dose equivalent reported for the individual monitoring device located at the waist under the protective apron multiplied by 1.5 and the deep dose equivalent reported for the individual monitoring device located at the neck outside the protective apron multiplied by 0.04.

(3) All individuals who are associated with the operation of an X-ray system shall be subject to the occupational exposure limits and the requirements for the determination of the doses that are specified in this regulation. In addition, each individual shall meet the following requirements:
(A) When protective clothing or devices are worn on portions of the body and one or more monitoring devices are required, at least one monitoring device shall be utilized as follows:
(i) When an apron is worn, the monitoring device shall be worn at the collar outside of the apron;
(ii) the dose to the device, if one is used, shall be recorded as the whole-body dose based on the maximum dose attributed to any one critical organ, including the gonads, the blood-forming organs, the head and trunk, and the lens of the eye. If more than one device is used and a record is made of the data, each dose shall be identified with the area where the device was worn on the body;

(4) Exposure of a personnel-monitoring device to deceptively indicate a dose delivered to an individual shall be prohibited.

(5) If the individual is exposed during procedures not specifically approved, weighting factors shall not be applied.
(d) Derived air concentration (DAC) and annual limit on intake (ALI) values, in appendix B, table I, published in “appendices to part 4: standards for protection against radiation,” which is adopted in K.A.R. 28-35-135a, shall be used to determine the individual’s dose and to demonstrate compliance with the occupational dose limits.

(e) Notwithstanding the annual dose limits, the licensee shall limit the soluble uranium intake by an individual to 10 milligrams in a week in consideration of chemical toxicity, in accordance with footnote 3 of appendix B published in “appendices to part 4: standards for protection against radiation,” which is adopted in K.A.R. 28-35-135a.

(f) Each licensee or registrant shall reduce the dose that an individual may be allowed to receive in the current year by the amount of occupational dose received while employed by any other person. (Authorized by and implementing K.S.A. 48-1607; effective, T-85-43, Dec. 19, 1984; effective May 1, 1985; amended Sept. 20, 1993; amended Oct. 17, 1994; amended Dec. 30, 2005; amended March 18, 2011.)

28-35-216a. Testing for leakage or contamination of sealed sources. (a) Each licensee in possession of any sealed source shall ensure that all of the following requirements are met:

(1) Each sealed source, except as specified in subsection (b), shall be tested for leakage or contamination, and the test results shall be received before the sealed source is put into use, unless the licensee has a certificate from the transferor indicating that the sealed source was tested within six months before transfer to the licensee.

(2) Each sealed source that is not designed to emit alpha particles shall be tested for leakage or contamination at intervals not to exceed six months or at alternative intervals approved by the secretary, an agreement state, a licensing state, or the nuclear regulatory commission.

(3) Each sealed source designed to emit alpha particles shall be tested for leakage or contamination at intervals not to exceed three months or at alternative intervals approved by the secretary, an agreement state, a licensing state, or the nuclear regulatory commission.

(4) For each sealed source required to be tested for leakage or contamination, whenever there is reason to suspect that the sealed source might have been damaged or might be leaking, the licensee shall ensure that the sealed source is tested for leakage or contamination before further use.

(5) Tests for leakage for all sealed sources shall be capable of detecting the presence at 185 Bq (0.005 μCi) of radioactive material on a test sample. Test samples shall be taken from the sealed source or from the surfaces of the container in which the sealed source is stored or mounted and on which one might expect contamination to accumulate. For a sealed source contained in a device, test samples shall be obtained when the source is in the “off” position.

(b) The following sealed sources shall be exempt from testing for leakage and contamination:

(1) Sealed sources containing only radioactive material with a half-life of fewer than 30 days;

(2) sealed sources containing only radioactive material as a gas;

(3) sealed sources containing 3.7 MBq (100 μCi) or less of beta-emitting or photon-emitting material or 370 kBq (10 μCi) or less of alpha-emitting material;

(4) sealed sources containing only hydrogen-3;

(5) seeds of iridium-192 encased in nylon ribbon; and

(6) sealed sources, except sources used in radiation therapy, that are stored, are not being used, and are identified as being in storage. The sources exempted from this test shall be tested for leakage before any use or transfer to another person, unless the source has been leak-tested within six months before the date of the use or transfer. The sources in storage shall be physically inventoried every six months and listed in the radioactive materials inventory. Each source in storage shall be tested for leakage at least every 10 years.

(c) Each test for leakage or contamination from sealed sources shall be performed by a person specifically authorized by the secretary, an agreement state, a licensing state, or the nuclear regulatory commission to perform these services.

(d) All test results shall be recorded in units of becquerel or microcurie and maintained for inspection by the department.

(e) If any test reveals the presence of 0.005 microcurie or more of removable contamination, the licensee shall immediately withdraw the sealed source from use and shall cause the source to be decontaminated and repaired or to be disposed of in accordance with these regulations. The licensee shall file a report within five days of the test with the radiation control program, Kansas department of health and environment, describing the equip-


28-35-242. General requirements. (a) Waiver of requirements. Compliance with the specific requirements of these regulations relative to an existing machine or installation may be waived by the secretary if the registrant provides an alternative to the requirement that provides radiation protection equal to that prescribed in part 4 of these regulations.

(b) Responsibility to meet requirements. A person shall not make, sell, lease, transfer, lend, or install X-ray or fluoroscopic equipment, or the supplies used in connection with this equipment, unless both of the following conditions are met:

(1) Those supplies and equipment, when properly placed in operation and properly used, will meet the requirements of parts 1, 4, and 5 and the applicable regulations under parts 7, 8, and 10 of these regulations.

(2) The person delivers, if applicable, cones or collimators, filters, appropriate timers, and fluoroscopic shutters.

(c) Limitations on human use. An individual shall not be exposed to the useful beam, unless the exposure is for healing arts purposes and each exposure has been authorized by one of the following:

(1) A licensed practitioner of the healing arts;

(2) a physician assistant licensed by the state board of healing arts, when working under the supervision and direction of a person licensed to practice medicine or surgery;

(3) an advanced registered nurse practitioner who holds a certificate of qualification from the state board of nursing, when working under the supervision and direction of a person licensed to practice medicine or surgery; or

(4) an individual licensed to practice dentistry or podiatry within the authority granted to the individual by Kansas licensing laws applying to dentists and podiatrists.

(d) Prohibited uses. Deliberate exposure for the following purposes shall be specifically prohibited:

(1) Exposure of an individual for patient positioning, training, demonstration, or other purposes, unless a healing arts purpose exists and a proper prescription has been provided; and

(2) exposure of an individual for the purpose of healing arts screening without the prior written approval of the department, except mammography screening, if the facility is certified to perform mammography by the food and drug administration. Each person requesting approval for healing arts screening shall submit the information outlined in K.A.R. 28-35-255. Each person requesting approval for a healing arts screening shall notify the department within 30 days if any of the information submitted becomes invalid or outdated. (Authorized by and implementing K.S.A. 48-1607; effective Jan. 1, 1970; amended Jan. 1, 1972; amended May 1, 1976; amended Sept. 20, 1993; amended Dec. 30, 2005; amended March 18, 2011.)

28-35-264. General requirements. The provisions of 10 CFR part 35, as in effect on January 15, 2010, are hereby adopted by reference, with the changes specified in this regulation.

(a) For the purposes of part 6, "byproduct material" shall mean all radioactive material regulated by the department.

(b) All reports required by this regulation shall be submitted to the department.

(c) The following sections shall be deleted:

(1) 10 CFR 35.1, “purpose and scope”;

(2) 10 CFR 35.2, “definitions,” except that the definitions of the following terms shall be retained:

(A) “Authorized medical physicist”;

(B) “authorized nuclear pharmacist”;

(C) “authorized user”;

(D) “medical event”;

(E) “prescribed dose”; and

(F) “radiation safety officer”;

(3) 10 CFR 35.8, “information collection requirements: OMB approval”;
(4) 10 CFR 35.18, “license issuance”;
(5) 10 CFR 35.19, “specific exemptions”;
(6) 10 CFR 35.26 (a)(1), “radiation protection program changes”;
(7) 10 CFR 35.4001, “violations”; and
(8) 10 CFR 35.4002, “criminal penalties.”
(d) Wherever the following CFR references occur within 10 CFR part 35, these references shall be replaced with the specified references to regulations and parts in this article:
(2) “10 CFR part 20” shall be replaced with “part 4, ‘standards for protection against radiation.’”
(3) “10 CFR 20.1101” shall be replaced with “K.A.R. 28-35-211d, ‘radiation protection programs.’”
(4) “10 CFR 20.1301(a)(1) and 20.1301(c)” shall be replaced with “K.A.R. 28-35-214a.”
(6) “10 CFR part 30” shall be replaced with “part 3, ‘licensing of sources of radiation.’”
(7) “10 CFR 32.72” shall be replaced with “K.A.R. 28-35-181m, ‘specific licenses to manufacture and distribute radiopharmaceuticals containing radioactive material for medical use under group licenses,’ and K.A.R. 28-35-181n, ‘specific licenses to manufacture and distribute generators or reagent kits for preparation of radiopharmaceuticals containing radioactive material.’”
(8) “10 CFR 32.74” shall be replaced with “K.A.R. 28-35-181o, ‘specific licenses to manufacture and distribute sources and devices for use as a calibration or reference source, or for certain medical uses.’”
(9) “10 CFR 33.13” shall be replaced with “K.A.R. 28-35-182b, ‘qualifications for a type A specific license of broad scope.’”
(e) Wherever the following terms occur within 10 CFR part 35, these terms shall be replaced with “department”:
(1) “Commission”;
(2) “NRC operation center”; and
(3) “NRC regional office.”
(f) The following changes shall be made to the sections specified:
(1) 10 CFR 35.6(b)(2) and (c)(2) shall be replaced with the following text:
“Obtain informed consent from the human research subject as specified in 45 CFR 46.116, ‘general requirements for informed consent.’”
(2) 10 CFR 35.10, subsection (a) shall be deleted.
(4) In 10 CFR 35.10(d), the date “October 24, 2002” shall be replaced with “the effective date of these regulations,” and in 10 CFR 35.10(b) and (c), the date “October 25, 2005” shall be replaced with “two years from the effective date of these regulations.”
(5) 10 CFR 35.12(b)(1) and (c)(1)(i) shall be replaced with the following text: “submitting a form specified by the department that includes the facility diagram, equipment, and training and experience qualifications of the radiation safety officer, authorized users, authorized physicists, and authorized pharmacists.”
(6) In 10 CFR 35.57(a)(1) and (b)(1), the date “October 24, 2002” shall be replaced with “the effective date of these regulations.”
(7) In 10 CFR 35.57(a)(2) and (b)(2), the date “April 29, 2005” shall be replaced with “the effective date of these regulations.”
(8) In 10 CFR 35.432(a), the date “October 24, 2002” shall be replaced with “the effective date of these regulations.”
(9) In 10 CFR 35.3045, the footnote shall be deleted, and in subsection (a) the words “or any radiation-producing device” shall be added before the words “results in.”
(10) 10 CFR 35.3047(d) shall be replaced with the following text: “The licensee shall submit a written report to the department within 15 days after discovery of a dose to the embryo or fetus, or nursing child that requires a report in paragraphs (a) or (b) in this section.”
(11) In 10 CFR 35.3067, the phrase “with the department” shall be inserted after the word “report” in the first sentence, and the second sentence shall be deleted. (Authorized by and implementing K.S.A. 48-1607; effective Dec. 30, 2005; amended March 18, 2011.)

**28-35-334. Reports to individuals.** Radiation exposure data for an individual and the results of any measurements, analyses, and calculations of radioactive material deposited or retained in the body of an individual shall be reported to the individual as specified in this regulation.
(a) The information reported shall include data and results obtained pursuant to the requirements of these regulations or any order of the secretary or license condition, as shown in records maintained by the licensee or registrant pursuant to K.A.R. 28-35-227h. Each report shall meet the following requirements:

(1) Be in writing;
(2) include appropriate identifying data, including the name of the licensee or registrant, the name of the individual, and the individual’s identification number, preferably social security number;
(3) include the individual’s exposure information; and
(4) contain the following statement:
“This report is furnished to you under the provisions of Kansas Administrative Regulation 28-35-334. You should preserve this report for further reference.”

(b) Each licensee or registrant shall make dose information available to individual workers shown in records maintained by the licensee or registrant pursuant to K.A.R. 28-35-227h. Each licensee or registrant shall provide an annual report to each individual worker monitored pursuant to K.A.R. 28-35-217a of the dose received in that monitoring year if either of the following situations occurs:

(1) The individual’s dose exceeds 1 mSv (100 mrem) TEDE or 1 mSv (100 mrem) to any individual organ or tissue.
(2) The individual requests an annual dose report.
(c) Each licensee or registrant shall furnish a written report of a worker’s exposure to sources of radiation or radioactive material at the request of the worker if the worker was formerly engaged in activities controlled by the licensee or registrant. The report shall be furnished within 30 days from the date of the request or within 30 days after the dose of the individual has been determined by the licensee or registrant, whichever is later. The report shall cover, within the period of time specified in the request, the dose record for each year the worker was required to be monitored pursuant to K.A.R. 28-35-217a. The report shall also include the period of time in which the worker’s activities involved exposure to sources of radiation and shall include the dates and locations of work under the license or registration in which the worker participated during this period.
(d) When a licensee or registrant is required pursuant to K.A.R. 28-35-229a(a)(1) and (b)(1) to report to the department any exposure of an individual to sources of radiation, the licensee or the registrant shall also provide to the individual a written report of the individual’s exposure data included in the report. This report shall be transmitted to the individual at a time not later than the transmittal of the report to the department.
(e) At the request of a worker who is terminating employment with the licensee or registrant that involves exposure to radiation or radioactive material or at the request of a worker who, while employed by another person, is terminating an assignment to work involving radiation dose in the licensee’s facility, each licensee or registrant shall provide to the worker, or the worker’s designee, a written report regarding the radiation dose received by that worker from operations of the licensee or registrant during the current year. The report shall be provided at the worker’s termination. The licensee or registrant may provide a written estimate of that dose if the finally determined personnel monitoring results are not available at that time. Estimated doses shall be clearly indicated as such. (Authorized by K.S.A. 48-1607; implementing K.S.A. 48-1607 and 48-1609; effective May 1, 1976; amended, T-85-43, Dec. 19, 1984; amended May 1, 1985; amended Oct. 17, 1994; amended March 18, 2011.)

28-35-346. Leak testing of sealed sources. (a) Requirements. Each licensee using any sealed source of radioactive material shall have the source tested for leakage as specified in subsection (c). A record of leak test results shall be kept in units of microcuries and maintained for inspection by the department. The licensee shall keep the records of the results for three years after the leak test is performed.

(b) Method of testing. Each test for leakage shall be performed only by a person specifically authorized to perform such a test by the department, the nuclear regulatory commission, an agreement state, or a licensing state. The test sample shall be taken from the surface of the source, the source holder, or the surface of the device in which the source is stored or mounted and on which one could expect contamination to accumulate. The test sample shall be analyzed for radioactive contamination. The analysis shall be capable of detecting the presence of 0.005 microcurie (185 Bq) of radioactive material on the test sample and shall be performed by a person specifically authorized to perform such a test by
the department, the nuclear regulatory commission, an agreement state, or a licensing state.

(c) Interval of testing. Each sealed source of radioactive material, except an energy compensation source (ECS), shall be tested at intervals not to exceed six months. In the absence of a certificate from a transferor indicating that a test has been made within the six months before the transfer, the sealed source shall not be put into use until tested. If, for any reason, it is suspected that a sealed source could be leaking, the sealed source shall be removed from service immediately and tested for leakage as soon as practical. Each ECS that is not exempt from testing in accordance with subsection (e) shall be tested at intervals not to exceed three years. In the absence of a certificate from a transferor that a test has been made within the three years before the transfer, the ECS shall not be used until tested.

(d) Leaking or contaminated sources. If the test reveals the presence of 0.005 microcurie (185 Bq) or more of leakage or contamination, the licensee shall immediately withdraw the source from use and shall cause it to be decontaminated, repaired, or disposed of in accordance with these regulations. Each licensee shall check the equipment associated with the leaking source for radioactive contamination and, if contaminated, shall have the equipment decontaminated or disposed of by a nuclear regulatory commission licensee or an agreement state licensee that is authorized to perform these functions. A report describing the equipment involved, the test result, and the corrective action taken shall be filed with the department within five days after receiving the test results.

(e) Exemptions. The following sources shall be exempt from the periodic leak test requirements of this regulation:

(1) Hydrogen-3 (tritium) sources;
(2) sources of radioactive material with a halflife of 30 days or less;
(3) sealed sources of radioactive material in gaseous form;
(4) sources of radioactive material emitting beta, beta-gamma, or gamma radiation, with an activity of not more than 100 microcuries (3.7 M bq); and
(5) sources of alpha-emitting radioactive material with an activity of not more than 10 microcuries (0.370 MBq). (Authorized by and implementing K.S.A 48-1607; effective Sept. 20, 1993; amended Dec. 30, 2005; amended March 18, 2011.)

28-35-411. Table of quantities of radioactive material; need for contingency plan.

Quantities of Radioactive Materials Requiring Consideration of the Need for a Contingency Plan for Responding to a Release

<table>
<thead>
<tr>
<th>Radioactive Material</th>
<th>Release Fraction</th>
<th>Quantity (GBq)</th>
<th>Quantity (Ci)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Actinium-228</td>
<td>0.001</td>
<td>148,000</td>
<td>4,000</td>
</tr>
<tr>
<td>Americium-241</td>
<td>0.001</td>
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<td>2</td>
</tr>
<tr>
<td>Americium-242</td>
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<tr>
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<tr>
<td>Antimony-124</td>
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<td>4,000</td>
</tr>
<tr>
<td>Antimony-126</td>
<td>0.01</td>
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<td>6,000</td>
</tr>
<tr>
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<td>0.01</td>
<td>370,000</td>
<td>10,000</td>
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</tr>
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<td>5,000</td>
</tr>
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</tr>
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<td>300</td>
</tr>
<tr>
<td>Cesium-134</td>
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<td>2,000</td>
</tr>
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<td>Cesium-137</td>
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<td>Curium-245</td>
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<td>2</td>
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<td>10</td>
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<td>Iron-55</td>
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360
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<tr>
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<td>Promethium-147</td>
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</tr>
<tr>
<td>Tellurium-129n</td>
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</tr>
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</tr>
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</tr>
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<td>Zirconium-95</td>
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</tr>
<tr>
<td>Any other beta-gamma emitter</td>
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</tr>
<tr>
<td>Mixed fission products</td>
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<td>37,000</td>
</tr>
<tr>
<td>Contaminated equipment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>beta-gamma emitters</td>
<td>0.001</td>
<td>370,000</td>
</tr>
<tr>
<td>Irradiated material, in any form other than solid noncombustible</td>
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<td>370,000</td>
</tr>
<tr>
<td>Irradiated material that is solid and noncombustible</td>
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<td>370,000</td>
</tr>
<tr>
<td>Mixed radioactive waste</td>
<td>beta-gamma emitters</td>
<td>0.01</td>
</tr>
</tbody>
</table>

1 For combinations of radioactive materials, the licensee shall be required to consider whether a contingency plan is needed if the sum of the ratios of the quantity of each radioactive material authorized to the quantity listed in this table for that material exceeds one.

2 Waste packaged in type B containers shall not require a contingency plan.


28-35-600. Definitions. In addition to the terms defined in K.S.A. 48-16a02 and amendments thereto, each of the following terms shall have the meaning assigned in this regulation: (a) “All reasonable times” means normal business hours and other times that radon services are being performed, or at a time convenient for the property owner.

(b) “Mitigation” means any action taken to reduce radon concentrations in the indoor atmosphere or to prevent the entry of radon into the indoor atmosphere. This term shall include application of materials, installation of systems, and any new repair or alteration of a building or design.

(c) “Mitigation system” means any set of devices, controls, or materials installed for reducing radon concentrations in a building.

(d) “Quality assurance and quality control plan” means a plan or design that ensures the authenticity, integrity, reproducibility, and accuracy of radon concentration measurements. Each quality assurance and quality control plan shall include at a minimum procedures for the following:

1) Chain of custody;
2) calibration of measurement devices in the field;
3) checks for background;
4) duplicates, blanks, and spikes; and
5) representative sampling.

(e) “Radon certification law” means K.S.A. 48-16a01 through 48-16a12, and amendments thereto.
(f) “Radon measurement technician” means an individual certified by the department who performs radon or radon progeny measurements for a radon measurement business or provides professional advice on radon or radon progeny measurements, health risks, radon-related exposure, radon entry routes, or other radon-related activities.

(g) “Radon mitigation technician” means an individual certified by the department who designs or installs radon mitigation systems or who performs and evaluates results of tests to determine appropriate radon mitigation systems. This individual may be employed or contracted by a radon mitigation business.

(h) “Radon progeny” means the short-lived radionuclides formed from the decay of radon-222 or radon-220.

(i) “Radon services” means any activity provided by a person that is subject to the radon certification law. This term shall include radon testing, the analysis of radon, radon testing or mitigation consultation, and radon mitigation.

(j) “Site” means a geographic location comprising leased or owned land, buildings, and other structures where radon services are performed.

(2) violation of or failure to observe any of the terms and conditions of the certification, any requirement of the radon certification law and K.A.R. 28-35-601 through 28-35-608, or any order of the secretary.

(c) Initial certification and renewal certification shall be valid for 24 months.

(d) Requirements or restrictions that are necessary to ensure compliance with the radon certification law may be specified by the secretary at the time of initial certification or renewal certification or in connection with any radon services inspection.

(e) Failure to comply with all requirements for certification within 60 days of submittal of an application for initial or renewal certification shall void the application.

(f) An exemption to any requirement of K.A.R. 28-35-601 through 28-35-608 may be granted by the secretary if both of the following conditions are met:

1. A person certified to conduct radon services submits a written request, including justification for the exemption and any supporting data or documentation, to the secretary for review and consideration for approval.

2. The secretary determines that the exemption is protective of public health, safety, and the environment.

(g) Each person certified under the radon certification law and these regulations shall submit the reports required by K.S.A. 48-16a10, and amendments thereto, and any additional relevant information requested by the department in a format specified by the department.

(h) All records required to be kept by each person certified under the radon certification law and these regulations shall be retained for at least three years.

(i) Each radon measurement technician, radon mitigation technician, radon measurement business, radon mitigation business, and radon measurement laboratory shall allow the department access at all reasonable times to that person’s or that person’s employer’s facilities and files for inspection and examination of records of radon services to determine compliance with the radon certification law and K.A.R. 28-35-601 through 28-35-608.

(j) Upon request by the department, each person certified under K.A.R. 28-35-601 through 28-35-608 or the radon certification law shall submit a list of scheduled measurement or mitigation ac-
tivities to the department within two business days of receipt of the request. (Authorized by K.S.A. 2010 Supp. 48-16a03 and 48-16a04; implementing K.S.A. 2010 Supp 48-16a03 and 48-16a10; effective Feb. 3, 2012.)

28-35-602. Fees. (a) Application fees for 24-month certification:

(1) Radon measurement technician:
   (A) Initial certification .................. $100.00
   (B) Renewal certification .............. $100.00
(2) Radon mitigation technician:
   (A) Initial certification .................. $100.00
   (B) Renewal certification .............. $100.00
(3) Radon measurement laboratory:
   (A) Initial certification .................. $250.00
   (B) Renewal certification .............. $250.00
(b) Fee for returned check ........... $50.00
(c) Fee for late certification renewal, for each month or part of a month .... $25.00

Each fee specified in this regulation shall be nonrefundable. (Authorized by and implementing K.S.A. 2010 Supp. 48-16a03 and 48-16a04; effective Feb. 3, 2012.)

28-35-603. Requirements for radon measurement technician. (a) Each applicant for initial certification as a radon measurement technician shall meet the requirements of K.S.A. 48-16a05, and amendments thereto, and the following additional requirements:

(1) Be at least 18 years of age;
(2) complete and show proof of completion to the department of a radon measurement training course with at least 16 hours of classroom instruction approved by the department pursuant to K.S.A. 48-16a05, and amendments thereto;
(3) pass a closed-book examination on radon measurement approved by the department pursuant to K.S.A. 48-16a05, and amendments thereto, with a score of at least 70 percent; and
(4) provide any additional relevant information requested by the department.

(b) Each radon measurement technician shall meet the following requirements:

(1) Conduct radon measurement activities in accordance with the requirements of the following:
   (A) K.S.A. 48-16a05, and amendments thereto;
   (B) “protocols for radon and radon decay product measurements in homes,” EPA 402-R-92-003, including appendices, published by the environmental protection agency and dated June 1993, which is hereby adopted by reference;
   (C) “indoor radon and radon decay product measurement device protocols,” EPA 402-R-92-004, published by the environmental protection agency and dated July 1992, which is hereby adopted by reference; and
   (D) all applicable municipal, county, state, and federal laws and regulations;
(2) upon request from the department, provide documentation of proficiency including continuing education requirements specified in K.A.R. 28-35-605;
(3) notify the department of any name or address changes within 30 days; and
(4) maintain and adhere to a quality assurance and quality control plan. (Authorized by K.S.A. 2010 Supp. 48-16a03; implementing K.S.A. 2010 Supp. 48-16a03 and 48-16a05; effective Feb. 3, 2012.)

28-35-604. Requirements for radon mitigation technician. (a) Each applicant for initial certification as a radon mitigation technician shall meet the requirements of K.S.A. 48-16a06, and amendments thereto, and the following additional requirements:

(1) Be at least 18 years of age;
(2) complete and submit proof of completion to the department of a radon mitigation training course with at least 24 hours of classroom instruction that includes active participation in radon mitigation techniques approved by the department pursuant to K.S.A. 48-16a06, and amendments thereto;
(3) pass a closed-book examination on radon mitigation approved by the department pursuant to K.S.A. 48-16a06, and amendments thereto, with a score of at least 70 percent; and
(4) provide any additional relevant information requested by the department.

(b) Each radon mitigation technician shall meet the following requirements:

(1) Conduct radon mitigation activities in accordance with the requirements of the following:
   (A) K.S.A. 48-16a06, and amendments thereto;
   (B) “protocols for radon and radon decay product measurements in homes,” which is adopted by reference in K.A.R. 28-35-603;
   (C) “indoor radon and radon decay product measurement device protocols,” which is adopted by reference in K.A.R. 28-35-603;
   (D) “radon mitigation standards,” EPA 402-R-
28-35-605. Continuing education. (a) Before certification renewal, each radon measurement technician shall meet the following continuing education requirements:

1. Complete and submit proof of completion to the department of at least 16 hours of department-approved continuing education;
2. Maintain documentation, pursuant to K.A.R. 28-35-601(h), that the continuing education was successfully completed within the prior 24-month certification period.

(b) Before certification renewal, each radon mitigation technician shall meet the following continuing education requirements:

1. Complete and submit proof of completion to the department of at least 24 hours of department-approved continuing education;
2. Maintain documentation, pursuant to K.A.R. 28-35-601(h), that the continuing education was successfully completed within the prior 24-month certification period.

(c) If a person is certified as both a radon measurement technician and a radon mitigation technician, continuing education credit shall be granted for both certifications if the person completes at least 24 hours of department-approved continuing education credits for radon services during the 24-month period that the certificates are valid.

(d) Continuing education credit shall be accepted only for the completion of each different continuing education training course during a current certification period. Training courses for continuing education credit that are repeated shall be accepted only for the initial successful completion of the course during a current certification period.

(28-35-606. Radon measurement business. (a) Each radon measurement business shall maintain for inspection a list of the name and credentials of each radon measurement technician employed or retained as a consultant by the radon measurement business.

(b) A radon measurement technician shall be present on-site to directly supervise all measurement activities performed by each radon measurement business.

(c) A radon measurement technician shall perform all testing and consultation about radon or radon progeny measurements, health risks, radon-related exposure, radon entry routes, and other radon-related activities for each radon measurement business.

(28-35-607. Radon mitigation business. (a) Each radon mitigation business shall maintain for inspection a list of the name and credentials of each radon mitigation technician employed or retained as a consultant by the radon mitigation business.

(b) All radon mitigation activities and consultations about radon or radon progeny measurements, health risks, radon-related exposure, radon entry routes, or other radon-related activities for a radon mitigation business shall be directly supervised or performed on-site by a radon mitigation technician.

(c) Each person subject to K.A.R. 28-35-601 through 28-35-608, when performing radon mitigation, shall comply with the protocols in the document adopted by reference in K.A.R. 28-35-604(b)(1)(D) regarding the design and construction of mitigation systems.

(28-35-608. Renewal of certification. (a) Each certification renewal application for a radon measurement technician, radon mitigation technician, or radon measurement laboratory shall be submitted at least 60 days before expiration of the certificate.

(b) Each applicant for renewal of certification shall meet the following requirements:
ICENSURE OF ADULT CARE HOME ADMINISTRATORS

28-38-18. Licensing examinations. (a) Each candidate for licensure as an adult care home administrator shall be required to pass a national examination and a state law examination for adult care home administration approved by the board. Each candidate shall take the national test within 12 months of completing an administrator-in-training practicum unless for good cause the board grants an extension.

(b) Each candidate for licensure shall pay the required examination fee for the national examination directly to the testing agency. An examination fee shall be required each time a candidate takes the national examination.

(c) The minimum passing scaled score for the national examination shall be 113. The minimum passing raw score for the state law examination shall be 75 percent.

(d) Each candidate for licensure who has been disqualified for failing the national examination shall be given written notification by the board of the disqualification and the reason or reasons for failing, including a breakdown of the subject areas passed and failed.

(e) A candidate who has failed three national examinations shall not submit a new application for examination until the candidate has received board approval for a course of additional education or training, or both, signed by the candidate, the preceptor, and the candidate’s practicum coordinator and has completed the approved course of additional education or training, or both. The course of additional education or training, or both, shall include an additional 40 hours of administrator-in-training instruction in each of the “domains of practice,” as defined in K.A.R. 28-38-29, for which the candidate received a raw score below 75 percent on the national examination.

(f) Each candidate who completes the required 40 hours of additional administrator-in-training education or training, or both, in each of the domains of practice for which the candidate received
a raw score below 75 percent on the national examination shall be eligible to submit a new application for the national examination. If the candidate fails the fourth attempt, the candidate shall remain eligible to submit an application for a fifth attempt to pass the national examination.

(g) A candidate who has failed five national examinations shall not submit a new application for examination until the candidate has completed a second 480-hour administrator-in-training practicum that is conducted by an accredited college or university or an equivalent educational training practicum, as specified in K.A.R. 28-38-19(a)(2).

(h) Each candidate who has completed a second 480-hour administrator-in-training practicum shall be given three additional attempts to pass the national examination. A candidate who has failed three national examinations after completing a second 480-hour administrator-in-training practicum shall not be allowed to submit an additional application for examination.

(i) Each candidate shall be given a period of 36 months from the date the candidate completed an initial administrator-in-training practicum or a second practicum under subsection (g) to take and pass the national test.

(j) Any candidate who fails the state examination may retake the state law examination until the candidate passes this examination.


Article 39.—LICENSURE OF ADULT CARE HOMES


(b) “Clinical instruction” means training in which the trainee demonstrates knowledge and skills while performing tasks on an individual under the direct supervision of the course instructor. Clinical instruction may be performed in any of the following settings:

1. An adult care home;
2. a long-term care unit of a hospital; or
3. a simulated laboratory.

(c) “Department” means Kansas department of health and environment.

(d) “Direct care” means assistance provided in activities of daily living. These activities shall include grooming, eating, toileting, transferring, and ambulation.

(e) “Direct supervision” means that the supervisor is on the facility premises and is readily accessible for one-on-one consultation, instruction, and assistance, as needed.

(f) “Eligible for employment,” when describing a certified nurse aide, means that the certified nurse aide meets the following criteria:

1. Has been employed to perform nursing or nursing-related services for at least eight hours in the preceding 24 months;
2. has no record of abuse, neglect, and exploitation; and
3. is not prohibited from employment based upon criminal convictions pursuant to K.S.A. 39-970, and amendments thereto.
(g) “Instructor” means an individual who has been approved by the secretary to teach nurse aide, home health aide, or medication aide training courses.

(h) “Licensed nursing experience” means experience as a registered nurse or licensed practical nurse.

(i) “Nurse aide trainee I” means an individual in the process of completing part I of a 90-hour nurse aide course as specified in K.A.R. 28-39-165.

(j) “Nurse aide trainee II” means an individual who has successfully completed part I of a 90-hour nurse aide course specified in K.A.R. 28-39-165 or whose training has been endorsed as specified in K.A.R. 28-39-167.

(k) “Secretary” means secretary of the Kansas department of health and environment.

(l) “Simulated laboratory” means an enclosed area that is in a school, institution, adult care home, or other facility and that is similar to an adult care home residential room. In a simulated laboratory, trainees practice and demonstrate basic nurse aide skills while an instructor observes and evaluates the trainees. (Authorized by K.S.A. 2008 Supp. 39-925(d)(2); implementing K.S.A. 2008 Supp. 39-936; effective Feb. 28, 1994; amended Dec. 29, 2003; amended June 12, 2009.)

28-39-165. Nurse aide training program. (a) Requirements. Unlicensed employees who provide direct individual care to residents shall be required to perform the following:

(1) Successfully complete at least a 90-hour nurse aide course that has been approved by the secretary; and


(b) Certification. Each person shall be issued a nurse aide certificate by the secretary, upon completion of the requirements specified in subsection (a), within four months from the beginning date of the initial course in order to continue employment providing direct care. Nurse aide trainee II status for employment shall be for one four-month period only.

(d) 90-hour nurse aide course.

(1) Each nurse aide course shall be prepared and administered in accordance with the guidelines established by the department in the “Kansas certified nurse aide curriculum guidelines (90 hours),” including the appendices, dated May 2008, and the “Kansas 90-hour certified nurse aide sponsor and instructor manual,” pages 1 through 20 and the appendices, dated May 2008, which are hereby adopted by reference.

(2) Each nurse aide course shall consist of a combination of didactic and clinical instruction. At least 50 percent of part I and part II of the course curriculum shall be provided as clinical instruction.

(3) Each nurse aide course shall be sponsored by one of the following:

(A) An adult care home;

(B) A long-term care unit of a hospital; or

(C) A postsecondary school under the jurisdiction of the state board of regents.

(4) Clinical instruction shall be conducted in one or a combination of the following locations:

(A) An adult care home;

(B) A long-term care unit of a hospital; or

(C) A simulated laboratory.

(5) An adult care home shall not sponsor or provide clinical instruction for a 90-hour nurse aide course if that adult care home has been subject to any of the sanctions under the medicare certification regulations listed in 42 C.F.R. 483.151(b)(2), as in effect on October 1, 2007.

(c) Employment as a trainee.

(1) Each nurse aide trainee I in an approved 90-hour course shall be required to successfully complete part I of the course to demonstrate initial competency before being employed or used as a nurse aide trainee II. A nurse aide trainee II may provide direct care to residents only under the direct supervision of a registered nurse or licensed practical nurse.

(2) Each nurse aide trainee II in an approved 90-hour course shall be issued a nurse aide certificate by the secretary, upon completion of the requirements specified in subsection (a), within four months from the beginning date of the initial course in order to continue employment providing direct care. Nurse aide trainee II status for employment shall be for one four-month period only.


(1) Each person who intends to be a course in-
structor shall submit a completed instructor approval application form to the department at least three weeks before offering an initial course and shall receive approval as an instructor before the first day of an initial course.

(2) Each course instructor shall be a registered nurse with a minimum of two years of licensed nursing experience, with at least 1,750 hours of experience in either or a combination of an adult care home or long-term care unit of a hospital. Each course instructor shall have completed a course in teaching adults, shall have completed a professional continuing education offering on supervision or adult education, or shall have experience in teaching adults or supervising nurse aides.

(b) Course instructor and course sponsor responsibilities.

(1) Each course instructor and course sponsor shall be responsible for ensuring that the following requirements are met:

(A) A completed course approval application form shall be submitted to the department at least three weeks before offering a course. Approval shall be obtained from the secretary at the beginning of each course whether the course is being offered initially or after a previous approval. Each change in course location, schedule, or instructor shall require approval by the secretary.

(B) All course objectives shall be accomplished.

(C) Only persons in health professions having the appropriate skills and knowledge shall be selected to conduct any part of the training. Each person shall have at least one year of experience in the subject area in which that person is providing training.

(D) Each person providing a part of the training shall do so only under the direct supervision of the course instructor.

(E) The provision of direct care to residents by a nurse aide trainee II during clinical instruction shall be limited to clinical experiences that are for the purpose of learning nursing skills under the direct supervision of the course instructor.

(F) When providing clinical instruction, the course instructor shall perform no other duties but the direct supervision of the nurse aide trainees.

(G) Each nurse aide trainee in the 90-hour nurse aide course shall demonstrate competency in all skills identified on the part I task checklist before the checklist is signed and dated by the course instructor as evidence of successful completion of part I of the course.

(H) The course shall be prepared and administered in accordance with the guidelines in the “Kansas certified nurse aide curriculum guidelines (90 hours)” and the “Kansas 90-hour certified nurse aide sponsor and instructor manual,” as adopted in K.A.R. 28-39-165.

(2) Any course instructor or course sponsor who does not meet the requirements of this regulation may be subject to withdrawal of approval to serve as a course instructor or a course sponsor. (Authorized by K.S.A. 2008 Supp. 39-925(d)(2); implementing K.S.A. 2008 Supp. 39-936; effective Feb. 28, 1994; amended Dec. 29, 2003; amended June 12, 2009.)


(a) Each person whom the secretary has determined to have successfully completed training or passed a test, or both, that is equivalent to the training or test required by this state may be employed without taking this state’s test.

(b) Each person whom the secretary has determined not to be exempt from examination pursuant to subsection (a) but who meets any one of the following requirements shall be deemed to have met the requirements specified in K.A.R. 28-39-165 if that person passes a state test as specified in K.A.R. 28-39-168:

(1) Each person who has received nurse aide training in another state, is listed on another state’s registry as a nurse aide, and is eligible for employment as a nurse aide shall be deemed eligible to take the state test as specified in K.A.R. 28-39-168. Each person whose training in another state is endorsed and who has passed the state test shall be issued a nurse aide certificate.

(2) Each person who meets any of the following criteria shall be deemed eligible to take the state test as specified in K.A.R. 28-39-168:

(A) Has completed training deemed equivalent to the requirements specified in K.A.R. 28-39-165;

(B) is currently licensed in Kansas or another state to practice as a registered nurse, licensed practical nurse, or licensed mental health technician, with a license that has not been suspended or revoked; or

(C) has a license to practice as a registered nurse, licensed practical nurse, or licensed mental health technician that has expired within the 24-
month period before applying for equivalency, but has not been suspended or revoked.

(3) Each person who has received training from an accredited nursing or mental health technician training program within the 24-month period before applying for equivalency and whose training included a basic skills component comprised of personal hygiene, nutrition and feeding, safe transfer and ambulation techniques, normal range of motion and positioning, and a supervised clinical experience in geriatrics shall be deemed eligible to take the state test as specified in K.A.R. 28-39-168.

(c) Each person qualified under subsection (a) shall receive written notification from the department of exemption from the requirement to take this state’s test and the fact that the person is eligible for employment.

(d) Each person qualified under subsection (b) shall receive written approval from the department or its designated agent to take the state test. Upon receiving written approval from the department or its designated agent to take the state test, that person may be employed by an adult care home as a nurse aide trainee II to provide direct care under the direct supervision of a registered nurse or licensed practical nurse. Each person employed as a nurse aide trainee II shall be issued a nurse aide certificate by the secretary, upon completion of the requirements specified in K.A.R. 28-39-165, within one four-month period starting from the date of approval, in order to continue employment providing direct care after completing an approved 90-hour course as specified in K.A.R. 28-39-165.

(3) If the person does not pass the state test within 12 months after the starting date of taking an approved 90-hour course, the person shall retake the entire course.

(4) If a person whose education or training has been endorsed or deemed equivalent as specified in K.A.R. 28-39-167 and the person does not pass the state test on the first attempt, the person shall successfully complete an approved 90-hour nurse aide course as specified in K.A.R. 28-39-165 to retake the state test. Each person whose training was endorsed or deemed equivalent, who failed the state test, and who has successfully completed an approved nurse aide course shall be eligible to take the test three times within a year after the beginning date of the course.

(c) Application fee.

(1) Each nurse aide trainee shall pay a nonrefundable application fee of $20.00 before taking the state test. A nonrefundable application fee shall be required each time the test is scheduled to be taken. Each person who is scheduled to take the state test, but fails to take the state test, shall submit another fee before being scheduled for another opportunity to take the test.

(2) Each course instructor shall collect the application fee for each nurse aide candidate eligible to take the state test and shall submit the fees, class roster, application forms, and accommodation request forms to the department or its designated agent.

(d) Each person who is eligible to take the state test and who has submitted the application fee and application form shall be issued written approval, which shall be proof of eligibility to sit for the test.

(e) Test accommodation.

(1) Any reasonable test accommodation or auxiliary aid to address a disability may be requested by any person who is eligible to take the state test. Each request for reasonable accommodation or auxiliary aid shall be submitted each time a candidate is scheduled to take the test.

(2) Each person requesting a test accommodation shall submit an accommodation request form along with an application form to the instructor. The instructor shall forward these forms to the department or its designated agent at least three weeks before the desired test date. Each instructor shall verify the need for the accommodation by signing the accommodation request form.
(3) Each person whose second language is English shall be allowed to use a bilingual dictionary while taking the state test. Limited English proficiency shall not constitute a disability with regard to accommodations. An extended testing period of up to two additional hours may be offered to persons with limited English proficiency.


28-39-169a. Medication aide. (a) Each medication aide candidate shall be either a nurse aide who has been issued a certificate by the secretary or a qualified mental retardation professional as defined in 42 C.F.R. 483.430(a), revised October 1, 2010 and hereby adopted by reference, and shall meet the following requirements:

(1) Has completed a course in medication administration approved by the secretary; and
(2) has passed a state test as approved by the secretary.

(b) Each person who has met one of the following requirements shall be eligible to enroll in a medication aide course:

(1) Is a nurse aide who has a Kansas nurse aide certificate and who has been screened and tested for reading comprehension at an eighth-grade level; or
(2) is a qualified mental retardation professional employed by an intermediate care facility for the mentally retarded.

(c) A qualified mental retardation professional who is not a nurse aide, who has completed a course in medication administration as approved by the secretary, and who has passed the state test shall be allowed to administer medications only to residents in an intermediate care facility for the mentally retarded.

(d) (1) Each medication aide course shall meet the following requirements:

(A) Consist of a minimum of 75 total hours, which shall include a minimum of 25 hours of clinical instruction;
(B) be prepared and administered in accordance with the guidelines prescribed by the secretary and follow the content outlined in the “Kansas certified medication aide curriculum” and appendices, dated February 2011, and the “Kansas certified medication aide sponsor and instructor manual,” pages 2 through 21, dated February 2011, which are hereby adopted by reference; and
(C) be sponsored by one of the following:
   (i) A postsecondary school under the jurisdiction of the state board of regents;
   (ii) a state-operated institution for the mentally retarded; or
   (iii) a professional health care association approved by the secretary.
(2) No correspondence course shall be approved as a medication aide course.

(e) Distance-learning and computer-based educational offerings shall be required to meet the requirements specified in this subsection.

(f) Each course sponsor and course instructor shall meet the following requirements:

(1) Each person who intends to be a course instructor shall submit an instructor approval application form to the secretary at least three weeks before offering an initial course and shall be required to receive approval as an instructor before the first day of an initial course.
(2) Each instructor shall be a registered nurse with a current Kansas license and two years of clinical experience as a registered nurse. Any Kansas-licensed pharmacist actively working in the pharmacy field may conduct part of the training under the supervision of an approved instructor.
(3) Only persons who meet the qualifications specified in subsection (b) shall be eligible to take the course.
(4) Each trainee shall be screened and tested for comprehension of the written English language at an eighth-grade reading level before enrolling in the course.
(5) The course shall be prepared and administered in accordance with the guidelines and follow the content in the “Kansas certified medication aide curriculum” and the “Kansas certified medication aide sponsor and instructor manual,” as adopted in subsection (d).
(6) The clinical instruction and skills performance involving the administering of medications shall be under the direct supervision of the course instructor.
(7) During the clinical instruction and skills performance, the course instructor shall perform no other duties than the provision of direct supervision to the trainees.
(g) Any course instructor or course sponsor who does not fulfill the requirements of this regulation may be subject to withdrawal of approval to serve as a course instructor or a course sponsor.

(h) Any person whose education or training has been deemed equivalent to the medication aide course by an approved sponsor as specified in paragraph (d)(1)(C) may apply to take the state test to become certified as a medication aide. Before requesting a determination of equivalency for a person’s education or training, that person shall be a Kansas-certified nurse aide and shall meet one of the following conditions:

(1) The person is currently credentialed to administer medications in another state. The secretary or the designated agent shall evaluate that state’s credentialed training for equivalency in content and skills level to the requirements for certification as a medication aide in Kansas.

(2) The person is currently enrolled in an accredited practical nursing or professional nursing program and has completed a course of study in pharmacology with a grade of C or better.

(3) The person is currently licensed in Kansas or another state, or has been licensed within 24 months from the date of application, as a licensed mental health technician, and there are no pending or current disciplinary actions against the individual’s license.

(4) The person has been licensed in Kansas or another state, within 24 months from the date of application, as a licensed practical nurse whose license is inactive or a registered nurse whose license is inactive, and there are no pending or current disciplinary actions against the individual’s license. (Authorized by K.S.A. 75-5625; implementing K.S.A. 65-1,120 and K.S.A. 2010 Supp. 65-1124; effective Dec. 29, 2003; amended Oct. 14, 2011.)

28-39-169b. State medication aide test. (a) The state test shall be administered by the secretary or the designated agent and in accordance with guidelines prescribed by the secretary as outlined in the “certified medication aide test manual” on pages 24 through 31 of the “Kansas certified medication aide sponsor and instructor manual,” dated February 2011. These pages are hereby adopted by reference.

(1) Each person who has completed the medication aide course as specified in K.A.R. 28-39-169a shall have a maximum of two attempts to pass the state test within 12 months after the first day of the course. If the person does not pass the test within this 12-month period, the course shall be retaken. Each time the person successfully completes the course, the person shall have two attempts to pass the state test within 12 months after the first day of the course. The number of times a person may retake the course shall be unlimited.

(2) Each person who is a Kansas-certified nurse aide and whose training has been deemed equivalent to the Kansas medication aide course shall have a maximum of one attempt to pass the test within 12 months after the date the equivalency is approved. If the person does not pass the test within this 12-month period, the person shall be required to take the medication aide course.

(3) There shall be three different forms of the state test. The different forms of the test shall be used on an alternating basis. Each of the three forms shall be comprised of 85 multiple-choice questions. The passing score for each of the three forms of the test shall be 65 or higher.

(4) Only persons who have met the requirements specified in K.A.R. 28-39-169a(a)(1) and (h) shall be eligible to take the state test.

(5) Each person whose second language is English shall be allowed to use a bilingual dictionary while taking the state test. Limited English proficiency shall not constitute a disability with regard to accommodation. An extended testing period of up to two additional hours may be offered to persons with limited English proficiency. (b) Each person shall be issued a medication aide certificate by the secretary and shall be listed on a public nurse aide registry upon successful completion of the requirements specified in K.A.R. 28-39-169a(a) and (h).

(c) The course instructor shall submit to the secretary a course roster of names, an application form, and a nonrefundable application fee of $20.00 for each medication aide who has completed the course and passed the state test.

(d) A replacement medication aide certificate for a medication aide whose certification is current shall be issued by the secretary upon the receipt and processing of a certificate replacement form and a nonrefundable fee of $20.00. (Authorized by K.S.A. 75-5625; implementing K.S.A. 65-1,120 and K.S.A. 2010 Supp. 65-1124; effective Dec. 29, 2003; amended Oct. 14, 2011.)

28-39-169c. Medication aide continuing education. (a) Each person who has a certif-
icate of completion for a medication aide training course as specified in K.A.R. 28-39-169a and who wishes to maintain the certificate shall complete, every two years, a program of 10 hours of continuing education approved by the secretary.

(b) The continuing education requirement shall include one or more of the following topics:

(1) Classes of drugs and new drugs;
(2) new uses of drugs;
(3) methods of administering medications;
(4) alternative treatments, including herbal drugs and their potential interaction with traditional drugs;
(5) safety in the administration of medications; or
(6) documentation.

(c) Each program of continuing education shall be sponsored by one of the following:

(1) A postsecondary school under the jurisdiction of the state board of regents;
(2) an adult care home;
(3) a long-term care unit of a hospital;
(4) a state-operated institution for the mentally retarded; or
(5) a professional health care association approved by the secretary.

(d) Each course instructor shall be a registered nurse with a current Kansas license and two years of clinical experience as a registered nurse or a licensed practical nurse. Any Kansas-licensed pharmacist actively working in the pharmacy field may be selected to conduct part of the training under the supervision of the instructor.

(e) Each person who intends to be a course instructor shall submit an instructor approval application form to the secretary at least three weeks before offering an initial course and shall be required to receive approval as an instructor before the first day of an initial course.

(f) Each sponsor and course instructor of continuing education shall be responsible for ensuring that the following requirements are met:

(1) The course shall be prepared and administered as prescribed by regulation and the “Kansas certified medication aide sponsor and instructor manual,” as adopted in K.A.R. 28-39-169a.
(2) A course approval application form shall be submitted to the secretary at least three weeks before offering a course, and course approval shall be required to be received before beginning the course.
(3) A course roster of names, a renewal application form, and a nonrefundable renewal application fee of $20.00 for each medication aide who has completed the course shall be submitted to the secretary.

(4) If clinical instruction in administering medications is included in the program, each student administering medications shall be under the direct supervision of the registered nurse instructor.

(g) Any sponsor or instructor who does not fulfill the requirements specified in subsections (d), (e), and (f) may be subject to withdrawal of approval to serve as a course instructor or a course sponsor.

(h) College credits or vocational training may be approved by the secretary as substantially equivalent to medication aide continuing education. The instructor or nursing program coordinator shall submit a department-approved form attesting that the course content is substantially equivalent to the topics listed in paragraphs (b)(1) through (6).

(i) Each certified medication aide shall be responsible for notifying the secretary of any change in the aide’s address or name.

(j) No correspondence course shall be approved for a medication aide continuing education course.

(k) Distance-learning educational offerings and computer-based educational offerings shall meet the requirements specified in subsections (b), (c), (d), (e), (f), and (g).

(l) Each medication aide certificate shall be renewed upon the department’s receipt from the course instructor of the following:

(1) Verification of the applicant’s completion of 10 hours of approved continuing education;
(2) a renewal application form; and
(3) a nonrefundable renewal application fee of $20.00.

(m) Each medication aide certificate or renewed certificate shall be valid for two years from the date of issue.

(n) Each applicant for renewal of certification shall have completed the required number of hours of documented and approved continuing education during each certification period immediately preceding renewal of the certificate. Approved continuing education hours completed in excess of the requirement shall not be carried over to a subsequent renewal period.

(o) Each medication aide certificate that has been expired for three or fewer years shall be reinstated upon the department’s receipt of the following:
(1) Verification of the applicant's completion of 10 hours of approved continuing education. This continuing education shall have been completed within the three-year period following expiration of the certification;
(2) a renewal application form; and
(3) a nonrefundable renewal application fee of $20.00.
(p) Each lapsed certificate renewed within the three-year period specified in subsection (o) shall be valid for two years from the date of issuance.
(q) Each person whose medication aide certification has been expired for more than three years shall be required to retake the 75-hour medication aide course. (Authorized by K.S.A. 65-1,121 and 75-5625; implementing K.S.A. 65-1,121 and K.S.A. 2010 Supp. 65-1124; effective Dec. 29, 2003; amended Oct. 14, 2011.)


Article 43.—CONSTRUCTION, OPERATION, MONITORING AND ABANDONMENT OF SALT SOLUTION MINING WELLS


Article 45b.—UNDERGROUND CRUDE OIL STORAGE WELLS AND ASSOCIATED BRINE PONDS

28-45b-1. Definitions. (a) “Active well” means an unplugged well that is in service or in monitoring status.
(b) “American petroleum institute gravity” and “API gravity” mean the specific gravity scale developed by the American petroleum institute for measuring the relative density of various petroleum liquids, expressed in degrees API.

(c) “Applicant” means the operator and the owner requesting a permit as specified in this article. If the operator and the owner are not the same person, the owner and the operator shall jointly submit an application for a permit.

(d) “Brine” means saline water with a sodium chloride concentration equal to or greater than 90 percent.

(e) “Brine pond” means the excavated or diked structure used for the surface containment of brine used in the creation, maintenance, and operation of an underground crude oil storage well.

(f) “Crude oil” means unrefined, liquid petroleum.

(g) “Crude oil reserve” means the storage of crude oil for future use.

(h) “Crude oil storage well,” “underground crude oil storage well,” and “storage well” mean a well used for the injection or withdrawal of crude oil into or out of an underground crude oil storage cavern.

(i) “Department” means Kansas department of health and environment.

(j) “Draft permit” means a document that is pending approval by the secretary to be issued as a permit.

(k) “Fracture gradient” means the pressure gradient, measured in pounds per square inch per foot, that causes the geological formations to physically fracture.

(l) “Freshwater” means water containing not more than 1,000 milligrams per liter of total dissolved solids (TDS).

(m) “Licensed geologist” means a geologist licensed to practice geology in Kansas by the Kansas board of technical professions.

(n) “Licensed professional engineer” means a professional engineer licensed to practice engineering in Kansas by the Kansas board of technical professions.

(o) “Licensed professional land surveyor” means a professional land surveyor licensed to practice land surveying in Kansas by the Kansas board of technical professions.

(p) “Liner” means the casing normally installed within the production casing.

(q) “Maximum allowable operating pressure” means the maximum pressure authorized by the department and measured at the product side of the wellhead.

(r) “Maximum allowable synthetic membrane liner leakage rate” means a monitored or a calculated leakage rate of 10 percent of the collection and leak return system capacity.

(s) “Maximum operating pressure” means the maximum pressure monitored during a 24-hour period and measured at the product side of the wellhead.

(t) “Monitoring status” means temporary status for a well that has been placed out of service by removing the product and filling the cavern with brine.

(u) “Municipal population center” means an incorporated city.

(v) “Operator” means the person recognized by the secretary as being responsible for the physical operation of an underground crude oil storage facility or a brine pond.

(w) “Owner” means the person owning all or part of any underground crude oil storage facility or brine pond.

(x) “Permit” means an authorization, license, or equivalent control document issued to the owner and the operator by the secretary. A permit may be issued for any of the following:

1. A new underground crude oil storage facility and the associated crude oil storage wells;
2. an existing underground crude oil storage facility and the associated crude oil storage wells; or
3. a brine pond.

(y) “Permittee” means the owner and the operator issued a permit, as defined in this regulation, by the secretary.

(z) “Person” means any individual, company, corporation, institution, association, partnership, municipality, township, and local, state, or federal agency.

(aa) “Plugged well” means a storage well that has been plugged or placed into plugging-monitoring status pursuant to K.A.R. 28-45b-18.

(bb) “Plugging-monitoring status” means the status of a storage well that will not be returned to active status but will be filled with brine to monitor cavern stabilization in lieu of plugging.

(cc) “Porosity storage” means the storage of hydrocarbon gas in underground porous and permeable strata that have been converted to hydrocarbon gas storage.

(dd) “Pressure gradient” means the ratio of
pressure per unit depth, expressed as pounds per square inch per foot of depth.

(ee) “Product” means crude oil.

(ff) “Saturated brine” means saline water with a sodium chloride concentration that is equal to or greater than 90 percent.

(gg) “Secretary” means secretary of the department of health and environment.

(hh) “Solutioning” means the process of injecting fluid into a well to dissolve salt or any other readily soluble rock or mineral.

(ii) “Sour crude oil” means crude oil with a sulfur content greater than 0.5 percent.

(jj) “Supervisory control and data acquisition” means an automated surveillance system in which the monitoring and control of storage activities are accomplished at a central or remote location.

(II) “Type” means the description of the product that includes American petroleum institute gravity, non-hydrocarbon impurities, and hydrogen sulfide content.

(mm) “Underground crude oil storage cavern,” “cavern,” and “storage cavern” mean the storage space for crude oil created in a salt formation by solution mining.

(nn) “Underground crude oil storage facility” and “facility” mean the acreage associated with the storage field, with facility boundaries approved by the secretary. This term shall include the brine ponds, storage wells, wellbore tubular goods, the wellheads, and any related equipment, including any appurtenances associated with the well field.

(oo) “Unplugged,” when used to describe a well, means a storage well that either is not plugged or is in plugging-monitoring status.

(pp) “Unsaturated brine” means saline water with a sodium chloride concentration less than 90 percent.

(qq) “Usable water formation” means an aquifer or any portion of the aquifer that meets any of the following criteria:

(1) Supplies any public water system;
(2) contains a supply of groundwater that is sufficient to supply a public water system and that currently supplies drinking water for human consumption; or
(3) contains fewer than 10,000 milligrams per liter total dissolved solids and is not an exempted aquifer.

(rr) “Variance” means the secretary’s written approval authorizing an alternative action to one or more of the requirements of these regulations.


28-45b-2. Permit required for facilities and storage wells; variances. (a) No person shall create, operate, or maintain an underground crude oil storage facility or any crude oil storage well without first obtaining a permit from the secretary.

(b) The storage of crude oil in caverns constructed in any rock formations other than bedded salt shall be prohibited.

(c) A variance to any requirement of this article may be granted by the secretary if both of the following conditions are met:

(1) The variance is protective of public health, safety, and the environment.
(2) The applicant or permittee agrees to perform any additional testing, monitoring, or well improvements, or any combination, if required by the secretary.

(d) Each applicant or permittee seeking a variance shall submit a written request, including justification for the variance and any supporting data, to the secretary for review and consideration for approval. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

28-45b-3. Well conversions and reentry. (a) The conversion of an existing well that was not originally designed for crude oil storage to an underground crude oil storage well shall be considered for approval if both of the following conditions are met:

(1) The applicant submits a completed application as required by K.A.R. 28-45b-4.
(2) The secretary determines that the conversion is protective of public health, safety, and the environment.

(b) Any permittee may convert an unplugged underground crude oil storage well to monitoring status if all of the following requirements are met:

(1) Each permittee shall verify the integrity of the storage well and cavern by conducting a mechanical integrity test before converting the well to monitoring status.
(2) Each permittee shall run a gamma-density log, a thermal neutron decay time log, or a pulsed...
neutron log to verify the roof thickness before converting the well to monitoring status.

(3) Each permittee shall meet the requirements specified in the department’s document titled “procedure for converting a crude oil storage well to monitoring status,” procedure #UICLPG-27, dated October 2008, which is hereby adopted by reference.

(4) Each permittee of an underground crude oil storage cavern that is in monitoring status shall conduct a casing inspection evaluation before placing the cavern into service. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

28-45b-4. Permit required for facility and associated storage wells. (a) Each applicant who intends to construct a new underground crude oil storage well shall submit a completed permit application to the secretary, on a form approved by the department, at least 180 days before the proposed commencement date for the construction of the new crude oil storage well. Well construction shall not begin until the secretary has issued the permit.

(b) Each applicant who intends to convert an existing well to a crude oil storage well shall submit a completed permit application to the secretary, on a form approved by the department, at least 180 days before the proposed date for operation of the crude oil storage well. Well modifications and operations shall not commence until the secretary has issued the permit.

(c) Each applicant who intends to construct a new storage well for the purpose of creating a crude oil reserve shall submit a completed permit application to the secretary at least 180 days before the proposed commencement date for storage well construction. Well construction shall not begin until the secretary has issued the permit.

(d) Each applicant who wishes to convert an existing storage well for the purpose of creating a crude oil reserve shall submit a completed permit application to the secretary at least 180 days before the proposed date for operation of the crude oil storage well. Well modifications and operations shall not commence until the secretary has issued the permit.

(e) Each applicant who intends to create a crude oil reserve shall include the following with the permit application:

(1) A description of monitoring and testing methods to demonstrate that the quality of the crude oil is maintained during storage;
(2) a description of methods and a schedule for routinely testing the integrity of the wellhead, casing, and transfer equipment; and
(3) a description of the brine transfer system, including brine source, disposal method, and means of transfer.

(f) Upon review of each application, one of the following shall be issued by the secretary:

(1) A permit, if the application is approved; or
(2) a notice that the permit has been denied if the applicant has not complied with the requirements of this article. The notice shall include justification for the permit denial.

(g) Each application for a permit shall include a report prepared by a licensed geologist and shall include the following:

(1) An evaluation of the geology and hydrogeology, including cross-sections, isopach and structure maps of the salt formation, and water-level or potentiometric maps;
(2) a regional stratigraphic evaluation;
(3) local and regional structural analyses, including maps, cross-sections, and available geophysical data;
(4) a flood assessment identifying floodplain and flood-prone areas, including the following:
   (A) Flood response procedures; and
   (B) design criteria for the well and facility equipment; and
(5) an assessment of the potential for ground subsidence.

(h) Each applicant shall submit the following information with the application:

(1) A plan view map showing locations of all water, solution-mining, storage, monitoring, disposal, injection, oil, and gas wells within a one-mile perimeter of the facility’s boundary; and
(2) a plan view map of man-made surface structures and activities within a one-mile perimeter of the facility’s boundary.

(i) Each permittee shall submit a compliance audit every 10 years, on a form furnished by the department, for review and consideration for approval for the continued operation of each storage well.

(j) Each permittee shall submit a sample log of well cuttings from any new well drilled at the facility, including new crude oil storage wells, monitoring wells, and stratigraphic test holes.

(1) Cuttings shall be collected at 10-foot inter-
vals from surface to total well depth or at an interval specified by the department.

(2) Well cuttings shall be collected, described, and logged as specified in the department’s document titled “procedure for sample logging,” which is adopted by reference in K.A.R. 28-45-6a.

(3) The collection of cuttings shall be supervised by a licensed geologist or a licensed geologist’s designee.

(4) The description and logging of the sample cuttings shall be performed by a licensed geologist.

(5) Each permittee shall submit a sample log and a dry sample set to the department within 45 days after the completion of the well.

(k) Each permittee shall provide a minimum of one core from each facility. The following provisions shall apply:

(1) Each permittee shall submit a plan for a new core describing the coring interval, coring procedures, and core testing with the permit application to the secretary for review and consideration for approval. The plan shall be submitted at least 60 days before the coring event.

(2) Each permittee shall submit the core analysis for a new core after installing the first storage well and before developing the storage field.

(3) Any permittee may submit existing core data if the secretary determines that the core is representative of the geology of the area.

(4) Each permittee shall submit the core analysis for an approved existing core with the permit application.

(5) Each permittee shall make the core available for inspection upon request by the secretary.

(l) Each permittee shall submit a water analysis for any water-bearing formation encountered in drilling a new monitoring well. The water shall be analyzed for the following parameters:

(1) Chloride;

(2) total dissolved solids; and

(3) any parameter that the secretary determines could pose a potential threat to public health, safety, and the environment.

(m) Each permittee shall ensure that the stored crude oil, formation water, lithology, and substances used in the solutioning of the storage caverns are compatible.

(n) Each permittee shall submit open-hole logs for any new crude oil storage well. The logging interval shall be from the surface to at least 100 feet below the top of the salt section. At a minimum, the following logs shall be run:

(1) A gamma ray log;

(2) a neutron log, if the source is registered in Kansas, or a sonic log;

(3) a density log; and

(4) a caliper log.

(o) Any permittee may use an alternative log if the secretary determines that the alternative log is substantially equivalent to one of the logs specified in subsection (n). The permittee shall submit the following information:

(1) A description of the log and the theory of operation for that log;

(2) a description of the field conditions under which the log can be used;

(3) the procedure for interpreting the log; and

(4) an interpretation of the log upon completion of the logging event.

(p) If a facility has a new storage cavern, the permittee shall ensure that a minimum salt roof thickness of 100 feet is maintained above the storage cavern.

(q) Each permittee shall submit supporting data showing that a minimum crude oil inventory in each storage cavern shall be maintained to protect the salt roof during short time periods when changing service, conducting workover activities, or performing surface facility maintenance.

(r) If a facility has an existing cavern approved for crude oil storage with a salt roof thickness greater than 50 feet but less than 100 feet, the permittee shall meet the following requirements:

(1) The permittee shall use only saturated brine to displace product.

(2) The permittee shall submit a schedule for monitoring brine salinity.

(3) The salt roof thickness shall be monitored with gamma ray and density logs, or any other log specified in subsection (o), every three years.

(4) The permittee shall provide any additional information, including a geomechanical study from core analysis, that may be requested by the secretary to verify the integrity of the salt roof.

(s) Underground crude oil storage caverns with a salt roof thickness of 50 feet or less shall be prohibited.

(t) Underground communication between underground crude oil storage caverns in the upper 50 feet of the salt formation shall be prohibited.

(u) Underground communication between underground crude oil storage caverns below the upper 50 feet of the salt formation shall be prohibited, unless the secretary determines that the communication is protective of public health,
safety, and the environment. The permittee shall submit the following:

(1) A sonar survey for each cavern that is in communication with another cavern; and

(2) a plan describing the monitoring and testing that the permittee will conduct to ensure that the integrity of the underground crude oil storage wells and caverns will be maintained.

(v) The horizontal distance separating new underground crude oil storage caverns shall be at least 100 feet between the cavern boundaries.

(w) Any existing cavern approved for crude oil storage with horizontal separation less than 100 feet may operate if the following requirements are met:

(1) Each permittee shall submit a justification for each existing underground crude oil storage cavern with horizontal separation less than 100 feet. The following requirements shall apply:

(A) The justification shall include spacing-to-diameter ratios, cavern pressure differentials, and analyses of cavern shape, size, and depth.

(B) The horizontal spacing shall be reevaluated every five years.

(2) Horizontal spacing of less than 50 feet between caverns shall be prohibited.

(x) The maximum horizontal diameter of each cavern shall not exceed 300 feet.

(y) Each permittee shall ensure the integrity of the storage well, including the wellhead and casing, and storage cavern before commissioning any new storage cavern into service. Storage operations may commence when the following requirements are met:

(1) The permittee shall submit a notice of completion of construction on a form furnished by the department.

(2) Each new storage well shall be inspected by the secretary before storage operations commence. If the well fails the inspection, the permittee shall not commence storage operations. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

28-45b-5. Public notice. (a) Public notice shall be given by the secretary for any of the following permit actions:

(1) Any permit application for a crude oil storage well;

(2) the denial of a permit; or

(3) a scheduled hearing.

(b) Public notice and, if applicable, a copy of the draft permit shall be mailed or electronically mailed by the department to the permit applicant.

(c) Each public notice shall be mailed by the department to the following:

(1) Any person who submits a written request for placement on the mailing list;

(2) the official county newspaper of each county in which the lands affected by the application are located, for publication in at least two issues; and

(3) the Kansas register.

(d) Each public notice shall include the following information:

(1) The name and address of the department processing the permit action for which the notice is being given;

(2) the name and address of the person or company seeking the permit;

(3) a brief description of the business conducted at the facility or the activity described in the permit application;

(4) the name, address, and telephone number of the departmental contact whom interested persons may contact for further information, including copies of the application, draft permit, or any other appropriate information;

(5) a brief description of the comment procedures for public notice; and

(6) a statement of the procedure to request a hearing and any other procedures that allow public participation in the final permit decision.

(e) Any interested person may submit written comments on any permit action to the secretary during the 30-day public comment period. The following requirements shall apply:

(1) All comments shall be submitted by the close of the public comment period.

(2) All supporting materials submitted shall be included in full. The supporting materials shall not be incorporated by reference, unless the supporting materials are any of the following:

(A) Part of the administrative record in the same proceeding;

(B) state or federal statutes and regulations;

(C) state or environmental protection agency documents of general applicability; or

(D) other generally available reference materials.

(3) Commentators shall make supporting materials not already included in the administrative record available to the secretary.

(f) The response to all relevant comments concerning any permit actions and the reasons for
changing any provisions in the draft permit shall be issued when the permit decision is issued.

(g) The response to comments shall be made available to the public upon request. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

28-45b-6. Modification and transfer of a permit. (a) The automatic transfer of a permit shall be prohibited. The requirements for each permit transfer shall be as follows:

(1) Each person requesting a permit transfer shall notify the secretary at least 60 days before the effective date of the proposed transfer.

(2) Each owner and each operator shall comply with the conditions of the existing permit until the secretary reissues the permit.

(b) Any permit may be modified by the secretary under any of the following conditions:

(1) The secretary receives information that was not available when the permit was issued.

(2) The secretary receives a request for the modification of a permit.

(3) The secretary conducts a review of the permit file and determines that a modification is necessary.

(c) Only the permit actions subject to modification shall be reopened.

(d) Minor modifications that do not require public notification shall include the following, except as otherwise specified:

(1) Correction of typographical errors;

(2) requirements for more frequent monitoring or reporting by the permittee;

(3) a date change in a schedule of compliance;

(4) a change in ownership or operational control of the facility, unless the secretary determines that public notification is necessary to protect the public interest;

(5) a change in construction requirements, if the secretary determines that the change is protective of public health, safety, and the environment; and

(6) any amendments to a facility plugging plan.

(e) A draft permit and notification to the public shall be required if any of the following conditions is met:

(1) A permittee proposes substantial alterations or additions to the facility or proposes an activity that justifies a change in the permit requirements, including cumulative effects on public health, safety, or the environment.

(2) Information has become available that would have initially justified different permit requirements.

(3) Regulations on which the permit was based have changed due to the promulgation of new or amended regulations or due to a judicial decision after the permit was issued.

(f) Any permittee may request a permit modification within 180 days after any of the following:

(1) The adoption of new regulations;

(2) any deadline to achieve compliance with regulations; or

(3) any judicial remand and stay of a promulgated regulation if the permit requirement was based on the remanded regulation. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

28-45b-7. Signatories for permit applications and reports. (a) Each applicant for a permit shall designate at least one signatory to sign the permit applications and all reports required by the secretary.

(b) The positions that may be approved by the secretary to be signatories shall be the following:

(1) Plant or operations manager;

(2) cavern specialist;

(3) superintendent; and

(4) any position with responsibility at least equivalent to that required by the positions listed in this subsection.

(c) Any signatory may submit written notification to the secretary specifying a position having responsibility for the overall operation of the facility or activity to act as a designated signatory.

(d) Each signatory and each signatory’s designee shall submit a signature statement, on a form furnished by the department, to the secretary with each permit application. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

28-45b-8. Siting requirements for new storage wells and facilities. (a) Each applicant shall assess the geographical, topographical, and physical data for any proposed underground crude oil storage well location to determine whether siting requirements have been met. The following siting requirements shall be met:

(1) Each new storage facility shall be located at least three miles from the established boundaries of municipal population centers.

(2) Each proposed new facility or boundary ex-
pansion for an existing facility shall be located as follows:

(A) Not less than five miles from an active or abandoned conventional shaft mining operation; and

(B) not less than two miles from the facility's boundary of any solution mining operation.

(3) Each applicant shall assess the extent and nature of current or past conventional subsurface mining activities within five miles of the underground crude oil storage facility's boundary to determine any potential impact to public health, safety, or the environment resulting from the proposed activities at the facility.

(4) Each applicant shall identify and assess all wells, including abandoned wells, from available sources of information, within a one-mile perimeter of the facility's boundary to determine if the following conditions are met:

(A) The wells have been constructed in a manner to protect public health, property, and the environment.

(B) The abandoned wells, including water, oil, gas, monitoring, and underground storage wells, have been properly plugged.

(b) Each applicant shall conduct a regional geological evaluation to determine if the integrity of each proposed storage cavern will be adversely affected by any of the following:

(1) Salt thinning due to any stratigraphic change;

(2) a dissolution zone in the bedded salt; or

(3) abrupt changes in the lithology within the salt interval.

(c) Each applicant shall determine if the facility's location is in a floodplain or flood-prone area.

(d) No new facility's boundary or the expansion of an existing facility's boundary shall be located less than one mile from any existing underground porosity storage facility.

(e) Each applicant shall identify potential risks to the storage operation from activities conducted at adjacent facilities.

(f) Each applicant shall identify all utilities having a right-of-way, including pipeline, railway, roadway, and electrical lines, and shall assess the potential impact of the utilities on the location or operation of the facility. If a facility is exposed and subject to hazards, including vehicular traffic, railroads, electrical power lines, and aircraft traffic, the facility shall be protected from accidental damage, by distance or barricades.

(g) No outer boundary of an underground crude oil storage cavern shall be less than 100 feet from any of the following:

(1) The property boundary of any owners who have not consented to subsurface storage under their property;

(2) any existing surface structure not owned by the facility's owner; or


28-45b-9. Financial assurance for closure of underground crude oil storage facility. (a) Each applicant shall submit, with the permit application and annually thereafter on or before the permit renewal date, proof of financial assurance to the secretary for the following:

(1) Closure of the facility; and

(2) the plugging of any crude oil storage well.

(b) Each applicant shall meet the following requirements:

(1) Submit a detailed written estimate, in current dollars, of the cost to close all underground storage wells and storage caverns at the proposed facility following the closure procedures specified in K.A.R. 28-45b-18. The estimate shall be reviewed and approved by a licensed professional engineer or licensed geologist; and

(2) prepare an estimate of the closure cost for all storage wells and storage caverns at the proposed facility based on the cost charged by a third party to plug the underground storage wells.

(c)(1) Each permittee shall increase the closure cost estimate and the amount of financial assurance provided if any change in the facility operation or closure plan increases the maximum cost of closure at any time.

(2) Each permittee shall provide continuous financial assurance coverage for closure until the secretary approves the facility closure.


28-45b-10. Operations and maintenance plan. (a) Each applicant shall submit a
plan for the long-term operation and maintenance of the facility with the permit application.

(b) Each operation and maintenance plan shall include the following information:

(1) A description of the methods to be used to prevent the overpressuring of wells and storage caverns;
(2) a plan view map of the location of any disposal wells and corrosion control wells; and
(3) the location, depth, and well construction for all shallow and deep groundwater monitoring and observation wells.

(c) Each permittee shall maintain at the facility and make available for inspection by the secretary the following information:

(1) A location map of all wells within the facility's boundaries and a listing of the global positioning system coordinates for each well;
(2) a schematic of the brine and product lines for each cavern; and
(3) a schematic of the gathering line system that connects all wells within the underground crude oil storage facility to a central distribution point.

(d) Each applicant shall submit a plan for solutioning or washing any cavern to the secretary for review and consideration for approval. The plan shall include the following:

(1) A list of acceptable blanket pad materials;
(2) methods for monitoring the solutioning or washing process; and
(3) a monitoring schedule.

(e) Only saturated brine shall be used to displace any product.

(f) The maximum allowable operating pressure and test pressure shall not exceed 0.8 pounds per square inch per foot of depth measured at the higher elevation of either the casing seat or the highest interior elevation of the storage cavern roof.

(g) Each permittee shall submit justification for a minimum operating pressure that is protective of cavern integrity and shall maintain the minimum operating pressure at each storage well.

(h) Each permittee shall meet the notification requirements in the facility's emergency response plan, give oral notification to the department within two hours, and submit written notification within one week to the department if any of the following events occurs:

(1) The overpressuring or the overfilling of an underground crude oil storage cavern;
(2) the loss of integrity for an underground crude oil storage well or cavern;
(3) the release of brine, product, or any other chemical parameter that poses a threat to public health, safety, or the environment;
(4) any uncontrolled or unanticipated loss of product or brine that is detectable by any monitoring or testing;
(5) any other condition that could endanger public health, safety, or the environment;
(6) the establishment of communication between storage caverns;
(7) the triggering of any alarms verifying that the permit safety requirements have been exceeded; or
(8) any equipment malfunction or failure that could result in potential harm to public health, safety, or the environment.

(i) Each permittee shall notify the secretary of any change in the type of product stored in any storage cavern and shall certify that the compatibility of product types and the changes in pressure will not adversely affect the wellhead, casing, tubing, and cavern. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

28-45b-11. Emergency response plan and safety and security measures. (a)(1) Each applicant for a permit for an underground crude oil storage facility shall make the emergency response plan available for inspection by the secretary when the permit application is submitted to the department.

(2) Each permittee shall maintain the emergency response plan at the facility and at the company headquarters and shall make the plan available for inspection by the secretary.

(b) Each permittee shall update the emergency response plan annually and also shall update the plan whenever new information regarding the requirements for the emergency response plan becomes available.

(c) Each emergency response plan shall include a description of the facility’s response to the following events:

(1) Spills and releases;
(2) fires and explosions;
(3) cavern subsidence and collapse; and
(4) any other activity that endangers public health and safety or that constitutes a threat to the environment.

(d) Each emergency response plan shall include the following information:
(1) A description of the warning systems in operation at the facility;
(2) a description of the facility’s emergency response communication system that includes the following:
   (A) A plat showing the location of all occupied buildings within a two-mile perimeter of the facility’s boundaries; and
   (B) a list of addresses and telephone numbers for all persons to contact within a two-mile perimeter of the facility’s boundaries if a release or emergency condition occurs;
(3) the procedures for coordination of emergency response with local emergency planning committees, including emergency notification and evacuation of citizens and employees;
(4) a description of employee training for emergency response;
(5) a plat of the facility, showing the following locations:
   (A) All crude oil storage wells;
   (B) all underground injection control wells;
   (C) all monitoring wells;
   (D) all brine and product lines;
   (E) railroad and transportation routes;
   (F) brine ponds; and
   (G) any other appurtenances at the facility; and
(6) a plan map of man-made surface structures and any construction activities within a one-mile perimeter of the facility’s boundaries.

(e) A copy of the emergency response plan shall be available at the facility, the company headquarters, and the office of each coordinating agency or committee involved in the emergency response plan.

(f) Each permittee shall establish an educational program for community safety and awareness of the emergency response plan.

(g) Each permittee of an underground crude oil storage facility shall provide security measures to protect the public and to prevent unauthorized access. These security measures shall include the following:

   (1) Methods for securing the facility from unauthorized entry and for providing a convenient opportunity for escape to a place of safety;
   (2) at least one visible, permanent sign at each point of entry and along the facility’s boundary, identifying the storage well or facility name, owner, and contact telephone number;
   (3) security lighting;
   (4) alarm systems;
   (5) appropriate warning signs in areas that could contain accumulations of hazardous or noxious vapors or where physical hazards exist; and
(6) a direct communication link with the local control room or any remote control center for service and maintenance crews.

(h) Warning systems and alarms shall consist of the following:

   (1) Combustible gas detectors, hydrogen sulfide detectors, heat sensors, pressure sensors, and emergency shutdown instrumentation integrated with warning systems audible and visible in the local control room and at any remote control center;
   (2) circuitry designed so that the failure of a detector or heat sensor, excluding meltdown and fused devices, will activate the warning; and
(3) a manually operated alarm that is audible to facility personnel.

(i) Each wellhead shall be protected with safety devices to prevent pressures in excess of the maximum allowable operating pressure from being exerted on the storage well or cavern and to prevent the backflow of any stored crude oil if a flowline ruptures.

(j) Each wellhead shall be equipped with manual isolation valves. Each port on a wellhead shall be equipped with either a valve or a blind flange. The valve or blind flange shall be rated at the same pressure as that for the wellhead.

(k) Each permittee shall ensure that the facility has a supervisory control and data acquisition system approved by the secretary to monitor storage operations for individual storage wells. Each of the following instruments shall be connected to an alarm:

   (1) Flow indicators for crude oil;
   (2) combustible gas and hydrogen sulfide detection indicators; and
   (3) pressure indicators on both the product and brine lines at the wellhead.

(l) Each permittee shall install emergency shutdown valves on all crude oil, brine, and water lines. Criteria for emergency shutdown valves shall include the following:

   (1) (A) Be rated at least equivalent to 125 percent of the maximum pressure that could be exerted at the surface; or
   (B) meet a pressure-rating standard equivalent to that specified in paragraph (l)(1)(A) and determined by the secretary to be protective of public health, safety, and the environment;
(2) fail to the closed position;
(3) be capable of remote and local operation; and
(4) be activated by the following:
(A) Overpressuring;
(B) underpressuring; and
(C) gas and heat detection.
(m) Each permittee shall conduct annual inspections of all wellhead instrumentation.
(n) Each permittee shall function-test each critical control system and emergency shutdown valve semiannually.
(o) Each permittee shall perform trip-testing of each loop, including the instrumentation, valves, shutdown equipment, and all wiring connections, to ensure the integrity of the circuit.
(p) Each permittee shall ensure that the equipment automatically closes all inlets and outlets to the storage cavern and safely shuts down or diverts any operation associated with the storage cavern, in case of overfilling or an emergency.
(q) Each permittee shall ensure that the automatic valve closure times meet the valve design limits for closure times.
(r) Each permittee shall cease operations or shall comply with the instructions from the secretary if the secretary determines that an imminent threat to public health, safety, or the environment exists due to any unsafe operating condition. The permittee may resume operations if the secretary determines that the facility’s operations no longer pose a risk to public health, safety, or the environment. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

28-45b-12. Design and construction of storage wells. (a) Each permittee shall ensure that each storage well is constructed with surface casing. The following requirements shall apply:

(1) The surface casing shall be set through all fresh and usable water formations and into competent bedrock.
(2) The surface casing shall be cemented by circulating cement through the bottom of the casing to the surface.
(3) The annular space between the casing and the formation shall be filled with cement.

(b) Each permittee shall install in each storage well double casing protection with an intermediate casing and a production casing set into the upper part of the salt formation. The following requirements shall apply:

(1) The intermediate casing shall extend at least 105 feet into the salt formation.
(2) The production casing shall extend at least to the depth of the intermediate casing.
(3) The annular space between the intermediate and production casings and between the intermediate casing and formation shall be filled with cement by circulating cement through the bottom of the casing to the surface.
(c) For each existing storage well that does not have double casing protection, the permittee shall provide a casing protection evaluation as specified in K.A.R. 28-45b-14.
(d) The casing and tubing shall meet the performance standards for collapse resistance, internal yield pressure, and pipe body yield strength for the well’s setting depths using criteria specified in the American petroleum institute’s bulletin 5C2, which is adopted by reference in K.A.R. 28-45-14.
(e) Each permittee shall designate and maintain a maximum fill level above the bottom of the brine string. The permittee shall submit the following information:

(1) A schematic of the well construction;
(2) the cavern capacity as determined from the most recent sonar survey;
(3) supporting data that shows calculations used to determine the maximum fill level; and
(4) the method that will be used to maintain the maximum fill level.
(f) Only new steel casing shall be installed in a new storage well. Used parts, materials, and equipment that have been tested and certified for continued service may be used for repairs.
(g) Liners shall extend from the surface to a depth near the bottom of the production casing that allows room for workover operations.
(h) The following cementing requirements shall be met:

(1) The cement shall be compatible with the rock formation water and the drilling fluids. Salt-saturated cement shall be used when cementing through the salt section.
(2) The cement across the confining zone and to the surface shall have a compressive strength of not less than 1,000 pounds per square inch.
(3) Remedial cementing shall be completed if there is evidence of either of the following:

(A) Communication between the confining zone and other horizons; or
(B) annular voids that would allow either fluid
contact with the casing or channeling across the confining zone or above the confining zone.

(4) The following requirements for cement evaluation shall apply:

(A) Samples shall be obtained at the start and end of the cementing operation for evaluation of cement properties. All cement samples collected shall be representative of the cement being utilized.

(B) All samples shall be tested for compressive strength.

(C) A cement bond log shall be run on the surface casing, intermediate casing, and cemented production casing after the neat cement has cured for at least 72 hours.

(i) Casing patches shall be prohibited, unless the secretary determines that the use of casing patches is protective of public health, safety, and the environment. The following requirements shall apply:

(1) Each permittee shall submit a plan for the installation of the casing patch to the secretary.

(2) Each permittee shall meet the requirements specified in the department’s document titled “procedure for internal casing repair,” which is adopted by reference in K.A.R. 28-45-14.

(j) Each permittee shall pressure-test each production casing for leaks when the well construction is completed.

(k) Each permittee shall submit a casing inspection base log for the innermost casing string or for the cemented liner that extends the entire length of the casing after the well construction is completed.

(l) Each permittee shall contain, in a tank, all workover wastes, drilling fluids, drilling mud, and drill cuttings from any drilling operation or workover. Drilling fluids, drilling mud, and drill cuttings shall be disposed of in a manner determined by the secretary to be protective of public health, safety, and the environment.

(m) A licensed professional engineer shall review and approve the construction plans for the crude oil storage well and cavern system.

(n) A licensed professional engineer or a licensed geologist, or the licensed professional engineer’s or licensed geologist’s designee, shall supervise the installation of each storage well.

(o) Each permittee shall maintain a corrosion control system. The following requirements shall apply:

(1) The corrosion control system shall be capable of protecting the well casings.

(2) The corrosion control system shall be assessed according to the protocol and time schedule recommended by the corrosion control system manufacturer, and the results shall be reported to the secretary. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

28-45b-13. Monitoring. (a) Each permittee shall ensure that pressure sensors continuously monitor wellhead pressures for both the product and brine sides at the wellhead for each storage well. The following requirements shall apply:

(1) The pressure sensor shall be capable of recording the maximum and minimum operating pressures during a 24-hour period.

(2) The pressure sensor shall be capable of recording operating pressures at an interval approved by the secretary.

(3) Each permittee shall provide pressure data, including historic continuous monitoring, to the secretary upon request.

(b) Each permittee shall submit a plan for any monitoring activity, including logging and sonar surveys, to the secretary for review and consideration for approval to ensure the protection of public health, safety, and the environment, at least 60 days before the commencement of these monitoring activities.

(c) Each permittee shall submit a summary and the results of the monitoring activity to the secretary within 45 days after completion of the monitoring activity.

(d) Each permittee shall monitor the thickness of the salt roof for each cavern with a gamma ray log and a density log, or with another log as specified in K.A.R. 28-45b-4, as follows:

(1) Every five years;

(2) every three years, if the cavern meets criteria specified in K.A.R. 28-45b-4;

(3) at any time that the secretary determines that cavern integrity is suspect; and

(4) before plugging the well.

(e) Each permittee shall monitor the cavern storage capacity and the cavern geometry with a sonar survey. The sonar survey shall be conducted as follows:

(1) Before placing the underground crude oil storage cavern in service;

(2) every 10 years;

(3) for determining the stability of the cavern and the overburden if the salt roof thickness and
cavern geometry indicate that the stability of the
cavern or overburden is at risk;

(4) after any growth of the cavern that results
in a solution volume increase of 20 percent or
more of cavern capacity; and

(5) before plugging the well if a sonar survey
has not been run in the past five years.

(f) Any permittee may use an alternative
method for the sonar survey if the secretary de-
determines that the alternative method is substi-
tially equivalent to the method specified in sub-
section (e). The permittee shall submit the
following information for the secretary’s
consideration:

(1) A description of the proposed method and
the theory for its operation;

(2) a description of the storage well and cavern
conditions under which the log can be used;

(3) the procedure for interpreting the survey
results; and

(4) an assessment of the capacity and stability
of the cavern upon completion of the survey.

(g)(1) Each applicant shall submit a ground
subsidence monitoring plan to the secretary with
the permit application. The ground subsidence
monitoring plan shall include the following
information:

(A) A description of the method for conducting
an elevation survey; and

(B) the criteria for establishing monuments,
benchmarks, and wellhead survey points.

(2)(A) Each permittee shall meet the following
requirements:

(i) Ensure level measurements to the accuracy
of 0.01 foot;

(ii) report any surface elevation changes in ex-
cess of 0.10 foot within 24 hours to the secretary;

(iii) for any change in established benchmarks,
submit justification that the change is protective
of public health, safety, and the environment; and

(iv) for each change in established benchmarks,
note the elevation change from the previous
benchmark noted in the elevation survey report.

(B) Each permittee shall submit the elevation
before and after any wellhead work that results in
a change in the survey point at the wellhead.

(C) The elevation survey shall be conducted by
a licensed professional land surveyor.

(D) Each permittee shall submit biennial sur-
vey results to the department within 30 days after
completion of the survey.

(h) Before commencing facility operations,
each permittee shall submit to the secretary, for
review and consideration for approval, an inven-
tory balance plan for measuring the volume of
 crude oil injected into or withdrawn from each
underground crude oil storage well, including
methods for measuring and verifying volume.
(Authorized by K.S.A. 55-1,117 and K.S.A. 2008
Supp. 55-1,117a; implementing K.S.A. 55-1,117;
effective July 6, 2009.)

28-45b-14. Testing and inspections. (a)
Each permittee shall submit a plan to the secre-
tary for review and consideration for approval to
ensure the protection of public health, safety, and
the environment, before conducting any testing of
a storage well or a cavern. Testing shall not com-
mence without prior approval from the secretary.

(b) Each permittee shall submit a summary of
the testing to the secretary within 45 days after
completing the test. The summary shall include
the following:

(1) A chronology of the test;

(2) copies of all logs;

(3) storage well construction information;

(4) pressure readings;

(5) volume measurements; and

(6) an explanation of the test results.

(c) Each permittee shall test each unplugged
storage well and cavern for mechanical integrity.
The following requirements shall apply:

(1) Integrity tests shall be conducted on the
storage well and cavern as follows:

(A) Before the cavern is initially placed in
service;

(B) every five years after the initial service date;

(C) before the storage well is placed back in
service after being in monitoring status; and

(D) before the well is plugged, unless the me-
chanical integrity test has been performed in the
last five years.

(2) Integrity tests shall be conducted on the un-
derground crude oil storage well after each work-
over that involves physical changes to any ce-
mented casing string.

(3) Each underground crude oil storage cavern
shall be tested for mechanical integrity using a
product-brine interface test.

(4) The nitrogen-brine test may be used if the
surface equipment is rated for the nitrogen pres-
 sure on the upstream side of the well head valves.

(5) Each underground crude oil storage well
shall be tested for mechanical integrity using one
of the following:
(A) An interface test capable of identifying the
location of a leak in the casing; or
(B) a hydraulic casing test.
(6) Each permittee shall submit a test procedure plan, on a form furnished by the department, to the secretary for review and consideration for approval at least 30 days before test commencement. The plan shall include the following information:
(A) The justification for test parameters;
(B) the test sensitivities; and
(C) the pass and fail criteria for the test.
(7) Each permittee shall notify the secretary at least five days before conducting any integrity test.
(8) The integrity test shall be conducted at the maximum allowable operating pressure.
(9) All test procedures shall use certified gauges and pressure transducers that have been calibrated annually.
(d) Any permittee may use an alternative integrity test if the secretary determines that the alternative integrity test is substantially equivalent to the integrity tests specified in subsection (c). The permittee shall submit the following information for the secretary’s consideration:
(1) A description of the test method and the theory of operation, including the test sensitivities, a justification for the test parameters, and the pass and fail criteria for the test;
(2) a description of the well and cavern conditions under which the test can be conducted;
(3) the procedure for interpreting the test results; and
(4) an interpretation of the test upon completion of the test.
(e) No storage well and cavern shall be used for storage if the mechanical integrity is not verified.
(f) Each permittee shall submit a casing evaluation for each underground crude oil storage well. Acceptable casing evaluation methods shall include magnetic flux and ultrasonic imaging.
(g) Any permittee may use an alternative casing evaluation method if the secretary determines that the alternative casing evaluation method is substantially equivalent to the casing evaluation methods specified in subsection (f). The permittee shall meet the following requirements:
(1) Each permittee shall submit a description of the logging method, including the theory of operation and the well conditions suitable for log use.
(2) Each permittee shall submit the specifications for the logging tool, including tool dimensions, maximum temperature and pressure rating, recommended logging speed, approximate image resolution, and hole size range.
(3) Each permittee shall describe the capabilities of the log for determining the following:
(A) The presence of any metal loss due to either of the following:
(i) Internal or external corrosion; or
(ii) internal wear;
(B) the degree of penetration of the corrosion or the casing defect; and
(C) the circumferential extent of the corrosion or the casing defect.
(4) Each permittee shall submit a log and an interpretation of the log to the secretary.
(h) Each permittee shall submit a casing evaluation according to the following time schedule:
(1) Every 10 years for either of the following conditions:
(A) The storage well has double casing protection; or
(B) an existing storage well has a liner and a production casing;
(2) after any workover involving the cemented casing; and
(3) every five years, if the storage well does not have double casing protection or if a determination is made by the secretary that the integrity of the long string casing could be adversely affected by any naturally occurring condition or man-made activity.
(i) Each permittee shall submit a cement bond log with the casing evaluation if a cement bond log has not been previously submitted.
(j) A licensed professional engineer or licensed geologist, or licensed professional engineer’s or licensed geologist’s designee, shall supervise all test procedures and associated field activity.
(k) Each permittee shall have a licensed professional engineer or licensed geologist review all test results.
(l) Each permittee shall visually inspect each wellhead monthly for any leakage.
(m) Each permittee shall conduct an inspection of facility records, using a form furnished by the department, every two years to ensure that the required records are being maintained in accordance with these regulations. The permittee shall maintain these records at the facility and shall make the records available to the secretary upon request. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)
**28-45b-15. Groundwater monitoring.** (a) Each applicant shall submit a groundwater monitoring plan with the permit application to the secretary for review and consideration for approval to ensure the protection of public health, safety, and the environment.

(b) Each permittee shall ensure that the groundwater monitoring wells meet the following requirements:

(1) Each permittee shall set the screen in each shallow monitoring well at a depth that is inclusive of the seasonal fluctuation of the water table.

(2) Each permittee shall ensure that all deep groundwater monitoring wells extend a minimum of 25 feet into the bedrock, or to a depth based on the geology and hydrogeology at the facility and approved by the secretary to ensure the protection of public health, safety, and the environment.

(c) All well locations and the spacing between all well locations shall be based on the geology and the hydrogeology at the facility and shall be required to be approved by the secretary to ensure the protection of public health, safety, and the environment.

(d) Before commencing facility operations, each applicant shall submit a quality assurance plan, including techniques for sampling and analysis, to the secretary for review and consideration for approval to ensure the protection of public health, safety, and the environment.

(e) Each permittee shall collect groundwater samples and analyze the samples for chlorides and any other parameter determined by the secretary to pose a threat to public health, safety, and the environment. The reporting format shall be determined by the secretary.

(f) Each permittee shall submit the results for chloride analyses from groundwater samples to the department on a quarterly basis.

(g) Each permittee shall monitor monthly for the presence of combustible gas in the headspace in monitoring wells and shall quarterly submit the results to the department.

(h) Each permittee shall submit a static groundwater level measurement for each monitoring well with the quarterly chloride analyses results specified in subsection (f).

(i) Any permittee of a facility where chloride concentrations in the groundwater exceed 250 milligrams per liter may be required by the secretary to submit a work plan, for review and consideration for approval, that describes the methods to delineate potential source areas and to control migration of the chloride contamination.

(j) Each permittee of a well in which combustible gas is detected shall submit a work plan to the secretary for review and consideration for approval. Each permittee shall describe the proposed methods to eliminate any source areas and return the combustible gas levels to levels that do not pose a potential threat to public health, safety, or the environment. The plan shall be approved if the secretary determines that the plan is protective of public health, safety, and the environment.


**28-45b-16. Record requirements and retention.** (a) Each permittee shall submit an annual report, on a form approved by the department, on or before April 1 of each year. The annual report shall include the following:

(1) A description of any incident of uncontrolled or unanticipated product loss;

(2) the well number and date of any logs or sonar surveys conducted;

(3) the estimated storage capacity for each cavern associated with an unplugged well;

(4) a list of any caverns being washed;

(5) a list of the volume of product injected and withdrawn for each storage well;

(6) a list, by well number, of the type of product stored; and

(7) a list, by well number, of the maximum and minimum product storage pressures encountered during the report year.

(b) Each permittee shall maintain facility records at the facility or at a location approved by the secretary for the following time periods:

(1) A period of 10 years, for the following records:

(A) The maximum and minimum operating pressures for each storage well; and

(B) the annual inspections required by the secretary;

(2) the life of each storage well, for the following records:

(A) The casing records for each storage well;

(B) the cementing records for each storage well;

(C) the workover records;

(D) monitoring information, including calibration and maintenance records; and

(E) continuous monitoring data; and
(3) the life of the facility, for the following records:
   (A) All logging events;
   (B) all mechanical integrity tests and other testing;
   (C) all groundwater monitoring data; and
   (D) all correspondence relating to the permit, including electronic mail.

(c) Surface elevation surveys shall be maintained and retained for the life of facility plus 20 years after the facility’s closure.

(d) If the facility permit is transferred, the former permittee shall provide all required facility records, reports, and documents to the new permittee. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

28-45b-17. Well workovers. (a) Each permittee shall submit a workover plan to the secretary for review and consideration for approval to ensure the protection of public health, safety, and the environment. The following provisions shall apply:

   (1) Each permittee shall submit the workover plan at least 10 days before performing any downhole or wellhead work that involves dismantling or removal of the wellhead.
   
   (2) A permittee shall not be required to submit a workover plan for routine maintenance or replacement of gauges, sensors, or valves.
   
   (3) Verbal authorization to initiate downhole or wellhead work may be issued by the secretary if the permittee has fulfilled the requirements of this subsection.

(b) Each permittee shall ensure that a blowout preventer with a pressure rating greater than the pressures anticipated to be encountered is used during each workover.

(c) Each permittee shall ensure that all logging procedures are conducted through a lubricator unit with a pressure rating greater than the pressures anticipated to be encountered.

(d) Each permittee shall provide to the person logging a storage well or performing a well workover all relevant information concerning the status and condition of the storage well and cavern before initiating any work. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

28-45b-18. Plugging and plugging-monitoring requirements. (a) Each permittee shall submit a plugging plan, including monitoring and testing requirements, to the secretary for review and consideration for approval at least 60 days before each plugging event.

(b) Each permittee shall follow the plugging procedure for a plugging event specified in the department’s document titled “procedure for the plugging and abandonment of a crude oil storage well,” procedure #UICLPG-29, dated October 2008, which is hereby adopted by reference.

(c) Each permittee wishing to place a storage well and cavern into plugging-monitoring status shall submit a plugging-monitoring plan to the secretary for review and consideration for approval at least 60 days before the plugging-monitoring event. The plan shall include the following:

   (1) A schematic of the storage well configuration;
   
   (2) the most recent results from the gamma-density log, the casing inspection log, the cement bond log, and the sonar survey; and
   
   (3) the procedure for placing the cavern into plugging-monitoring status.

(d) Each permittee of a crude oil storage well to be placed into plugging-monitoring status may be required to perform additional testing or logging before placing the cavern into plugging-monitoring status if either of the following conditions exists:

   (1) The required logging and testing are not current.
   
   (2) A lack of storage well or cavern integrity poses a threat to public health, safety, or the environment.

(e) Each permittee of a storage well and cavern placed into plugging-monitoring status shall monitor the cavern pressure with a gauge on a weekly basis or continue to monitor pressures with a pressure transducer connected to a supervisory control and data acquisition system.

(f) Each permittee shall report any unexpected increase or decrease in pressure at a well in plugging-monitoring status to the secretary within 24 hours. Testing, logging, or any other necessary measures may be required by the secretary to determine if a threat to public health, safety, or the environment exists.

(g) Each permittee shall restore and preserve the integrity of the site as follows:

   (1) Dispose of all liquid waste in an environmentally safe manner;
   
   (2) clear the area of debris;
   
   (3) drain and fill all excavations;
(4) remove all unused concrete bases, machinery, and materials; and
(5) level and restore the site. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

28-45b-19. Underground crude oil storage fees. (a) Each permit applicant shall submit a fee of $700 for each proposed storage well with the permit application.  
(b) Each permittee shall submit an annual permit fee of $18,890 per facility and $305 per unplugged storage well on or before April 1 of each year.  
(c) Fees shall be made payable to the “Kansas department of health and environment — subsurface hydrocarbon storage fund.”  
(d) The fees collected under the provisions of this regulation shall not be refunded.  
(e) If ownership of an underground crude oil storage well or underground crude oil storage facility changes during the term of a valid permit, no additional fee shall be required unless a change occurs that results in a new storage well or an expanded facility operation. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

28-45b-20. Permit required for a brine pond. Since the underground storage of crude oil and the access to and transfer of crude oil are dependent on the safe and secure operation and maintenance of associated brine ponds, no person shall construct, operate, or maintain any brine pond associated with an underground crude oil storage facility without first obtaining a brine pond permit from the secretary. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

28-45b-21. Brine pond permit application; permit renewal. (a)(1) Each applicant for a permit for a new brine pond shall submit an application to the secretary at least 90 days before the construction of the new brine pond commences. Brine pond construction shall not begin until the secretary has issued the permit.  
(2) Upon review of the application, either of the following shall be issued by the secretary:  
(A) A final permit if the application is approved; or  
(B) a notice that the permit has been denied if the applicant has not complied with the applicable requirements of this article. The notice shall include justification for the permit denial.  
(b) Each permit for a brine pond shall be authorized for a term not to exceed 10 years.  
(c) Each permittee wanting to renew the permit shall submit a completed renewal application at least 90 days before the expiration date of the permit in effect.  
(d) Each permit application for a new brine pond shall include a hydrogeological investigation conducted under the direction of a licensed geologist or a licensed professional engineer. Each hydrogeological investigation for a new brine pond shall include the following information:  
(1) A site characterization for brine pond construction, which shall meet the following requirements:  
(A) The bottom of the brine pond shall be determined by the lowest surface elevation of compacted or excavated soils used in creating the pond structure;  
(B) all required excavations or boreholes shall be drilled to a depth of at least 10 feet below the bottom of the brine pond;  
(C) the separation distance between the bottom of the brine pond and the water table, which shall meet one of the following requirements:  
(i) A separation distance of at least 10 feet shall be maintained between the brine pond bottom and the water table; or  
(ii) a separation distance of less than 10 feet shall require the installation of a clay tertiary sub-liner; and  
(D) the surface area shall be measured at the interior top dike elevation;  
(2) the location and elevation of each borehole or excavation, based on surface area, which shall be determined by the following criteria:  
(A) At least two boreholes or excavations for each five acres of proposed brine pond surface area; or  
(B) at least two boreholes or excavations if the brine pond surface area is less than five acres; and  
(3) the following information for each borehole or excavation:  
(A) A log of soil types encountered in each borehole or excavation; and  
(B) a groundwater level measurement at each borehole or excavation.  
(e) Each permittee shall notify the department at least five days before conducting any field activities for the hydrogeological investigation. (Au-
28-45b-22. Public notice for a brine pond. (a) Public notice shall be given by the secretary for the following permit actions:

(1) A permit application for any new brine pond associated with an underground crude oil storage well;
(2) A denied permit; and
(3) A scheduled hearing.

(b) The public notice and, if applicable, a copy of the draft permit shall be mailed or electronically mailed by the department to the permit applicant.

(c) Each public notice shall be mailed by the department to the following:

(1) Any person who submits a written request for placement on the mailing list;
(2) The official county newspaper of each county in which the lands affected by the application are located, for publication in at least two issues; and
(3) The Kansas register.

(d) Each public notice shall include the following information:

(1) The name and address of the department processing the permit action for which the notice is being given;
(2) The name and address of the person seeking the permit;
(3) A brief description of the activity described in the permit application;
(4) The name, address, and telephone number of the person that interested persons may contact for further information, including copies of the application, draft permit, or other appropriate information;
(5) A brief description of the comment procedures for public notice; and
(6) A statement of the procedure to request a hearing and other procedures that allow public participation in the final permit decision.

(e) Any interested person may submit written comments to the secretary on any permit action during the 30-day public comment period. The following requirements shall apply:

(1) Comments shall be submitted by the close of the public comment period.
(2) All supporting materials submitted shall be included in full. The supporting materials shall not be incorporated by reference, unless the supporting materials are any of the following:
(A) Part of the administrative record in the same proceeding;
(B) State or federal statutes and regulations;
(C) State or environmental protection agency documents of general applicability; or
(D) Other generally available reference materials.

(3) Commentators shall make available to the secretary all supporting materials not already included in the administrative record.

(f) The response to all relevant comments concerning any permit actions and the reasons for changing any provisions in the draft permit shall be issued when the final permit decision is issued.

(g) The response to comments shall be made available to the public upon request. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

28-45b-23. Modification and transfer of a brine pond permit; variance. (a) Any reissuance or modification of a brine pond permit and any variance may be authorized by the secretary for a term of less than 10 years.

(b) The automatic transfer of a brine pond permit shall be prohibited. The terms of a permit transfer shall include the following:

(1) Each person requesting a permit transfer shall submit a completed application to the secretary at least 60 days before the proposed effective date of the transfer.
(2) Each permittee shall comply with the requirements of the existing permit until the secretary reissues the permit.

(c) Any permit for a brine pond may be modified by the secretary for any of the following reasons:

(1) The secretary receives information not available when the permit was issued.
(2) The secretary receives a request for a modification.
(3) The secretary conducts a review of the permit file and determines that a modification is necessary.

(d) Only the permit actions subject to modification shall be reopened.

(e) Minor modifications that shall not require public notification shall include the following:

(1) Correction of typographical errors;
(2) Requirements for more frequent monitoring or reporting by the permittee;
(3) Date change in a schedule of compliance;
(4) change in ownership or operational control of the facility, unless the secretary determines that public notification is necessary to protect the public interest;

(5) change in construction requirements, if approved by the secretary; and

(6) amendments to a brine pond closure plan.

(f) A draft permit and notification to the public shall be required if any of the following conditions is met:

(1) A permittee proposes substantial alterations to the brine ponds or proposes any activity that justifies a change in permit requirements, including cumulative effects on public health, safety, or the environment.

(2) Information has become available that would have initially justified different permit conditions.

(3) The regulations on which the permit was based have changed because of the promulgation of new or amended regulations or because of a judicial decision.

(g) Any permittee may request a permit modification within 180 days after any of the following:

(1) The adoption of any new regulations;

(2) any deadline to achieve compliance with regulations before the expiration date of the permit; or

(3) any judicial remand and stay of a promulgated regulation, if the permit condition was based on the remanded regulation. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

28-45b-25. Financial assurance for brine pond closure. (a) Each applicant for a permit for a new brine pond shall submit, with the application and annually thereafter on or before the permit renewal date, proof of financial assurance to the secretary.

(b)(1) Each brine pond permittee shall establish financial assurance for the decommissioning and abandonment of any brine pond permitted by the secretary under this article.

(2) Each applicant and each permittee shall meet the following requirements:

(A) Submit a detailed written estimate, in current dollars, of the cost to close any brine pond at the facility. The estimate shall be reviewed and approved by a licensed professional engineer or licensed geologist;

(B) develop an estimate of the closure cost for each brine pond at the facility as follows:

(i) The estimate shall be based on the cost charged by a third party to decommission the brine pond in accordance with this article; and

(ii) the brine pond shall be assumed to be at maximum storage capacity; and

(C) increase the closure cost estimate and the amount of financial assurance provided if any change in the brine pond closure plan or in the operation increases the maximum cost of brine pond closure at any time.

(c) Each permittee shall provide continuous financial assurance coverage for closure until the secretary approves the brine pond closure.


28-45b-24. Signatories for brine pond permit applications and reports. (a) Each applicant for a permit for a new brine pond shall designate at least one signatory to sign the permit applications and reports required by the secretary.

(b) The positions that may be approved by the secretary as signatories shall include any of the following:

(1) Operations manager;

(2) brine pond specialist; or

(3) any position with responsibility at least equivalent to that required by the positions listed in this subsection.

(c) Any signatory may submit written notification to the secretary specifying a position having responsibility for the overall operation of the facility or activity to act as a designated signatory.

(d) Each signatory and each signatory’s designee shall submit a signature statement, on a form furnished by the department, to the secretary with the brine pond permit application. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

28-45b-26. Design, construction, and maintenance of brine ponds. (a) Each applicant for a brine pond permit shall submit a design and construction plan for each new brine pond associated with an underground crude oil storage fa-
ility to the secretary. The design and construction plan shall be approved if the secretary determines that the plan is protective of public health, safety, and the environment. Each brine pond shall be designed by a licensed professional engineer.

(b) Each applicant shall ensure that the impermeable synthetic membrane liner system for each brine pond consists of primary and secondary impermeable synthetic membrane liners with an intermediate leak detection system. The following requirements shall apply:

1. The primary and secondary liners shall each be at least 30 mils in thickness.
2. The engineer designing the brine pond shall obtain a certification from the liner manufacturer providing the following information:
   A. Confirmation that the specified liner is compatible for use with the brine;
   B. Confirmation that the specified liner is ultraviolet-resistant; and
   C. Data for the manufacturer’s estimated leakage, permeability, or transmissivity rate for specific liners, including the rate of movement of fluids through the synthetic membrane liner due to the properties and thickness of the liner material, expressed in units of volume per area per time;
   D. Any normally expected manufacturing defects in the liner material; and
   E. Any normally expected defects associated with the seaming and installation.

(c) Each brine pond permittee shall submit a contingency plan to the secretary that outlines the procedures for brine containment issues associated with brine pond maintenance and dewatering due to liner failure, repair, replacement, or expansion of the brine pond. The contingency plan shall be approved if the secretary determines that the plan is protective of public health, safety, and the environment.

(d) Each permittee of an existing brine pond and each applicant for a permit for a new brine pond shall submit a flood response plan if the brine pond is located in a floodplain or a flood-prone area.

(e) Each permittee shall cease operations or shall comply with instructions from the secretary if the secretary determines that an imminent threat to public health, safety, or the environment exists due to any unsafe operating condition. The permittee may resume operations if the secretary determines that the brine pond operations no longer pose a risk to public health, safety, or the environment.

(f) Each permittee shall ensure that the primary and secondary liners for each brine pond are separated to provide a conduit for the movement of any fluid between the liners to the leak detection monitoring location for detection and removal.

(g) Each permittee shall ensure that all materials between the primary and secondary liners are capable of transmitting at least 1/64 inch per acre per day of flow with a head of no more than two feet placed on the secondary liner. Acceptable materials shall include the following:

1. Clean sand;
2. Pea gravel;
3. Geotextile fabric;
4. Geonet-type material; and
5. Any alternatives recommended by the liner manufacturer, if the secretary determines that the alternatives are substantially equivalent to materials listed in this subsection.

(h) Each permittee shall ensure that the leak detection system design for each brine pond limits the maximum travel time required for fluid penetrating the liner to reach the leak detection monitoring location to 24 hours or less.

(i) Each permittee shall ensure that the bottom of each brine pond has a slope adequate for the proper operation of the leak detection system, with not less than 0.5 percent for the slope for the collection pipes and 1.0 percent for all other slopes.

(j) Each permittee shall ensure that the dewatering system design for each brine pond is capable of the following:

1. Monitoring the volume of fluid removed from the intermediate space between the primary and secondary liners; and
2. Pumping the volume of fluid generated equal to 10 times the maximum allowable liner leakage rate.

(k) Each permittee shall ensure that the compaction of all brine pond embankments and of the upper six inches of the interior lagoon bottom below the secondary liner meets all of the following requirements:

1. The maximum standard proctor density shall be at least 95 percent at optimum moisture to optimum moisture plus three percent.
2. The maximum thickness of the layers of material to be compacted shall not exceed six inches.
3. The moisture content range of the compacted soils shall be optimum moisture to optimum moisture plus three percent.
(4) The maximum size of dirt clods in the compacted soil shall be less than one inch in diameter.

(1) Each permittee shall ensure that the following requirements for the installation of the liners at each brine pond are met:

(1) The primary and secondary liners shall be anchored at the top of the brine pond dike in accordance with the liner manufacturer’s instructions.

(2) Installation shall be performed in accordance with the liner manufacturer’s instructions.

(3) Installation shall be performed by a contractor experienced in the installation of impermeable synthetic membrane liners.

(4) On-site supervision of the liner installation shall be provided by an individual that has experience in liner installation practices.

(m) Each permittee shall ensure that the volume of fluid monitored from the intermediate leak detection system at the brine pond is based on a rate of 10 percent of leak return system capacity and does not exceed 1,000 gallons per day per acre of pond area.

(n) Each permittee shall submit, to the secretary, a seam testing method to verify the adequacy of the seaming process for the liners at each brine pond. The following requirements shall apply:

(1) The testing method shall include the following:
   (A) The methods for destructive and nondestructive seam testing;
   (B) the protocol describing the number of tests per linear foot of field seam;
   (C) the size of the destructive test specimen required; and
   (D) any other pertinent quality control provisions recommended by the liner manufacturer.

(2) All field seams shall be subjected to nondestructive testing.

(o) Each permittee shall install an oil-brine separator to separate entrained product from the brine used to transfer product. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

28-45b-27. Groundwater monitoring for brine ponds. (a) Each applicant for a permit for a new brine pond shall submit a groundwater monitoring plan with the application for a brine pond permit to the secretary for review and consideration for approval. The monitoring plan shall be approved if the secretary determines that the plan is protective of public health, safety, and the environment.

(b) Each applicant for a permit for a new brine pond shall meet the following requirements:

(1) Install monitoring wells around the perimeter of the brine pond. The well spacing shall be based on the geology and hydrogeology at the facility and shall be approved by the secretary if the secretary determines that the well spacing is protective of public health, safety, and the environment; and

(2) set the screen in all shallow groundwater monitoring wells at a depth that is inclusive of the seasonal fluctuation of the water table.

(c) Each applicant for a permit for a new brine pond shall submit, with the groundwater monitoring plan, a quality assurance plan to the secretary for review and consideration for approval to ensure the protection of public health, safety, and the environment.

(d) Each permittee shall collect groundwater samples and analyze the samples for chloride and any other parameter determined by the secretary as posing a potential threat to public health, safety, and the environment. The reporting format shall be determined by the secretary.

(1) Each permittee shall submit the following to the department on a quarterly basis:
   (A) The results for the chloride analyses from groundwater samples; and
   (B) a static groundwater level measurement for each monitoring well.

(2) Each permittee shall monitor monthly for the presence of combustible gas in the headspace in monitoring wells and submit the results to the department on a quarterly basis.

(e) Any permittee of a brine pond where chloride concentrations in the groundwater exceed 250 milligrams per liter may be required by the secretary to submit a work plan, for review and consideration for approval, that describes proposed methods to delineate the extent of the contamination and to control migration of the chloride contamination. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

28-45b-28. Brine pond closure requirements. (a) Each brine pond permittee shall submit a closure plan, including monitoring and testing requirements, to the secretary for review and consideration for approval at least 60 days before the closure of a brine pond. The closure plan shall
be approved if the secretary determines that the closure plan is protective of public health, safety, and the environment.

(b) The permittee shall not commence closure activities without the secretary's prior approval.

(c) Each permittee shall include the following information in the brine pond closure plan:

(1) The procedure for deactivating the various brine lines employed at the facility;
(2) the procedures for the remediation, removal, or disposal of brine, accumulated sludge in the brine pond, contaminated soils, and contaminated groundwater;
(3) a description regarding the proposed maintenance, deactivation, conversion, or demolition of the brine pond structure; and
(4) procedures addressing the plugging of any water wells or groundwater monitoring wells associated with the brine pond. (Authorized by K.S.A. 55-1,117 and K.S.A. 2008 Supp. 55-1,117a; implementing K.S.A. 55-1,117; effective July 6, 2009.)

Article 46.—UNDERGROUND INJECTION CONTROL REGULATIONS

28-46-1. General requirements. (a) Any reference in these regulations to standards, procedures, or requirements of 40 CFR Parts 124, 136, 144, 145, 146, or 261 shall constitute adoption by reference of the entire part, subpart, and paragraph so referenced, including any notes, charts, and appendices, unless otherwise specifically stated in these regulations, except for any references to NPDES, RCRA, PSD, ocean dumping permits, dredge and fill permits under section 404 of the clean water act, the non-attainment program under the clean air act, national emissions standards for hazardous pollutants (HESHAPS), EPA issued permits, and any internal CFR citations specific to those programs. Each reference to 40 CFR 146.04, 40 CFR 146.06, 40 CFR 146.07, and 40 CFR 146.08 shall mean 40 CFR 146.4, 40 CFR 146.6, 40 CFR 146.7, and 40 CFR 146.8, respectively.

(b) When used in any provision adopted from 40 CFR Parts 124, 136, 144, 145, 146, or 261, references to “the United States” shall mean the state of Kansas, “environmental protection agency” shall mean the Kansas department of health and environment, and “administrator,” “regional administrator,” “state director,” and “director” shall mean the secretary of the department of health and environment.

(c) When existing Kansas statutory and regulatory requirements are more stringent than the regulations adopted in subsection (a), the Kansas requirements shall prevail. (Authorized by and implementing K.S.A. 2009 Supp. 65-171d; effective May 1, 1982; amended, T-86-47, Dec. 19, 1985; amended May 1, 1986; amended March 21, 1994; amended Aug. 6, 2010.)

28-46-2a. Definitions. (a) The following federal regulations, as in effect on July 1, 2008, are hereby adopted by reference, except as specified:

(1) 40 CFR 124.2, except for the following terms and their definitions:

(A) “Application”;
(B) “director”;
(C) “draft permit”;
(D) “eligible Indian tribe”;
(E) “environmental appeals board”;
(F) “facility or activity”;
(G) “Indian tribe”;
(H) “major facility”;
(I) “owner or operator”;
(J) “permit”;
(K) “regional administrator”;
(L) “SDWA”;

(2) 40 CFR 144.3, except for the following terms and their definitions:

(A) “Application”;
(B) “approved state program”;
(C) “appropriate act and regulations”;
(D) “director”;
(E) “draft permit”;
(F) “eligible Indian tribe”;
(G) “Indian tribe”;
(H) “state”;
(I) “total dissolved solids” and
(j) “well”;

(3) 40 CFR 144.61;

(4) 40 CFR 146.3, except for the following terms and their definitions:

(A) “Application”;
(B) “director”;
(C) “exempted aquifer”;
(D) “facility or activity”;
(E) “Indian tribe”;
(F) “owner or operator”;
(G) “permit”;
(H) “SDWA”;

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(I) “site”; and
(J) “well”; and
(5) 40 CFR 146.61(b), except for the term “cone of influence” and its definition.

(b) In addition to the definitions adopted in subsection (a), the following definitions shall apply in this article:

1. “Application” means the standard departmental form or forms required for applying for a permit, including any additions, revisions, and modifications to the forms.

2. “Authorized by rule,” when used to describe an injection well, means that the well meets all of the following conditions:
   A. The well is a class V injection well.
   B. The well is in compliance with this article.
   C. The well is not prohibited, as specified in K.A.R. 28-46-26a.
   D. The well is not required by the secretary to have a permit.

3. “Cone of impression” means the mound in the potentiometric surface of the receiving formation in the vicinity of the injection well.

4. “Cone of influence” means the area around a well within which increased injection pressures caused by injection into the well would be sufficient to drive fluids into an underground source of drinking water (USDW).

5. “Department” means the Kansas department of health and environment.

6. “Director” means director of the division of environment of the Kansas department of health and environment.

7. “Draft permit” means a document prepared by the department after receiving a complete application or making a tentative decision that an existing permit shall be modified and reissued, indicating the secretary’s tentative decision to either issue a permit or deny a permit. A draft permit is not required for a minor modification of an existing permit.

8. “Existing salt solution mining well” means a well authorized and permitted by the secretary before the effective date of these regulations.

9. “Fracture pressure” means the wellhead pressure that could cause vertical or horizontal fracturing of rock along a well bore.

10. “Gallery” means a series of two or more salt solution mining wells that are artificially connected within the salt horizon and are produced as a system with one or more wells designated for withdrawal of solutioned salt.

11. “Injection well facility” and “facility” mean the acreage associated with the injection field and with facility boundaries approved by the secretary. These terms shall include the injection wells, wellhead, and any related equipment, including any appurtenances associated with the well field.

12. “Maximum allowable injection pressure” means the maximum wellhead pressure not to be exceeded as a permit condition.

13. “Motor vehicle waste disposal well” and “MVWDW” mean a disposal well that received, receives, or has the potential to receive fluids from vehicular repair or maintenance activities.

14. “Notice of intent to deny” means a draft permit indicating the secretary’s tentative decision to deny a permit.

15. “Production casing,” when used for a class III well, means the casing inside the surface casing of a well that extends into the salt formation.

16. “Salt roof” means a distance, determined in feet, from the highest point of a salt solution mining cavern to the top of the salt formation. This distance shall be approved by the secretary.

17. “Secretary” means the secretary of the Kansas department of health and environment or the secretary’s authorized representative.

18. “Transportation artery” means any highway, county road, township road, private road, or railroad, excluding any existing right-of-way, not owned or leased by the permittee.

19. “Well” means any of the following:
   A. A bored, drilled, or driven shaft whose depth is greater than the largest surface dimension;
   B. A dug hole whose depth is greater than the largest surface dimension;
   C. A sinkhole modified to receive fluids; or


28-46-4. Injection of hazardous or radioactive wastes into or above an underground...
source of drinking water. The injection of hazardous or radioactive wastes into or above an underground source of drinking water shall be prohibited. (Authorized by and implementing K.S.A. 2009 Supp. 65-171d; effective May 1, 1982; amended, T-86-47, Dec. 19, 1985; amended May 1, 1986; amended Aug. 6, 2010.)

28-46-5. Application for injection well permits. (a) 40 CFR 124.3, except (d), and 40 CFR 144.31, except (c)/(1), as in effect on July 1, 2008, are adopted by reference. In addition, the provisions of K.S.A. 65-3437, and amendments thereto, that relate to hazardous waste injection wells shall apply to class I hazardous waste injection wells.


28-46-7. Draft permits. (a) Once an application is complete, a draft permit shall be issued by the secretary.

(b) Each draft permit issued after the secretary’s decision to issue a permit shall contain the following information:

(1) All conditions under 40 CFR 144.51(a) through (p);
(2) all compliance schedules under 40 CFR 144.53;
(3) all monitoring requirements under 40 CFR 144.54; and
(4) all permit conditions under 40 CFR 144.52.

(c) If the secretary determines, after issuing a notice of intent to deny, that the decision to deny the permit application was incorrect, the notice of intent to deny shall be withdrawn and a draft permit issued under subsection (b). (Authorized by and implementing K.S.A. 2009 Supp. 55-1,117 and 65-171d; effective May 1, 1982; amended, T-83-49, Dec. 22, 1982; amended May 1, 1983; amended, T-86-47, Dec. 19, 1985; amended May 1, 1986; amended March 21, 1994; amended Aug. 6, 2010.)


28-46-10. Term of permits. (a) Class I, III, and V permits shall be effective for a fixed term not to exceed 10 years.

(b) If a permittee wishes to continue an activity regulated by the permit after the expiration date of the permit, the permittee shall submit an application to renew the permit. Each application to renew the permit shall be filed with the department at least 180 days before the permit expiration date. (Authorized by and implementing K.S.A. 2009 Supp. 55-1,117 and 65-171d; effective May 1, 1982; amended, T-86-47, Dec. 19, 1985; amended May 1, 1986; amended May 1, 1987; amended March 21, 1994; amended Aug. 6, 2010.)


28-46-12. Requirements for recording and reporting of monitoring results. 40 CFR


28-46-15. Modification and reissuance of permits. (a) Any permit may be modified and reissued either at the request of any interested person, including the permittee, or upon the secretary’s initiative after conducting a review of the permit file.

(b) Each request from any interested person or the permittee shall be submitted in writing and shall contain facts or reasons supporting the request.

(c) If at least one of the causes listed in subsection (d) for modification or reissuance exists, a draft permit including the modifications to the existing permit shall be issued.

(d) Each of the following shall be cause for modification and reissuance:

(1) There are material and substantial alterations or additions to the permitted facility or activity that occurred after permit issuance and justify the application of permit conditions that are different from or absent in the existing permit.

(2) The secretary has received information indicating that the terms of the permit need modification because the information was not provided to the secretary when the permit was issued.

(3) The regulations on which the permit was based have been changed by promulgation of new or amended regulations or by judicial decision after the permit was issued.

(4) The secretary determines that good cause exists for modification of a compliance schedule, including an act of God, strike, flood, materials shortage, or any other event over which the permittee has little or no control and for which there is no reasonably available remedy.

(5) Cause exists for termination under K.A.R. 28-46-16, and the secretary determines that modification and reissuance is appropriate.

(6) The secretary determines that the waste being injected is a hazardous waste either because the definition of hazardous waste has been revised or because a previous determination has been changed.

(7) The secretary determines that the location of the facility is unsuitable because new information indicates that a threat to human health or the environment exists that was unknown at the time of permit issuance.

(e)(1) If the secretary decides to modify and reissue a permit, a draft permit under K.A.R. 28-46-7 shall be prepared by the secretary incorporating the proposed changes. Additional information may be requested by the secretary, and the submission of an updated application may be required by the secretary.

(2) If a permit is modified, only those conditions to be modified shall be reopened when a new draft permit is prepared. All other aspects of the existing permit shall remain in effect.

(3) A permit may be modified to make minor modifications to a permit without the issuance of a draft permit. Minor modifications shall include the following:

(A) Correcting typographical errors;

(B) requiring more frequent monitoring or reporting by the permittee;

(C) changing an interim compliance date in a schedule of compliance, if the new date is not more than 120 days after the date specified in the existing permit and does not interfere with attainment of the final compliance date requirement;

(D) allowing for a change in ownership or operational control of a facility if the secretary determines that no other change in the permit is necessary, if a written agreement containing a specific date for transfer of permit responsibility, coverage, and liability between the current and new permittee has been submitted to the secretary;

(E) changing quantities or types of fluids injected that are within the capacity of the facility
as permitted, if the change meets the following conditions:

(i) The change would not interfere with the operation of the facility;

(ii) the change would not interfere with the facility’s ability to meet conditions described in the permit; and

(iii) the change would not change the facility’s classification;

(F) changing construction requirements previously approved by the secretary; and


28-46-28. Establishing maximum injection pressure. (a) A maximum allowable injection pressure for each injection well shall be established by the secretary as a permit condition.

(b)(1) All class I wells operating on other than gravity flow shall be prohibited.

(2) In the case of gravity flow, the positive well-
head pressure for a class I well shall not exceed 35 pounds per square inch gauge.

(c) For all wells, the maximum operating pressure shall not be allowed to exceed fracture pressure, except under either of the following conditions:

(1) The development of fractures for well stimulation operations; or

(2) the connection of a class III salt solution mining well to any other class III well for operation as a salt solution mining gallery. (Authorized by and implementing K.S.A. 2009 Supp. 55-1,117 and 65-171d; effective May 1, 1982; amended, T-86-47, Dec. 19, 1985; amended May 1, 1986; amended March 21, 1994; amended Aug. 6, 2010.)

28-46-29. Design and construction requirements. 40 CFR 146.12 and 40 CFR 146.65, governing class I wells, and 40 CFR 146.32, governing class III wells, as in effect on July 1, 2008, are adopted by reference. In addition, the following requirements shall apply to class III salt solution mining wells:

(a) Each salt solution mining well cavern wall shall meet the following requirements:

(1) Be located at least 50 feet from any other active or abandoned brine-supply wells or other holes or excavations penetrating the salt section, unless the wells, holes, or excavations have been properly plugged; and

(2) be located at least 50 feet from any existing surface structures not owned by the permittee, including any transportation artery.

(b) The cavern wall for each solution mining well shall be located at least 50 feet from the property boundaries of any owners who have not consented to the mining of salt under their property.

(c) Each salt solution mining wellhead shall be located at least 150 feet from the property boundaries of any owners who have not consented to the mining of salt under their property.

(d) For each new salt solution mining well, new steel surface casing shall be set through all freshwater formations and encased in cement from bottom to top by circulating cement through the bottom of the casing to the surface.

(e) For each new salt solution mining well, production casing shall be set into the upper part of the salt formation and encased in cement as specified in this regulation. The casing shall extend at least 55 feet into the salt formation. Centralizers shall be used on the outside of the production casing and shall not be spaced more than 100 feet apart. Before setting and cementing the production casing, the mudcake on the bore wall shall be removed by the use of scratchers or a washing method approved by the director. The cement for that part of the casing opposite the salt formation shall be prepared with salt-saturated cement.

(f) A variance for each well not meeting the requirements of this regulation may be granted by the secretary if all the following conditions are met:

(1) The variance is protective of public health, safety, and the environment.

(2) The permittee agrees to perform any additional monitoring or well improvements, or any combination of these, if required by the secretary.

(3) The permittee agrees to conduct a geomechanical study in support of the variance request. The geomechanical study shall be conducted by a contractor experienced in conducting and interpreting geomechanical studies.

(g) Each permittee seeking a variance shall submit a written request to the secretary for review and consideration for approval. Each request shall include justification for the variance, the geomechanical study and interpretation, and any additional supporting information.

(h) A cement bond log shall be conducted on the production casing after the cement mixture has cured for at least 72 hours and shall be submitted to the department within 45 days after completion of the test. (Authorized by and implementing K.S.A. 2009 Supp. 55-1,117 and 65-171d; effective May 1, 1982; amended, T-83-49, Dec. 22, 1982; amended May 1, 1983; amended, T-86-47, Dec. 19, 1985; amended May 1, 1986; amended March 21, 1994; amended Aug. 6, 2010.)

28-46-29a. Operation of class III salt solution mining wells. (a) A class III salt solution mining well shall not be operated under any of the following conditions:

(1) The salt roof is less than 50 feet in thickness above the washed cavern.

(2) The solution cavern has been developed as a single well, and the dimensions of the cavern across a horizontal plane exceed 400 feet at any depth or 300 feet in the upper one-third of the potential cavern height.

(3) The top of the solution cavern is less than 250 feet from the ground surface.

(4) The solution cavern has been developed as
part of a gallery, and the dimensions of the cavern across a horizontal plane exceed 400 feet at any depth or 300 feet in the upper one-third of the potential cavern height, except the route of interconnection between wells.

(5) The depth to the top of the salt section is less than 400 feet below land surface, and the dimensions of the cavern across a horizontal plane exceed 300 feet in diameter, except the route of interconnection between wells.

(6) The distance between adjacent galleries is less than 100 feet from the wall of a cavern in an adjacent gallery.

(7) There are leaks or losses of fluid in the casing or surface pipe of a well.

(b) A variance for any well not meeting the conditions in paragraphs (a)(2) and (a)(4) through (a)(6) may be granted by the secretary if all of the following conditions are met:

(1) The variance is protective of public health, safety, and the environment.

(2) The applicant or permittee agrees to perform any additional monitoring or well improvements, or any combination, if required by the secretary.

(3) The applicant or permittee agrees to conduct a geomechanical study in support of the variance request. The geomechanical study shall be conducted by a contractor experienced in conducting and interpreting geomechanical studies.

(c) Each applicant or permittee seeking a variance shall submit a written request to the secretary that includes justification for the variance, a geomechanical study and interpretation, and any additional supporting information for review and consideration for approval. (Authorized by and implementing K.S.A. 2009 Supp. 65-171d; effective Aug. 6, 2010.)

28-46-30a. Monitoring and reporting requirements for class III salt solution mining wells. 40 CFR 146.33, as in effect on July 1, 2008, is hereby adopted by reference. In addition, all of the following requirements shall apply to each permittee of a class III salt solution mining well:

(a) Within two years of the effective date of this regulation, each permittee shall submit a facility plan for monitoring the injection and withdrawal volumes and injection pressures that meets the secretary’s approval and ensures the protection of public health, safety, and the environment.

(b) Each permittee shall monthly submit the following monitoring records to the department on a form provided by the department:

(1) The weekly injection and withdrawal volume for each salt solution mining well or gallery;

(2) the weekly injection and withdrawal ratio for each salt solution mining well or gallery; and

(3) a summary of the weekly minimum and maximum injection pressures for each salt solution mining well or gallery.

(c) Each permittee shall annually submit a report to the department, on a form provided by the department, which shall include the following information:

(1) For each well, a percentage of the remaining amount of salt that can potentially be mined in accordance with these regulations; and

(2) a summary of facility activities regarding abnormal fluid loss, well drilling, well plugging, geophysical well logging, sonar caliper surveys, mechanical integrity testing, calibration and maintenance of flow meters and gauges, elevation survey results, and the description of the model
theory used to calculate the percentage of the total amount of remaining salt that can potentially be mined in accordance with these regulations.

(d) If an unanticipated loss of fluid has occurred or the monitoring system indicates that leakage has occurred and has been verified, the permittee shall notify the department orally within 24 hours of discovery and shall provide written confirmation within seven days regarding the abnormal loss or leakage.

(e) A sonar caliper survey shall be conducted on each well when calculations based on a model, approved by the secretary, indicate that 20 percent of the total amount of remaining salt that can be potentially mined in accordance with these regulations has been mined. The well shall be checked by the permittee to determine the dimensions and configuration of the cavern developed by the solutioning. Thereafter, a sonar caliper survey shall be conducted when the calculations indicate that each additional 20 percent of the remaining salt that can be potentially mined in accordance with these regulations has been mined.

(f) Any permittee may use an alternative method for determining the dimensions and configuration of the solution mining cavern if the secretary determines that the alternative method is substantially equivalent to the sonar caliper survey. The permittee shall submit the following information for the secretary's consideration:

(1) A description of the survey method and theory of operation, including the survey sensitivities and justification for the survey parameters;
(2) a description of the well and cavern conditions under which the survey can be conducted;
(3) the procedure for interpreting the survey results; and
(4) an interpretation of the survey upon completion of the survey.

(g) More frequent monitoring of the cavern dimensions and configuration by sonar caliper survey may be required by the secretary if the secretary receives information that the cavern could be unstable. Each existing well shall meet the requirements of the survey frequency established in the well permit. The results of the survey, including logs and an interpretation by a contractor experienced in sonar interpretation, shall be submitted to the department within 45 days of completing the survey.

(h) Any permittee may submit a variance request regarding the sonar caliper survey frequency to the department, if both of the following conditions are met:

(1) The variance is protective of public health, safety, and the environment.
(2) The permittee agrees to perform any additional monitoring or well improvements, or any combination of these, if required by the secretary.

(i) Each permittee seeking a variance shall submit a written request, including justification for the variance and any supporting data to the secretary for review and consideration for approval.

(j) Each permittee shall check the thickness of the salt roof at the end of two years of use and biennially thereafter, unless otherwise permitted by the secretary, by gamma ray log or any other method approved by the secretary. A report of the method used and a copy of the survey shall be submitted to the department within 45 days from completion of the test.

(k) Each permittee shall give oral notification to the department of a verified exceedence of the maximum permitted injection pressure within 24 hours of discovery of the exceedence and submit written notification within seven calendar days to the department.

(l) Each new well shall have a meter to measure injection or withdrawal volume. The permittee shall maintain records of these flow volumes at the facility and shall make the records available to the secretary upon request.

(m) Each permittee shall submit a ground subsidence monitoring plan to the secretary within two years after the effective date of these regulations. The following requirements shall apply:

(1) The ground subsidence monitoring plan shall include the following information:
   (A) A description of the method for conducting an elevation survey; and
   (B) the criteria for establishing monuments, benchmarks, and wellhead survey points.
(2) The ground subsidence monitoring plan shall meet all of the following criteria:
   (A) Level measurements to the accuracy of 0.01 foot shall be made.
   (B) Verified surface elevation changes in excess of 0.10 foot shall be reported within 24 hours of discovery to the department.
   (C) No established benchmark shall be changed, unless the permittee submits a justification that the change is protective of public health, safety, and the environment.
   (D) If a benchmark is changed, the elevation...
change from the previous benchmark shall be noted in the elevation survey report.

(E) Each permittee shall submit the elevation before and after any wellhead work that results in a change in the survey point at the wellhead.

(3) The elevation survey shall be conducted by a licensed professional land surveyor.

(4) All annual elevation survey results shall be submitted to the department within 45 days after completion of the survey.

(5) All certified and stamped field notes shall be made available by the permittee upon request by the secretary. (Authorized by and implementing K.S.A. 2009 Supp. 55-1,117 and 65-171d; effective Aug. 6, 2010.)

28-46-30b. Groundwater monitoring for class III salt solution mining wells. (a) Each permittee of a salt solution mining well shall submit a groundwater monitoring plan within two years after the effective date of these regulations to the secretary for review and consideration for approval to ensure the protection of public health, safety, and the environment.

(b) Within two years after the effective date of these regulations, each permittee shall submit a quality assurance plan, including techniques for sampling and analysis, to the secretary for review and consideration for approval to ensure the protection of public health, safety, and the environment.

(c) Each permittee shall collect groundwater samples and analyze the samples for chloride and any other parameters determined by the secretary to ensure the protection of public health, safety, and the environment. The sampling results shall be submitted to the department on forms provided by the department.

(d) Each permittee shall submit the results for chloride analyses from groundwater samples to the department on an annual basis or on a more frequent basis as determined by the secretary to ensure the protection of public health, safety, and the environment. These results shall be submitted on forms provided by the department.

(e) Each permittee shall submit a static groundwater level measurement for each monitoring well with the chloride analyses results as specified in subsection (d).

(f) At any facility where chloride concentrations in the groundwater exceed 250 milligrams per liter or the established background chloride concentration, the permittee may be required to submit a workplan that describes the methods to delineate potential source areas and to control migration of the chloride contamination to the secretary for review and consideration for approval to ensure the protection of public health, safety, and the environment. (Authorized by and implementing K.S.A. 2009 Supp. 55-1,117 and 65-171d; effective Aug. 6, 2010.)

28-46-31. Information to be considered by the secretary. 40 CFR 146.14, except for reference to 40 CFR 122.42 (g), 40 CFR 146.62, 40 CFR 146.66, 40 CFR 146.70 and 40 CFR part 144, subpart F, for class I wells and 40 CFR 146.34, for class III wells, as in effect on July 1, 2008, are adopted by reference. In addition, all of the following requirements shall be applicable to class I hazardous waste injection wells:

(a) Each applicant shall demonstrate that the well meets the requirements of K.S.A. 65-3439, and amendments thereto, relating to hazardous waste injection wells and applicable to class I hazardous waste injection wells.

(b) Each applicant shall be responsible for providing information to the department necessary to substantiate that well injection of the hazardous waste liquid in question is the most reasonable method of disposal after all other options have been considered.

(1) Factors to be considered in determining the most reasonable method shall include those required by K.S.A. 65-3439, and amendments thereto.

(2) All factors considered shall be documented in a report submitted to the department for review and consideration for approval.

(c) Each applicant shall determine, through a detailed record search and field survey, the location of each abandoned oil and gas well and exploratory hole within the area of review, as specified in K.A.R. 28-46-32.

(1) An interview with those responsible for drilling, producing, plugging, or witnessing these activities shall be a part of the record.

(2) The results of the field survey shall be documented in a report submitted to the department.

(3) A map geographically documenting the location of all the holes and abandoned wells within the area of review, as specified in K.A.R. 28-46-32, shall be included as a part of the report specified in paragraph (c)(2). (Authorized by and implementing K.S.A. 2009 Supp. 55-1,117 and 65-171d; effective May 1, 1982; amended, T-83-
28-46-33. Mechanical integrity testing. (a) A mechanical integrity test consisting of a pressure test with a liquid to evaluate the absence of a significant leak in the casing, tubing, or packer and a test to determine the absence of significant fluid movement through vertical channels adjacent to the wellbore shall be required of each class I and class III permittee on each injection well at least once every five years.

1. For class I hazardous waste injection wells, the mechanical integrity test shall be conducted in accordance with 40 CFR 146.8, except for reference to 40 CFR 146.33(b), as in effect July 1, 2008, which is hereby adopted by reference, and 40 CFR 146.68(d), as adopted in K.A.R. 28-46-30, by conducting all of the following:
   A. A pressure test with a liquid of the casing, tubing, and packer at least annually and if there has been a well workover;
   B. a test of the bottom-hole cement by use of an approved radioactive survey at least annually;
   C. a temperature, noise, or oxygen activation log to test for movement of fluid along the borehole at least once every five years; and
   D. a casing inspection log at least once every five years.

2. For class I non-hazardous waste injection wells, the mechanical integrity test shall be conducted in accordance with 40 CFR 146.8.

3. For class III injection wells, the mechanical integrity test shall be conducted in accordance with 40 CFR 146.8, except the casing shall be pressure tested by the use of a mechanical packer or retrievable plug.

   a. Each permittee shall be notified at least 30 days in advance by the secretary that a mechanical integrity test shall be performed, or a permittee may notify the department that a voluntary mechanical integrity test will be performed at least 14 days in advance of the test.

   b. Each permittee shall be required to cease injection operations immediately and to conduct a mechanical integrity test if continued use of an injection well constitutes a threat to public health or to waters of the state. Injection operations shall not be resumed until all of the following conditions are met:
      1. The test has been conducted.
      2. The test has demonstrated that the well has mechanical integrity.
      3. The well has been approved for use by the secretary.

   d. The secretary's authorized representative shall witness all of the pressure mechanical integrity tests performed.

   e. Each permittee shall submit results of all mechanical integrity tests to the secretary, in writing, within 30 days after the test has been conducted.


28-46-34. Plugging and abandonment. 40 CFR 144.51(n), 40 CFR 144.52(a)(6), 40 CFR 146.10, except for reference to 40 CFR 144.23(b) and 40 CFR 146.04, 40 CFR 146.71, 40 CFR 146.72, and 40 CFR 146.73, as in effect on July 1, 2008, are adopted by reference. In addition, both of the following requirements shall apply to class III salt solution mining wells:

   a. The plugging of each salt solution mining well shall be conducted as specified in the departments document titled "procedure for plugging and abandonment of a class III salt mining well," procedure #: UICIII-7, dated March 2005, and hereby adopted by reference.

   b. Any permittee may use an alternative method for the plugging of each salt solution mining well if the secretary determines that the alternative method is substantially equivalent to the procedure specified in subsection (a) and is protective of public health, safety, and the environment. The permittee shall submit a detailed description of the alternative plugging method for the secretary's consideration. (Authorized by and implementing K.S.A. 2009 Supp. 55-1, 117 and 65-171d; effective May 1, 1982; amended, T-83-49, Dec. 22, 1982; amended May 1, 1983; amended, T-86-47, Dec. 19, 1985; amended May 1, 1986; amended March 21, 1994; amended Aug. 6, 2010.)

28-46-35. State inspection and right of entry. Each well owner or operator shall allow an authorized representative of the secretary access to the well facility for the purpose of determining

28-46-40. Exempted aquifers. (a) An aquifer may be designated by the secretary as exempt from protection as an underground source of drinking water. Criteria for exemption may include whether the aquifer meets one of the following conditions:

1. Contains water with more than 10,000 milligrams per liter of total dissolved solids;
2. produces mineral, hydrocarbon, or geothermal energy; or
3. is situated at a depth that makes the recovery of water economically impractical.

(b) Each request to exempt an aquifer under subsection (a) shall be first submitted to and approved by the administrator of the United States environmental protection agency. (Authorized by and implementing K.S.A. 2009 Supp. 55-1,117 and 65-171d; effective May 1, 1982; amended, T-86-47, Dec. 19, 1985; amended May 1, 1986; amended Aug. 6, 2010.)


28-46-44. Sampling and analysis techniques. (a) Sampling and analysis shall be performed in accordance with the techniques specified in 40 CFR part 136 and the appendices, as in effect on July 1, 2008, which are adopted by reference.

(b) If 40 CFR part 136 does not contain sampling and analytical techniques for the parameter in question or if the sampling and analytical techniques in part 136 are inappropriate for the parameter in question, the sampling and analysis shall be performed using validated analytical methods or other appropriate sampling and analytical procedures approved by the secretary to ensure the protection of public health, safety, and the environment. (Authorized by and implementing K.S.A. 2009 Supp. 55-1,117 and 65-171d; effective March 21, 1994; amended Aug. 6, 2010.)

28-46-45. Salt solution mining well operations; fees. (a) Each permittee shall submit an annual permit fee of $12,000 per facility and $175 per unplugged salt solution mining well to the department on or before April 1 of each year.

(b) Payment shall be made to the “Kansas department of health and environment - subsurface hydrocarbon storage fund.”

(c) The fees collected under this regulation shall be nonrefundable.

(d) If ownership of a salt solution mining well or salt solution mining facility changes during the term of a valid permit, no additional fee shall be required unless a change occurs that results in a new salt solution mining well or expansion of the facility’s operation. (Authorized by and implementing K.S.A. 2009 Supp. 55-1,117; effective Aug. 6, 2010.)

Article 53.—CHARITABLE HEALTH CARE PROVIDERS

28-53-1. Definitions. (a) “Agreement” means a written understanding between the secretary and a “charitable health care provider,” as defined in K.S.A. 75-6102 and amendments thereto, regarding the rendering of professional services to a medically indigent person.

(b) “Department” means Kansas department of health and environment.

(c) “Federally qualified health center” means one of the following:

1. An entity that meets the requirements for federal funding in 42 USC 1396d(l)(2)(B) and has been designated as a “federally qualified health center” by the federal government; or
2. an entity that, based on the recommendation of the federal health resources and services administration, is deemed to meet the requirements of the federal grant program and has been designated a “federally qualified health center look-alike” by the federal government but does not receive the federal grant funding specified in 42 USC 1396d(l)(2)(B).

(d) “Indigent health care clinic” has the meaning specified in K.S.A. 75-6102, and amendments thereto.

(e) “Local health department” has the meaning specified in K.S.A. 65-241, and amendments thereto.
28-53-1. Definitions. Each of the following terms used in this article shall have the meaning specified in this regulation:

(a) “ACS” means American college of surgeons.
(b) “Department” means Kansas department of health and environment.
(c) “Designation” means a determination by the secretary that a hospital shall provide the trauma care required of a level I trauma center, level II trauma center, level III trauma center, or level IV trauma center.
(d) “Level I trauma center” means a hospital that has the capability to provide the highest level of trauma care for every aspect of injury, from prevention through rehabilitation.
(e) “Level II trauma center” means a hospital that meets the following conditions:
(1) Provides initial trauma care, regardless of the severity of the injury;
(2) is not necessarily able to provide the same comprehensive care as that provided by a level I trauma center; and
(3) does not have trauma research as a primary objective.

(f) “Level III trauma center” means a hospital that provides initial trauma care or arranges for the appropriate transfer of trauma patients to a level I trauma center or a level II trauma center.

(g) “Level IV trauma center” means a hospital that provides urgent care for injured persons and the timely transfer of the seriously injured to a level I trauma center, level II trauma center, or level III trauma center as appropriate.

(h) “Regional trauma council” means one of the six councils, as defined in K.S.A. 75-5663 and amendments thereto, in the state established to address trauma and emergency medical care issues within a specific geographic area and to coordinate services to meet the needs of trauma patients injured within that area.

(i) “Trauma” means any of the following:
(1) Any injury to a person that results from acute exposure to mechanical, thermal, electrical, or chemical energy;
(2) any injury to a person that is caused by the absence of heat or oxygen and that requires immediate medical intervention; or
(3) any injury to a person that requires surgical intervention or treatment to prevent death or permanent disability.

(j) “Trauma facility” means a hospital distinguished by the availability of surgeons, physician specialists, anesthesiology services, nurses, and resuscitation and life-support equipment on a 24-hour basis to care for persons with trauma. This term shall include the following:
(1) Level I trauma centers;
(2) level II trauma centers;
(3) level III trauma centers; and
(4) level IV trauma centers.

(k) “Trauma registry” means the database maintained and operated by the department to collect and analyze reportable patient data on the incidence, severity, and causes of trauma.

(l) “Verification” means the process by which the American college of surgeons confirms a hospital’s trauma care capability and performance.

28-54-2. Standards for designation. The designation of a hospital as a level I trauma center, level II trauma center, level III trauma center, or level IV trauma center shall be made by the secretary based on the capability of the hospital to meet the requirements of the requested designation, as specified in this regulation:

(a) For level I trauma centers and level II trauma centers, verification by the American college of surgeons that the hospital meets the standards specified in the “resources for optimal care of the injured patient: 2006,” excluding the appendices, published by the American college of surgeons, which is adopted by reference, or a determination by the secretary that the hospital meets equivalent standards;

(b) for level III trauma centers, the “Kansas trauma care facility categorization criteria for level III trauma center,” published by the Kansas advisory committee on trauma and dated April 6, 2007, which is adopted by reference; and

(c) for level IV trauma centers, the “Kansas trauma care facility categorization criteria for level IV trauma center,” published by the Kansas advisory committee on trauma and dated August 25, 2010, which is adopted by reference. (Authorized by and implementing K.S.A. 2011 Supp. 75-5665; effective Nov. 2, 2007; amended March 16, 2012.)

28-54-3. Application for designation. (a)(1) Each hospital administrator that seeks a certificate of designation for its hospital shall submit the following to the secretary:

(A) A designation application on a form provided by the department. Each applicant seeking designation as a level I trauma center, level II trauma center, or level III trauma center shall include one of the following:

(i) A copy of the applicant’s current ACS verification certificate; or

(ii) documentation of successful completion of the secretary’s on-site survey; and

(B) one of the following nonrefundable application fees:

(i) $500 for designation as a level I trauma center, level II trauma center, or level III trauma center;

(ii) $250 for designation as a level IV trauma center.

(2) An application shall not be deemed complete until all of the required materials have been
received. Each applicant shall be notified by the department of the completeness of the application within 30 calendar days after the application is submitted to the department.

(b) Any applicant seeking designation of its hospital as a level III trauma center may request an on-site survey from the department by submitting a request with the application. The applicant shall be notified by the department of the date on which the on-site survey is scheduled and the amount of the nonrefundable fee for the on-site survey, which shall not exceed $15,000. The applicant shall submit this fee at least 30 calendar days before the date of the on-site survey.

(c) For each hospital seeking a level IV designation, a site visit may be arranged before the three-year designation period, within the three-year designation period, and every three years thereafter to coincide with the three-year designation process.

(d) The findings of the on-site survey team shall be provided to each applicant within 60 calendar days after the date of each survey. If a hospital does not meet the requirements for the level of designation for which the hospital administrator has applied, the hospital administrator shall be notified of the requirements that the hospital is required to meet for designation at the requested level. The hospital administrator shall submit to the secretary a plan of the proposed actions that the hospital will take to ensure compliance with the requirements. A second survey may be required by the secretary. The secretary’s survey team shall make a recommendation for the designation to the secretary, based on the hospital’s capability to meet the criteria for the requested level of designation.

(e) Each applicant specified in subsection (d) shall be notified by the secretary about the status of designation as a trauma facility within 90 calendar days after the applicant’s last survey.

(f) Each applicant who submits a current ACS one-year or three-year verification certificate with an application and the required fee shall be notified by the secretary about the status of designation as a trauma facility within 30 calendar days after the required materials are submitted to the secretary.

(g) Each certificate of designation shall be valid from the date of issuance and for the period specified on the certificate. (Authorized by and implementing K.S.A. 2011 Supp. 75-5665; effective Nov. 2, 2007; amended March 16, 2012.)

28-54-1. Application for change of designation. (a) Any administrator of a designated trauma facility may request a change of designation by submitting the following to the secretary:

(1) An application for a change of designation on the form provided by the department. Each applicant seeking a change of designation to a level I trauma center, level II trauma center, or level III trauma center shall include one of the following:

(A) A copy of the applicant’s current ACS verification certificate for the level of designation sought; or

(B) documentation of successful completion of the secretary’s on-site survey for the level of designation sought. The applicant may request an on-site survey from the department by submitting a request with the application; and

(2) one of the following nonrefundable fees:

(A) $500 for designation as a level I trauma center, level II trauma center, or level III trauma center; or

(B) $250 for designation as a level IV trauma center.

An application shall not be deemed complete until all of the required materials have been received. Each applicant shall be notified by the department of the completeness of the application within 30 calendar days after the application is submitted to the department.

(b) If the applicant seeking designation of its hospital as a level III trauma center requests an on-site survey by the department, the applicant shall be notified by the department of the date on which the on-site survey is scheduled and the amount of the nonrefundable fee for the on-site survey, which shall not exceed $15,000. The applicant shall submit this fee at least 30 calendar days before the date of the on-site survey.

(c) The findings of the secretary’s on-site survey team shall be provided to the applicant within 60 calendar days after the date of the survey. The survey team shall make a recommendation for the designation to the secretary, based on the hospital’s capability to meet the criteria for the requested level of designation.

(d) Each applicant specified in subsection (c) shall be notified by the secretary about the status of designation as a trauma facility within 90 calendar days after the applicant’s on-site survey.

(e) Each applicant who submits a current ACS one-year or three-year verification certificate for the level of designation sought with an application
and the required fee shall be notified by the secretary about the status of designation as a trauma facility within 30 calendar days after these required materials are submitted to the secretary.

(f) Each change of designation certificate shall be valid from the date of issuance and for the period specified on the certificate. (Authorized by and implementing K.S.A. 2011 Supp. 75-5665; effective Nov. 2, 2007; amended March 16, 2012.)

28-54-5 Certificate of designation; renewal. (a) Each certificate of designation shall be valid for three years from the effective date specified on the certificate.

(b)(1) Each administrator of a designated trauma facility that wants to renew the trauma facility’s certificate of designation shall submit the following at least six months before the expiration date specified on the certificate of designation:

(A) An application for renewal of the hospital’s designation on a form provided by the department, which shall include the following:

(i) A copy of the applicant’s current ACS verification certificate; or

(ii) documentation of successful completion of the secretary’s on-site survey. If an applicant for renewal wants to request an on-site survey from the department, the applicant shall meet the requirements specified in K.A.R. 28-54-3(b) or (c) and in K.A.R. 28-54-3(d); and

(B) one of the following nonrefundable renewal fees:

(i) $500 for designation as a level I trauma center, level II trauma center, or level III trauma center; or

(ii) $250 for designation as a level IV trauma center.

(2) An application shall not be deemed complete until all of the required materials have been received. Each applicant for renewal shall be notified by the department of the completeness of the application within 30 calendar days after the application is submitted to the department. Except as otherwise provided in subsection (c), failure to renew the certificate of designation before the expiration date shall render the certificate invalid.

(c) The certificate of designation shall not expire on the specified expiration date if all of the required materials specified in paragraph (b)(1) have been submitted to the secretary at least six months before the expiration date on the certificate of designation. In this case, the certificate of designation shall expire on the earlier of the following dates:

1. The date on which the certificate of designation is renewed; or
2. The date on which the secretary denies the renewal application. (Authorized by and implementing K.S.A. 2011 Supp. 75-5665; effective Nov. 2, 2007; amended March 16, 2012.)

Article 56.—REPORTING OF INDUCED TERMINATIONS OF PREGNANCY

28-56-1 Definitions. Each of the following terms shall have the meaning assigned in this regulation:

(a) “Abortion” has the meaning specified in K.S.A. 65-6701, and amendments thereto.

(b) “Abortion provider” means a physician that performs an abortion, a clinic comprised of legally or financially affiliated physicians, a hospital, or any other medical care facility where an abortion is performed.

(c) “Abortion report” means the information required to be submitted by an abortion provider to the department either electronically or on a paper form provided by the department.

(d) “Clinical estimate of gestation” means the number of completed weeks of gestation of an unborn child as determined through a sonogram.

(e) “Confidential code number” means a random five-digit identification number, along with subcategory letters, assigned by the department to an abortion provider for the purpose of submitting an abortion report to the department.

(f) “Correction” means the act of providing information to the department to correct errors or provide missing information to an abortion report.

(g) “Department” has the meaning specified in K.S.A. 65-6701, and amendments thereto.

(h) “Electronic abortion reporting system” means the department’s vital events reporting system through which abortion reports are submitted electronically to the department.

(i) “Failed abortion” means an abortion procedure that was initiated but not completed and resulted in a live birth.

(j) “Failed abortion report” means the information on a failed abortion required to be submitted by the abortion provider to the department on a paper form provided by the department.

(k) “Hospital” has the meaning specified in K.S.A. 65-425, and amendments thereto.

(l) “ICD-9-CM” means volumes one and two,
office edition, of the 2011 clinical modification of the “international classification of diseases,” ninth revision, sixth edition, published by practice management information corporation, which is used to code and classify morbidity data from inpatient and outpatient records, physician offices, and most surveys from the national center for health statistics. This document, including the appendices, is hereby adopted by reference.

(n) “Late term” means the clinical estimate of gestation of at least 22 completed weeks.

(o) “Live birth” has the meaning specified in K.S.A. 65-2401, and amendments thereto.

(p) “Medical basis” means the specific medical signs, symptoms, history, or other information provided by the patient or the results of clinical examinations, procedures, or laboratory tests used to make a medical diagnosis.

(q) “Medical care facility” has the meaning specified in K.S.A. 65-425, and amendments thereto.

(r) “Medical diagnosis” means a specific medical condition or disease as determined by a physician.

(s) “Medical emergency” has the meaning specified in K.S.A. 65-4a01, and amendments thereto.

(t) “Partial birth abortion” has the meaning specified in K.S.A. 65-6721, and amendments thereto.

(u) “Physician” has the meaning specified in K.S.A. 65-6701, and amendments thereto.

(v) “Physician’s report on number of certifications received” means a monthly report that shall be submitted to the department on a form provided by the department specifying the number of voluntary and informed consent forms certified by each patient and received by the physician before the patient is to receive an abortion.

(w) “Referring physician” means a physician who refers a patient to an abortion provider and who is required to provide a late term affidavit.

(x) “Requirements related to reporting abortions” means the department’s handbook containing instructions describing how abortions shall be reported to the department, either on a paper form or electronically, and copies of applicable state statutes and regulations.

(y) “Unborn child” means a living individual organism of the species Homo sapiens, in utero, at any stage of gestation from fertilization to birth.

(z) “User agreement” means the required document that entitles each abortion provider or the designee to access the department’s electronic abortion reporting system.

(aa) “Viable” has the meaning specified in K.S.A. 65-6701, and amendments thereto.


28-56-2. General requirements for abortion reports. (a) Each abortion provider, before performing an abortion and before using the electronic abortion reporting system, shall obtain the following:

(1) A confidential code number from the department; and

(2) a copy of the requirements related to reporting abortions.

(b) Each abortion provider performing less than five abortions annually may use the paper form abortion report.

(c) Each abortion provider performing five or more abortions annually shall use the electronic abortion reporting system to file each abortion report and shall meet the following requirements:

(1) Submit an executed user agreement; and

(2) ensure that each individual authorized by the abortion provider to enter abortion data into the electronic abortion reporting system has a separate user account to access the electronic abortion reporting system.

(d) An abortion report shall be filed for each abortion performed. Each abortion report shall contain the following information:

(1) The confidential code number of the abortion provider filing the abortion report;

(2) the patient’s unique identification number as maintained in the abortion provider’s medical record. The patient’s name and street address shall not be submitted;

(3) the patient’s age in years on the patient’s last birthday;
(4) the patient’s marital status at the time of the abortion;
(5) the month, day, and year the abortion was performed;
(6) the state or United States territory of residence of the patient or, if the patient is not a resident of the United States, the patient’s country of residence;
(7) the patient’s county of residence if the patient is a resident of a state or territory of the United States or, if the patient is a resident of Canada, the province;
(8) the patient’s city or town of residence;
(9) specification of whether the patient resided within the city limits of the city or town of residence;
(10) the hispanic origin of the patient, if applicable;
(11) the patient’s ancestry;
(12) the patient’s race;
(13) the highest level of education completed by the patient;
(14) the date when the patient’s last normal menses began, including the month, day, and year as reported by the patient;
(15) clinical estimate of gestation;
(16) number of previous pregnancies, in the following categories:
  (A) Children born live and now living;
  (B) children born live and now dead;
  (C) previous induced abortions; and
  (D) previous spontaneous terminations, including miscarriages, or stillbirths;
(17) the primary abortion procedure used in terminating the pregnancy, including one of the following abortion procedures:
  (A) Suction curettage;
  (B) sharp curettage;
  (C) dilation and evacuation;
  (D) administration of mifepristone;
  (E) administration of methotrexate;
  (F) prostaglandins delivered by intrauterine instillation or other methods;
  (G) hysterotomy;
  (H) hysterectomy;
  (I) digoxin induction;
  (J) partial birth abortion; or
  (K) other procedure, which shall be specified;
(19) specification of the medical factors and methods used to determine the clinical estimate of gestation; and

28-56-3. Reporting requirements for abortions performed at clinical estimate of gestation of at least 22 weeks. When performing an abortion at clinical estimate of gestation of 22 or more weeks, in addition to the requirements specified in K.A.R. 28-56-2, each abortion report shall contain the following information:
  (a) Specification of whether the unborn child was viable;
  (b) a detailed, case-specific description that includes the medical diagnosis and medical basis of the patient and unborn child if the unborn child was viable;
  (c) specification of whether continuation of the pregnancy would cause a substantial and irreversible impairment of a major bodily function or the death of the patient;
  (d) a detailed, case-specific description that includes the medical diagnosis and medical basis for the determination that the abortion was necessary to prevent the patient’s death or irreversible impairment of a major bodily function; and

28-56-4. Reporting requirements for partial birth abortions. For each procedure performed involving a partial birth abortion, in addition to the requirements specified in K.A.R. 28-
56-2 and 28-56-3, each abortion report for a partial
birth abortion shall contain the following
information:
(a) Specification of whether the unborn child
was viable;
(b) a detailed, case-specific description that in-
cludes the medical diagnosis, medical basis, and
description of the medical conditions of the pa-
tient and unborn child if the unborn child was
viable;
(c) specification of whether continuation of the
pregnancy would cause a substantial and irrevers-
able impairment of a major bodily function or the
death of the patient;
(d) a detailed, case-specific medical diagnosis
and medical basis for the determination that the
abortion was necessary to prevent the patient’s
death or irreversible impairment of a major bodily
function; and
(e) a medical determination that includes all ap-
plicable medical diagnosis codes from the ICD-9-
65-6703, and 65-6721; implementing K.S.A. 2011
Supp. 65-6721; effective June 15, 2012.)

28-56-5. Requirements for reporting
failed abortions. If an abortion attempt fails and
results in a live birth, each abortion provider shall
complete and file the following information:
(a) A certificate of live birth pursuant to K.S.A.
65-2409a, and amendments thereto; and
(b) a failed abortion report meeting the follow-
ing requirements:
(1) Meeting the requirements specified in
K.A.R. 28-56-2; and
(2) specifying the medical basis and medical di-
agnosis for the reason the abortion was not com-
pleted. (Authorized by and implementing K.S.A.

28-56-6. Reporting requirements for
abortions performed on minors in the case of
a medical emergency. (a) Each abortion pro-
vider shall file an abortion report as specified in
(b) Each abortion report for an abortion per-
formed on a minor during a medical emergency
shall contain the following information:
(1) If applicable, the information specified in
K.A.R. 28-56-4 and K.A.R. 28-56-5;
(2) the medical basis for determining that a
medical emergency exists;
(3) the medical methods used in determining
the medical emergency;
(4) the patient identification number obtained
from the patient’s medical records where the
abortion was performed; and
(5) the date on which the abortion was per-
formed. (Authorized by K.S.A. 2011 Supp. 65-
445, 65-6703, 65-6705 and 65-6721; implement-
ing K.S.A. 2011 Supp. 65-6705; effective June 15,
2012.)

28-56-7. Physician’s report on number
of certifications received. (a) Each physician
performing an abortion shall submit to the de-
partment the number of patient-completed vol-
tuntary and informed consent forms as specified in
K.S.A. 65-6709, and amendments thereto. The re-
port shall be submitted within five business days
after the end of each month.
(b) Each physician’s report on number of cer-
tifications received shall be submitted by United
States mail or facsimile transmission. The report
shall contain the following information:
(1) The physician’s confidential code number;
(2) the date the report was submitted; and
(3) the number of voluntary and informed con-
sent forms as specified in K.S.A. 65-6709, and
amendments thereto, received during the previ-
sual calendar month, including any voluntary and
informed consent form that was not followed by
an abortion.
(c) Each correction to the physician’s report on
the number of certifications received shall be
made within 15 business days of discovery of the
error or omission. (Authorized by K.S.A. 2011
Supp. 65-445 and 65-6709; implementing K.S.A.
2011 Supp. 65-6709; effective June 15, 2012.)

28-56-8. Late term affidavits. (a) The re-
referring physician and the physician performing an
abortion shall each submit a late term affidavit to
the department within 15 business days of the
completion of the abortion procedure.
(b) The late term affidavit completed by the
referring physician shall contain the following
information:
(1) Name of the referring physician;
(2) the patient’s identification number obtained
from the patient’s medical records where the
abortion was performed;
(3) a statement that the referring physician and
the physician performing the abortion have no le-
gal or financial affiliation with each other as spec-
ified in K.S.A. 65-6703, and amendments thereto; and

28-56-9. Correction in an abortion report. (a) In case of an error or missing information in an abortion report, each abortion provider shall report in writing to the department within 15 business days of discovery the specific information that needs to be corrected or provided.

(b) Each abortion provider shall review all relevant medical records after being advised by the department of an error or missing information on the abortion report and shall provide any correction or updated information on the abortion report within 15 business days of discovery of the error or omission.

(c) An abortion provider shall not make corrections or additions to an abortion report within the electronic abortion reporting system or create a new record to replace the incorrect or incomplete abortion report. (Authorized by and implementing K.S.A. 2011 Supp. 65-445; effective June 15, 2012.)

28-56-10. Medical information retained on each abortion performed. (a) Each abortion provider shall retain the following information in each patient’s medical record for at least 10 years:

(1) A copy of the abortion report and any subsequent corrections;
(2) A copy of the voluntary and informed consent form;
(3) A copy of the late term affidavit of the physician who performed the abortion;
(4) A copy of a court-ordered bypass of parental consent as specified in K.S.A. 65-6705, and amendments thereto, or consent of both parents or the legal guardian if the minor is not emancipated;
(5) The physical or mental medical history of the patient;
(6) All sonogram results;
(7) A copy of the medical basis and reasons related to partial birth abortion, late term abortion, or emergency abortion procedure on a minor;
(8) A copy of the patient-specific counseling information provided in addition to state-required material;
(9) A copy of the postabortion instructions;
(10) A record and description of any complications;
(11) The type and amount of anesthesia used;
(12) Any report of physical, mental, or emotional abuse or neglect of a minor pursuant to K.S.A. 38-2223, and amendments thereto;
(13) A list of all medical tests performed and the results of each test;
(14) A record of any return visit by patient, if indicated by the physician;
(15) Emergency contact information for the patient;
(16) A copy of the medical referral from the referring physician; and
(17) If known, the name, address, and telephone number of the father of the unborn child if the patient is less than 16 years old.


Article 61.—LICENSURE OF SPEECH LANGUAGE PATHOLOGISTS AND AUDIOLOGISTS

28-61-1. Definitions. (a) “American academy of audiology” means a national professional association for audiologists that provides continuing education programs and approves continuing education sponsors in clinical audiology.

(b) “American speech-language-hearing association” means a national professional association that accredits academic and clinical practicum programs and continuing education sponsors in speech-language pathology and audiology and that issues a certificate of clinical competence in speech-language pathology and audiology.

(c) “Department” means the Kansas department of health and environment.

(d) “Licensure period” means the period of time beginning on the date a license is issued and ending on the date the license expires. All full licenses shall expire biennially on October 31.

(e) “Screening” means a pass-fail procedure to identify any individual who requires further assessment.

(f) “Sponsorship” means an approved, long-term sponsoring of programs for the purpose of fulfilling renewal or reinstatement continuing ed-
ucation requirements. Each approved sponsor shall be accountable for upholding the department’s standards for the approval of continuing education programs. Each sponsor shall submit an application and the sponsor’s annual report on department-approved forms. The authority to sanction otherwise discipline an approved sponsor shall be maintained by the department. These sanctions may include the following:

(1) Supplementary documentation;

(2) program restrictions; or

(3) temporary or permanent suspension of long-term sponsorship approval.

(g) “Supervision of methods and procedures related to hearing and the screening of hearing disorders” means consultation on at least a monthly basis by a licensed audiologist, a licensed speech-language pathologist, or any person exempted by K.S.A. 65-6511(a), (b), or (c), and amendments thereto. Any consultation may include any of the following:

(1) On-site visits;

(2) review of written documentation and reports; or


28-61-2. Qualifications for licensure. (a) To determine whether or not an applicant has completed the educational requirements in the area for which the applicant seeks licensure pursuant to K.S.A. 65-6505 and amendments thereto, consideration shall be given to whether or not the academic course of study and practicum content are accredited by the American speech-language-hearing association or are deemed equivalent to the course of study and practicum content of Kansas universities by the secretary.

(b) Each applicant who completed the educational requirements specified in K.S.A. 65-6505, and amendments thereto, in a program not accredited by the American speech-language-hearing association shall meet both of the following requirements:

(1) Obtain an equivalency validation of the academic course of study or practicum content, or both, from a Kansas college or university with a speech-language pathology or audiology program accredited by the American speech-language-hearing association; and

(2) provide transcripts and supervised practicum records verifying that the applicant has successfully completed coursework or supervised practicum experiences related to the principles and methods of prevention, assessment, and intervention for individuals with communication and swallowing disorders in the following subject areas:

(A) Articulation;

(B) fluency;

(C) voice and resonance, including respiration and phonation;

(D) receptive and expressive language in speaking, listening, reading, writing, and manual modalities;

(E) hearing, including the impact on speech and language;

(F) swallowing;

(G) cognitive aspects of communication;

(H) social aspects of communication; and

(I) communication modalities, including oral, manual, augmentative, and alternative communication, and assistive technologies.

(c) To determine whether or not an applicant has complied with the requirement that the degree be from an educational institution with standards consistent with the standards of Kansas universities pursuant to K.S.A. 65-6505 and amendments thereto, consideration shall be given to whether or not the institution is accredited by an accrediting body recognized by either the council on postsecondary accreditation or the secretary of the U.S. department of education, or is deemed equivalent by the secretary.

(d) Each applicant who completed the educational requirements specified in K.S.A. 65-6505, and amendments thereto, outside the United States or its territories and whose transcript is not in English shall submit an officially translated English copy of the applicant’s transcript to the secretary and, if necessary, supporting documents. The transcript shall be translated by a source and in a manner that are acceptable to the secretary.

(e) Each applicant who completed the educational requirements specified in K.S.A. 65-6505, and amendments thereto, outside the United States or its territories shall obtain an equivalency validation from an agency approved by the secretary that specializes in educational credential evaluations.

(f) Each applicant shall pay any transcription or
equivalency validation fee directly to the transcriber or the validating agency.

(g) The supervised clinical practicum as specified in K.S.A. 65-6505, and amendments thereto, shall be at least 400 hours, 25 of which shall be observation and 375 of which shall be direct client contact. At least 325 of the 400 hours of supervised clinical practicum shall be earned at the graduate level in the area in which licensure is sought.

(h) Each applicant, after completing the requirements in K.S.A. 65-6505 and amendments thereto, shall successfully complete the supervised postgraduate professional experience requirement in the area for which the applicant seeks licensure. The applicant may complete the requirement on a full-time or part-time basis.

(1) “Full-time” means 35 hours per week for nine months.

(2) “Part-time” means 15 to 19 hours per week for 18 months, 20 to 24 hours per week for 15 months, or 25 to 34 hours per week for 12 months.

(3) Each applicant working full-time shall spend 80 percent of the week in direct client contact and activities related to client management.

(4) Each applicant working part-time shall spend 100 percent of the week in direct client contact and activities related to client management.

(5) “Direct client contact” means assessment, diagnosis, evaluation, screening, habilitation, or rehabilitation of persons with speech, language, or hearing handicaps.

(6) Each postgraduate professional experience supervisor shall be currently and fully licensed in Kansas for speech-language pathology or audiology or, if the experience was completed in another state, either be currently and fully licensed in that state or hold the certificate of clinical competence issued by the American speech-language-hearing association. The supervisor’s license or certificate shall be in the area for which the applicant seeks licensure.

(7) The supervisor shall evaluate the applicant on no less than 36 occasions of monitoring activities with at least four hours per month. The supervisor shall make at least 18 on-site observations with at least two hours per month.

(8) Monitoring occasions may include on-site observations, conferences in person or on the telephone, evaluation of written reports, evaluations by professional colleagues, or correspondence.

(9) The supervisor shall maintain detailed written records of all contacts and conferences during this period. If the supervisor determines that the applicant is not providing satisfactory services at any time during the period, the supervisor shall inform the applicant in writing and submit written reports to the applicant during the period of resolution.

(10) No licensee shall be approved to serve as a supervisor for a postgraduate professional experience once the secretary initiates a disciplinary proceeding pursuant to K.S.A. 65-6508, and amendments thereto. After the disciplinary action or actions have been concluded, a licensee whose license has been reinstated or otherwise determined to be in good standing may be considered as a supervisor.

(i) Each applicant shall be required to pass the specialty area test of the national teacher examination of the educational testing service in the area for which licensure is being sought. The passing score for the examination shall be 600.

(1) The educational testing service shall administer the examinations at least twice a year within Kansas.

(2) Each applicant shall register to take the examination through the educational testing service, pay the examination fee directly to the educational testing service, and request that the test score be sent directly to the department from the educational testing service. (Authorized by K.S.A. 65-6503; implementing K.S.A. 2010 Supp. 65-6505; effective Dec. 28, 1992; amended March 16, 2001; amended April 16, 2010; amended April 8, 2011.)

28-61-3. Application for a license. (a) Each individual applying for a license shall submit to the department a completed department-approved application form, the required supporting documentation showing completion of all qualifications for licensure, and the appropriate fee as specified in K.A.R. 28-61-9.

(b) Each applicant shall provide to the department the applicant’s academic transcripts and proof of completion of the educational requirements specified in K.S.A. 65-6505, and amendments thereto. These documents shall be provided directly to the department by the academic institution.

(c) Each applicant who seeks licensure in both speech-language pathology and audiology shall submit a separate application for each license, meet the qualifications for each license, and pay

28-61-4. Application for a temporary license. (a) Each applicant who has completed the education and clinical practicum pursuant to K.S.A. 65-6505, and amendments thereto, but has not completed a supervised postgraduate professional experience or examination, or both, shall apply for a temporary license. This temporary license shall be issued for a period of 12 months and may be renewed for one subsequent 12-month period upon request and with the secretary's approval.

(b) Each applicant applying for a temporary license shall submit to the department a completed department-approved application form, the required supporting documentation showing completion of education and clinical practicum, and the appropriate fee as specified in K.A.R. 28-61-9.

(c) Each applicant shall provide to the department the applicant’s academic transcripts and proof of completion of the educational requirements specified in K.S.A. 65-6505, and amendments thereto. These documents shall be provided directly to the department by the academic institution.

(d) Each applicant seeking a temporary license for the purpose of completing a supervised postgraduate professional experience shall receive a temporary license before beginning the supervised postgraduate professional experience.

(1) Each applicant shall provide to the department a plan for completion of the supervised postgraduate professional experience that has been signed by a supervisor who is currently fully licensed in Kansas in the area in which the applicant seeks licensure.

(2) Each applicant shall report any changes in the plan to the department.

(3) At the conclusion of the supervised postgraduate professional experience, each supervisor shall sign and submit to the department a report that documents satisfactory completion of the supervised postgraduate professional experience.

(e) To renew a temporary license, each applicant shall submit to the secretary a letter of appeal, supporting documentation showing that the examination or supervised postgraduate professional experience, or both, was not completed, and the temporary licensure fee as specified in K.A.R. 28-61-9.

(f) Each applicant who seeks temporary licensure in both speech-language pathology and audiology shall submit a separate application for each temporary license, meet the qualifications for each temporary license, and pay the fee for each temporary license.

(g) A temporary license may be issued to enable an applicant for reinstatement to complete the continuing education requirements. This license shall be valid for not more than 12 months and shall not be renewed. (Authorized by K.S.A. 65-6503; implementing K.S.A. 2010 Supp. 65-6505 and K.S.A. 65-6506; effective Dec. 28, 1992; amended March 16, 2001; amended April 8, 2011.)

28-61-5. License renewal. (a) Each applicant for renewal of a license shall submit the following to the secretary:

(1) A completed secretary-approved application form;

(2) the required supporting documentation; and

(3) the license renewal fee as specified in K.A.R. 28-61-9.

(b) Each applicant for renewal of a license shall have completed the required clock-hours of documented and approved continuing education during each licensure period immediately preceding renewal of the license. Approved continuing education clock-hours completed in excess of the requirement shall not be carried over to the subsequent renewal period. There shall be 20 hours of approved continuing education required for each applicant holding a single two-year license and 30 hours required if the applicant is licensed in both speech-language pathology and audiology.

(c) Each applicant shall maintain individual records consisting of documentation and validation of approved continuing education clock-hours, a summary of which shall be submitted to the secretary on the approved form as part of the license renewal application.

(d) For the purpose of measuring continuing education credit, "one clock-hour" shall mean at least 50 minutes of direct instruction, exclusive of registration, breaks, and meals.

(e) The content and objective of the continuing education activity shall be primarily related to the practice of speech-language pathology as defined
by K.S.A. 65-6501, and amendments thereto, or the practice of audiology as defined by K.S.A. 65-6501, and amendments thereto.

(1) The educational activity shall be for the purpose of furthering the applicant’s education in one of the following three content areas:

(A) Basic communication processes, including information applicable to the normal development and use of speech, language, and hearing. Issues related to this content area may include any of the following:

(i) Anatomic and physiologic bases of the normal development and use of speech, language, and hearing;

(ii) physical bases and processes of the production and perception of speech, language, and hearing;

(iii) linguistic and psycholinguistic variables related to normal development and use of speech, language, and hearing; or

(iv) technological, biomedical, engineering, and instrumentation information;

(B) professional areas, including information pertaining to disorders of speech, language, and hearing. Issues related to this content area may include any of the following:

(i) Various types of communication disorders, their manifestations, classifications, and causes;

(ii) evaluation skills, including procedures, techniques, and instrumentation for assessment; or

(iii) management procedures and principles in habilitation and rehabilitation of communication disorders; or

(C) related areas, including study pertaining to the understanding of human behavior, both normal and abnormal, as well as services available from related professions that apply to the contemporary practice of speech-language pathology, audiology, or both. Issues related to this content area may include any of the following:

(i) Theories of learning and behavior;

(ii) services available from related professions that also deal with persons who have disorders of communications;

(iii) information from these professions about the sensory, physical, emotional, social, or intellectual states of child or adult; or

(iv) other areas, including general principles of program management, professional ethics, clinical supervision, counseling, and interviewing.

(2) Unacceptable content areas shall include marketing, personal development, time management, human relations, collective bargaining, and tours.

(3) The educational activity shall not be a part of the applicant’s job responsibilities. In-service shall be considered part of the applicant’s job responsibilities.

(f) Continuing education may be accrued by any of the following methods:

(1) Academic coursework related to the contemporary practice of speech-language pathology or audiology, offered by a regionally accredited college or university and documented by transcript or grade sheet:

(A) One academic-semester credit hour shall be equivalent to 15 clock-hours of continuing education. One academic-trimester credit hour shall be equivalent to 14 clock-hours of continuing education. One academic-quarter credit hour shall be equivalent to 10 clock-hours of continuing education; and

(B) one audited academic-semester credit hour shall be equivalent to eight clock-hours of continuing education. One audited academic-trimester credit hour shall be equivalent to seven clock-hours of continuing education. One audited academic-quarter credit hour shall be equivalent to five clock-hours of continuing education;

(2) workshops, seminars, poster sessions, and educational sessions sponsored by an organization, agency, or other entity that has been approved by the secretary:

(A) one clock-hour of contact between either a presenter or instructor and the applicant shall be equivalent to one clock-hour of continuing education for the applicant;

(B) contact time shall be rounded down to the nearest one-half hour interval; and

(C) one-half clock-hour of continuing education credit shall be awarded for attendance at two poster displays, with a maximum of two clock-hours of continuing education awarded for attendance at poster displays per licensure period;

(3) preparation and presentation of a new seminar, lecture, or workshop according to the following criteria:

(A) “New” shall mean that the applicant is preparing and making the presentation for the first time in any setting;

(B) credit shall be awarded only for the first presentation at the rate of two clock-hours of continuing education for every one clock-hour of contact between the instructor and attendees; and

(C) if the presentation was given by more than
one instructor, the continuing education clock-hours shall be prorated among the instructors;

(4) preparation and presentation of a new undergraduate or graduate course in speech-language pathology or audiology at an accredited college or university:

(A) “New” shall mean that the applicant is teaching the course for the first time in any setting;

(B) six clock-hours of credit shall be awarded per new course, up to a maximum of 12 clock-hours per licensure period; and

(C) if the course was prepared and presented by more than one instructor, the continuing education clock-hours shall be prorated among the instructors;

(5) the successfully completed supervision of a postgraduate professional experience as specified in K.A.R. 28-61-2 and K.A.R. 28-61-4:

(A) The licensee’s name and signature shall appear as the supervisor on the temporary license application submitted by the supervisee as specified in K.A.R. 28-61-4(d)(1);

(B) five clock-hours of credit per supervisee shall be awarded to the licensee; and

(C) the maximum amount of credit awarded for the supervision of a postgraduate professional experience shall be five clock-hours per licensee per licensure period; or

(6) self-directed study courses that are directly oriented to improving the applicant’s professional competence and that are approved by the secretary:

(A) Self-directed study courses shall receive prior approval from the secretary;

(B) courses shall be sponsored by a nationally recognized professional organization in audiology or speech-language pathology and shall be accompanied by an examination or measurement tool to determine successful completion of the course;

(C) self-study materials may include audiotapes, videotapes, study kits, digital video discs (DVDs), and courses offered through the internet or other electronic medium; and

(D) one clock-hour of time required to complete the self-directed study material, as specified by the sponsor of the material, shall be equivalent to one clock-hour of continuing education.

(g) Continuing education sponsors seeking prior approval for a single offering of a continuing education activity shall apply to the secretary. Approval may be granted by the secretary by one of the following methods.

(1) An organization, institution, agency, or individual shall be qualified for approval as a sponsor of a continuing education activity if, after review of the application, the secretary determines that the applicant meets all of the following conditions:

(A) The sponsor presents organized programs of learning.

(B) The sponsor presents subject matters that integrally relate to the practice of speech-language pathology or audiology, or both, as specified in subsection (e).

(C) The sponsor’s program activities contribute to the professional competency of the licensee.

(D) The sponsor’s program presenters are individuals who have education, training, or experience that qualifies them to present the subject matter of the program.

(2) An organization, institution, agency, or individual shall be qualified for approval as a sponsor of continuing education if the American speech-language-hearing association or the American academy of audiology has approved the organization, institution, agency, or individual as a continuing education sponsor and the sponsor presents subject matter as specified in subsection (e).

(h) Continuing education sponsors seeking long-term sponsorship for continuing education activities shall apply to the secretary. Approval may be granted by the secretary if the organization, institution, agency, or individual agrees to perform all of the following:

(1) Present organized programs of learning;

(2) present subject matter that integrally relates to the practice of speech-language pathology or audiology, or both, and subsection (e);

(3) approve and present program activities that contribute to the professional competency of the licensee; and

(4) sponsor program presenters who are individuals with education, training, or experience that qualifies them to present the subject matter of the programs.

(i) All approved continuing education sponsors that received approval by the method specified in subsection (g) shall provide the following:

(1) A certificate of attendance to each licensee who attends a continuing education activity. The certificate shall state the following:

(A) The sponsor’s name and approval number;

(B) the date of the program;

(C) the name of the participant;
(D) the total number of clock-hours of the program, excluding introductions, registration, breaks, and meals;
(E) the program’s title and its presenter;
(F) the program site; and
(G) a designation of whether the program is approved for speech-language pathology or audiology, or both; and
(2) a list of attendees, license numbers, and the number of continuing education clock-hours completed by each licensee upon request and in a format approved by the secretary.

(j)(1) Each licensee who attends any activities of continuing education sponsored by the American speech-language-hearing association or the American academy of audiology shall retain either of the following:
(A) The letter of confirmation received from the continuing education registry of the American speech-language-hearing association or the American academy of audiology that includes the following:
(i) The licensee’s name, address, and social security number;
(ii) the course title;
(iii) the sponsor’s name; and
(iv) the number of continuing education units awarded; or
(B) the licensee’s transcript from the continuing education registry of the American speech-language-hearing association or the American academy of audiology.
(2) One continuing education unit shall be equivalent to 10 clock-hours of continuing education.

(k) All continuing education sponsors that received approval by the method outlined in subsection (g) shall report to the secretary annually to maintain the designation as an approved sponsor. The application shall require a list of all continuing education programs provided by the approved sponsor during the previous calendar year and any additional documentation deemed necessary by the secretary to ensure that the approved sponsor is meeting or exceeding the standards set forth in this article.

(l) Each licensee who completes a continuing education activity that was not sponsored by an approved continuing education sponsor shall retain course documentation for review by the secretary at the time of license renewal.

(m) Each licensee whose initial licensure period is less than 24 months shall be required to obtain at least one clock-hour of continuing education for each month in the initial licensure period if the licensee holds a single license and at least one and one-quarter clock-hours of continuing education for each month in the initial licensure period if the licensee holds a dual license. (Authorized by K.S.A. 65-6503; implementing K.S.A. 65-6506; effective Dec. 28, 1992; amended March 16, 2001; amended April 16, 2010.)

28-61-8. Assistants. (a) Each speech-language pathology assistant and each audiology assistant shall meet the following criteria:
(1) Have received a high school diploma or equivalent;
(2) complete a training program conducted by a Kansas-licensed speech-language pathologist or audiologist. This training shall include the following:
(A) Ethical and legal responsibilities;
(B) an overview of the speech, language, and hearing disorders;
(C) response discrimination skills;
(D) behavior management;
(E) charting of behavioral objectives and recordkeeping;
(F) teaching principles, if applicable to the employment setting; and
(G) other skill training as required by the employment setting; and
(3) receive ongoing supervised training by a Kansas-licensed speech-language pathologist or audiologist for at least one hour per month.
(b) Any speech-language pathology assistant or audiology assistant may perform the following:
(1) Follow documented treatment plans and protocols that are planned, designed, and supervised by a Kansas-licensed speech-language pathologist or audiologist;
(2) record, chart, graph, report, or otherwise display data relative to client performance, including hearing screenings, and report this information to a supervising speech-language pathologist or audiologist;
(3) participate with a Kansas-licensed speech-language pathologist or audiologist in research projects, public relations programs, or similar activities;
(4) perform clerical duties, including preparing materials and scheduling activities as directed by a Kansas-licensed speech-language pathologist or audiologist;
(5) prepare instructional materials; and
(6) perform equipment checks and maintain equipment, including hearing aids.

(c) A speech-language pathology assistant or audiologist assistant shall not perform any of the following:

(1) Perform standardized or nonstandardized diagnostic tests, conduct formal or informal evaluations, or provide clinical interpretations of test results;

(2) participate in parent conferences, case conferences, or any interdisciplinary team without the presence of a supervising Kansas-licensed speech-language pathologist or audiologist;

(3) perform any procedure for which the assistant is not qualified, has not been adequately trained, or is not receiving adequate supervision;

(4) screen or diagnose clients for feeding or swallowing disorders;

(5) write, develop, or modify a client’s individualized treatment plan in any way;

(6) assist clients without following the individualized treatment plan prepared by a Kansas-licensed speech-language pathologist or audiologist or without access to supervision;

(7) sign any formal documents, including treatment plans, reimbursement forms, or reports. An assistant shall sign or initial informal treatment notes for review and signing by a Kansas-licensed speech-language pathologist or audiologist;

(8) select clients for services;

(9) discharge a client from services;

(10) make referrals for additional services;

(11) use a checklist or tabulate results of feeding or swallowing evaluations;

(12) demonstrate swallowing strategies or precautions to clients, family, or staff; or

(13) represent that person as a speech-language pathologist or audiologist.

(d) Each assistant shall be supervised by a Kansas-licensed speech-language pathologist or audiologist. The supervisor shall be licensed to practice in the field in which the assistant is providing services.

(1) Each supervisor shall be responsible for determining that the assistant is satisfactorily qualified and prepared for the duties assigned to the assistant.

(2) Each supervisor shall obtain, retain, and maintain on file documentation of the assistant’s qualifications and training outlined in subsection (a).

(3) Only the supervisor shall exercise independent judgment in performing professional procedures for the client. The supervisor shall not delegate the exercise of independent judgment to the assistant.

(4) A speech-language pathologist or audiologist who holds a temporary license shall not be eligible to supervise assistants.

(e) Each supervisor shall directly supervise at least 10 percent of the assistant’s client contact time. No portion of the assistant’s direct client contact shall be counted toward the ongoing training required in subsection (a). No portion of the assistant’s time performing activities under indirect supervision shall be counted toward client contact time.

(f) “Direct supervision” shall mean the on-site, in-view observation and guidance provided by a speech-language pathologist or audiologist to an assistant while the assistant performs an assigned activity.

(g) “Indirect supervision” shall mean the type of guidance, other than direct supervision, that a speech-language pathologist or audiologist provides to an assistant regarding the assistant’s assigned activities. This term shall include demonstration, record review, and review and evaluation of audiotaped sessions, videotaped sessions, or sessions involving interactive television.

(h) Each supervisor shall, within 30 days of employing an assistant, submit written notice to the department of the assistant’s name, employment location, and verification that the assistant meets the qualifications listed in subsection (a). Each supervisor shall notify the department of any change in the status of an assistant.

(i) Each supervisor shall perform all of the following tasks:

(1) Develop a system to evaluate the performance level of each assistant under the licensee’s supervision;

(2) retain and maintain on file documentation of the performance level of each assistant supervised; and

(3) report to the department at the time of the supervisor’s license renewal, on a department-approved form, the name and employment location of each assistant. (Authorized by K.S.A. 65-6503; implementing K.S.A. 65-6501; effective Dec. 28, 1992; amended March 16, 2001; amended April 16, 2010.)

Article 70.—CANCER REGISTRY

28-70-4. Confidential data for follow-up patient studies. (a) For the purposes of this regulation, the following definitions shall apply:
(1) “Institutional review board” means an institutional review board established and conducted pursuant to 45 CFR 46.101 through CFR 46.117, as revised on October 1, 2008.

(2) “Person” shall mean a state university, a state agency, or a county health department.

(b) Each person with a proposal for a follow-up cancer study (“study”) shall submit the proposal to each of the following for approval before the commencement of the study:
   (1) The person’s institutional review board;
   (2) the department’s health and environmental institutional review board;
   (3) the university of Kansas medical center’s institutional review board;
   (4) the cancer registry data release board.

(c) Each study not approved by each board specified in subsection (b) shall be returned to the person for revisions. Any unapproved study may be resubmitted to each board.

(d) After receiving the approvals required in subsection (b) and before commencing the study, the person proposing the study shall submit the proposal for the study to the secretary or the secretary’s designee for approval.

(e) Each person conducting an approved study shall reimburse the cancer registry for all costs pertaining to the retrieval of confidential data. The cancer registry shall be credited by the person on any publication or presentation when the cancer registry data is used.

(f) Before proceeding with each study, the cancer registry director shall obtain informed consent from each individual who is the subject of the data or from that individual’s parent or legal guardian. The consent form shall accompany or follow the notice specified in subsection (g). Signing the consent form shall indicate that the individual has read and understands the information provided in the notice.

(g) The cancer registry director shall deliver a notice to each subject individual or the subject individual’s parent or legal guardian. Each notice shall include the following information:
   (1) All details of the study to be conducted, including the purpose, methodology, and public health benefit; and
   (2) the following information:
      (A) Participation in the study is voluntary;
      (B) the method of data collection will be at the convenience of the subject individual. Data will be collected in writing, by telephone, or by personal interview; and
   (C) the subject individual will be provided with a summary of the final report of the study. (Authorized by and implementing K.S.A. 2008 Supp. 65-1,172; effective June 12, 2009.)

**Article 72.—RESIDENTIAL CHILDHOOD LEAD POISONING PREVENTION PROGRAM**


**28-72-1a. Definitions.** In addition to the definitions in K.S.A. 65-1,201 and amendments thereto, each of the following terms shall have the meaning assigned in this regulation: (a) “Abatement project reinspection fee” means the sum of money assessed to a KDHE-licensed lead activity firm by KDHE when KDHE is unable to inspect an abatement project due to the fault of the lead activity firm or its personnel.

(b) “Accreditation” means approval by KDHE of a training provider for a training course to train individuals for lead-based paint activities.

(c) “Accredited course” means a course that has been approved by the department for the training of lead professionals.

(d) “Act” means the residential childhood lead poisoning prevention act, and amendments thereto.

(e) “Adequate quality control” means a plan or design that ensures the authenticity, integrity, and accuracy of samples, including dust, soil, and paint chip or paint film samples. Adequate quality control shall also include provisions for representative sampling.

(f) “Audit” means the monitoring by KDHE of a certified individual, a licensed lead activity firm, or an accredited training provider to ensure compliance with the act and this article. (Authorized by and implementing K.S.A. 65-1,202; effective April 9, 2010.)

**28-72-1c. Definitions.** In addition to the definitions in K.S.A. 65-1,201 and amendments thereto, each of the following terms shall have the meaning assigned in this regulation: (a) “Certified lead professional” means a person who is certified by the secretary as a lead inspector, elevated blood-lead level (EBL) investigator, lead abatement supervisor, lead abatement worker, project designer, or risk assessor.
(b) “Child-occupied facility” means a building, or portion of a building, constructed before 1978, that is visited regularly by the same child who is under six years of age on at least two different days within any calendar week. Sunday through Saturday, if each day’s visit lasts at least three hours, the combined weekly visits last at least six hours, and the combined annual visits last at least 60 hours. This term may include residences, day care centers, preschools, and kindergarten classrooms. Child-occupied facilities may be located in target housing or in public or commercial buildings. For common areas in public or commercial buildings that contain child-occupied facilities, the child-occupied facility encompasses only those common areas that are routinely used by children under the age of six, including restrooms and cafeterias.

(c) “Classroom training” means training devoted to lecture, learning activities, small group activities, demonstrations, evaluations, or any combination of these educational activities.

(d) “Clearance levels” means the following values indicating the maximum amount of lead permitted in dust on a surface following completion of each abatement activity or lead hazard control:
   (1) 40 micrograms per square foot on floors;
   (2) 250 micrograms per square foot on windowsills; and
   (3) 400 micrograms per square foot on window troughs.

(e) “Common area” means the portion of a building that is generally accessible to all occupants. This term may include the following:
   (1) Hallways;
   (2) stairways;
   (3) laundry and recreational rooms;
   (4) playgrounds;
   (5) community centers;
   (6) garages;
   (7) boundary fences; and
   (8) porches.

(f) “Component” and “building component” mean building construction products manufactured independently to be joined with other building elements to create specific architectural design or structural elements or to act as fixtures of a building, residential dwelling, or child-occupied facility. Components are distinguished from each other by form, function, and location. These terms shall include the following:
   (1) Interior components, including the following:
      (A) Ceilings;
      (B) crown moldings;
      (C) walls;
      (D) chair rails;
      (E) doors and door trim;
      (F) floors;
      (G) fireplaces;
      (H) radiators and other heating units;
      (I) shelves and shelf supports;
      (J) stair treads, risers, and stringers; newel posts; railing caps; and balustrades;
      (K) windows and trim, including sashes, window heads, jambs, sills, stools, and troughs;
      (L) built-in cabinets;
      (M) columns and beams;
      (N) bathroom vanities;
      (O) countertops;
      (P) air conditioners; and
      (Q) any exposed piping or ductwork; and
   (2) exterior components, including the following:
      (A) Painted roofing and chimneys;
      (B) flashing, gutters, and downspouts;
      (C) ceilings;
      (D) soffits and fascias;
      (E) rake boards, cornerboards, and bulkheads;
      (F) doors and door trim;
      (G) fences;
      (H) floors;
      (I) joists;
      (J) latticework;
      (K) railings and railing caps;
      (L) siding;
      (M) handrails;
      (N) stair risers, treads, and stringers;
      (O) columns and balustrades;
      (P) windowsills and window stools, troughs, casing, sashes, and wells; and
      (Q) air conditioners.

(g) “Containment” means a process to protect workers, residents, and the environment by controlling exposures to the lead-contaminated fumes, vapors, mist, dust, and debris created during lead abatement or lead hazard control.

(h) “Course agenda” means an outline of the main topics to be covered during a training course, including the time allotted to teach each topic.

(i) “Course exam blueprint” means written documentation identifying the proportion of course exam questions devoted to each major topic in the course curriculum.
(j) “Course test” means an evaluation of the overall effectiveness of the training, which shall test each trainee’s knowledge and retention of the topics covered during the course. (Authorized by and implementing K.S.A. 65-1,202; effective April 9, 2010.)

28-72-1d. Definitions. In addition to the definitions in K.S.A. 65-1,201 and amendments thereto, each of the following terms shall have the meaning assigned in this regulation: (a) “Department” means the Kansas department of health and environment.

(b) “Deteriorated paint” means paint that is cracking, flaking, chipping, chalking, peeling, or otherwise separating from the substrate of a building component.

(c) “Discipline” means one of the specific types or categories of lead-based paint activities identified in the act and this article in which individuals may receive training from accredited courses and become certified by the secretary.

(d) “Distinct painting history” means the application history over time, as indicated by the visual appearance or a record of application, of paint or other surface coatings to a component or room.

(e) “Documented methodologies” means the methods or protocols used to sample for the presence of lead in paint, dust, and soil. (Authorized by and implementing K.S.A. 65-1,202; effective April 9, 2010.)

28-72-1e. Definitions. In addition to the definitions in K.S.A. 65-1,201 and amendments thereto, each of the following terms shall have the meaning assigned in this regulation: (a) “Elevated blood lead level (EBL) child” and “EBL child” mean any child who has an excessive absorption of lead with a confirmed concentration of lead in whole blood of 10 \( \mu g/\text{dl} \) (micrograms) of lead per deciliter of whole blood, as specified in K.A.R. 28-1-18.

(b) “Encapsulant” means a substance that forms a barrier between lead-based paint and the environment using a liquid-applied coating, with or without reinforcement materials, or an adhesively bonded covering material.

(c) “Encapsulation” means the application of an encapsulant.

(d) “Enclosure” has the meaning specified in 40 CFR 745.223, as adopted in K.A.R. 28-72-2.

(e) “EPA” means the United States environmental protection agency. (Authorized by and implementing K.S.A. 65-1,202; effective April 9, 2010.)

28-72-1f. Definitions. In addition to the definitions in K.S.A. 65-1,201 and amendments thereto, the following term shall have the meaning assigned in this regulation:

“Guest instructor” means an individual who is designated by the training manager or principal instructor and who provides instruction specific to the lectures, hands-on work activities, or work practice components of a course. Each guest instructor shall be directly employed and monetarily compensated by the accredited training provider. A guest instructor shall not teach more than seven calendar days each quarter. Each guest instructor shall be KDHE-certified in the training course or in an associated advanced training course for which the guest instructor will be providing instruction. If a guest instructor is utilized, KDHE shall be notified at least 24 hours before the training course begins. (Authorized by and implementing K.S.A. 65-1,202; effective April 9, 2010.)

28-72-1g. Definition. In addition to the definitions in K.S.A. 65-1,201 and amendments thereto, the following term shall have the meaning assigned in this regulation:

“Hands-on skills assessment” means an evaluation of the effectiveness of the hands-on training that tests the ability of the trainees to demonstrate satisfactory performance and understanding of work practices and procedures as well as any other skills demonstrated in the course.

(b) “Hands-on training” means training that involves the actual practice of a procedure or the use of equipment, or both.

(c) “Hazardous waste” means any waste as defined in K.S.A. 65-3430, and amendments thereto.

(d) “HEPA vacuum” has the meaning specified in 40 CFR 745.83, as adopted in K.A.R. 28-72-2. (Authorized by and implementing K.S.A. 65-1,202; effective April 9, 2010.)

28-72-1h. Definitions. In addition to the definitions in K.S.A. 65-1,201 and amendments thereto, each of the following terms shall have the meaning assigned in this regulation: (a) “Interim controls” means a set of repair or maintenance activities designed to last less than 20 years that temporarily reduce human exposure or likely exposure to lead hazards, including the following:

(a) Repairing deteriorated lead-based paint;
(b) specialized cleaning;
(c) maintenance;
(d) painting;
(e) temporary containment;
(f) ongoing monitoring of lead hazards or potential hazards; and
(g) the establishment and operation of management and resident education programs. (Authorized by and implementing K.S.A. 65-1,202; effective April 9, 2010.)

**28-72-1k. Definition.** In addition to the definitions in K.S.A. 65-1,201 and amendments thereto, the following term shall have the meaning assigned in this regulation:

“KDHE” means the Kansas department of health and environment. (Authorized by and implementing K.S.A. 65-1,202; effective April 9, 2010.)

**28-72-1l. Definitions.** In addition to the definitions in K.S.A. 65-1,201 and amendments thereto, each of the following terms shall have the meaning assigned in this regulation:

(a) “Large-scale abatement project” means lead abatement for 10 or more residential dwellings or multifamily dwellings for 10 or more units.

(b) “Lead abatement” means any repair or maintenance activity or set of activities designed to last at least 20 years or to permanently eliminate lead-based paint hazards in a residential dwelling, child-occupied facility, or other structure designated by the secretary.

1. Lead abatement shall include the following:

   (A) The removal of lead-based paint and lead contaminated dust, the permanent enclosure or encapsulation of lead-based paint, the replacement of lead-painted surfaces or fixtures, and the removal or covering of lead-contaminated soil;
   (B) all preparation, cleanup, disposal, and post-abatement clearance testing activities associated with these measures;
   (C) any project for which there is a written contract or other documentation requiring an individual, firm, or other entity to conduct activities in any structure that are designed to permanently eliminate lead hazards;
   (D) any project resulting in the permanent elimination of lead hazards that is conducted by lead activity firms; and
   (E) any project resulting in the permanent elimination of lead hazards that is conducted in response to a lead hazard control order.

2. (A) Lead abatement shall not include renovation, remodeling, landscaping, and other activities if these activities are not designed to permanently eliminate lead hazards, but are designed to repair, restore, or remodel a given structure or dwelling, even though these activities could incidentally result in a reduction or an elimination of lead hazards.

   (B) Lead abatement shall not include operations and maintenance activities, and other measures and activities designed to temporarily, but not permanently, reduce lead-based paint hazards.

   (c) “Lead abatement supervisor” means an individual certified by the secretary to perform lead hazard control activities and to prepare occupant protection plans and abatement reports. Each applicant for a lead abatement supervisor shall meet all of the requirements specified in K.A.R. 28-72-8.

   (d) “Lead abatement worker” means an individual certified by the secretary and meeting all of the requirements specified in K.A.R. 28-72-7.

   (e) “Lead activity firm” means an individual or entity that meets all the requirements listed in K.A.R. 28-72-10.

   (f) “Lead-based paint hazard” means any condition that causes exposure to lead from lead-contaminated dust, lead-contaminated soil, or lead-based paint that is deteriorated or present in accessible surfaces, friction surfaces, or impact surfaces and that would result in adverse human health effects.

   (g) “Lead-based paint inspection” means any effort to identify lead concentrations in surface coatings by means of a surface-by-surface investigation and the provision of a written report explaining the results of the investigation. The inspection shall not include any attempt to determine lead concentrations in soil, water, or dust.

   (h) “Lead-based paint inspector” means an individual certified by the secretary to perform any efforts to identify lead concentrations in surface coatings by means of a surface-by-surface investigation. Each applicant for a lead-based paint inspector shall meet all of the requirements specified in K.A.R. 28-72-5.

   (i) “Lead-contaminated dust” means surface dust in residential dwellings or child-occupied facilities that contains 40 micrograms per square foot or more on uncarpeted floors, 250 micrograms per square foot or more on windowsills, and 400 micrograms per square foot or more on win-
dow troughs or any other surface dust levels evidenced by research and determined by the secretary as contaminated.

(j) "Lead-contaminated soil" means bare soil on residential real property and on the property of a child-occupied facility that contains lead in excess of 400 parts per million for areas where child contact is likely and in excess of 1,200 parts per million in the rest of the yard, or any other lead in soil levels evidenced by research and determined by the secretary as contaminated.

(k) "Lead hazard" means any lead source that is readily accessible to humans in, on, or adjacent to a residential property, including paint, as defined in these regulations, in any condition, contaminated soils, dust, or any other item that contains lead in any amount and has been identified through an environmental investigation or risk assessment as a source of lead that could contribute to the lead poisoning of an individual.

(l) "Lead hazard control" means any activity implemented to control known or assumed lead hazards on or in any structure covered by this act. All implemented lead hazard control activities, at a minimum, shall utilize lead-safe work practices and shall be subject to work practice inspections by the KDHE.

(m) "Lead hazard control notice" means the written notification to compel the owner of a child-occupied facility that has been identified by the secretary as the major contributing cause of poisoning an EBL child to eliminate or remediate the lead hazards to make the child-occupied facility safe from continued exposure to lead hazards.

(n) "Lead hazard screen" means a limited risk assessment activity that involves limited deteriorated paint and dust sampling as described in K.A.R. 28-72-13 and K.A.R. 28-72-15. In target housing or a child occupied facility, at least two samples shall be taken from the floors and at least one sample shall be taken from the windows in all of the rooms where one or more children could have access. Additionally, in multifamily dwellings and child-occupied facilities, dust samples shall be taken from any common areas where one or more children have access.

(o) "Lead inspector" means an individual certified by the secretary to perform a surface-by-surface investigation on a structure to determine the presence of lead-based paint and provide a written report explaining the results of the investigation as specified in K.A.R. 28-72-14.

(p) "Lead-safe work practices" means work practices standards established to work safely with lead-based surface coatings as presented in the joint EPA-HUD curriculum titled "lead safety for remodeling, repair, & painting," excluding the appendices, dated June 2003 and hereby adopted by reference, or an equivalent KDHE-approved curriculum.

(q) "Living area" means any area or room equivalent, as defined in the HUD "guidelines for the evaluation and control of lead-based paint hazards in housing," which is adopted by reference in K.A.R. 28-72-13. This term shall include any porch of a residential dwelling used by at least one child who is six years of age and under or by a woman of childbearing age.

(r) "Local government" means a county, city, town, district, association, or other public body, including an agency comprised of two or more of these entities, created under state law. (Authorized by and implementing K.S.A. 65-1,202; effective April 9, 2010.)

28-72-1m. Definition. In addition to the definitions in K.S.A. 65-1,201 and amendments thereto, the following term shall have the meaning assigned in this regulation:

"Multifamily dwelling" means a structure that contains more than one separate residential dwelling unit used or occupied, or intended to be used or occupied, in whole or in part as the residence of one or more persons. (Authorized by and implementing K.S.A. 65-1,202; effective April 9, 2010.)

28-72-1n. Definition. In addition to the definitions in K.S.A. 65-1,201 and amendments thereto, the following term shall have the meaning assigned in this regulation:

"Nonprofit" means an entity that has been determined by the IRS to be not-for-profit as evidenced by a "letter of determination" designating the tax code under which the entity operates. (Authorized by and implementing K.S.A. 65-1,202; effective April 9, 2010.)

28-72-1o. Definitions. In addition to the definitions in K.S.A. 65-1,201 and amendments thereto, each of the following terms shall have the meaning assigned in this regulation: (a) "Occupant protection plan" means a plan developed by a lead abatement supervisor or project designer before the commencement of lead abatement or lead hazard control in any structure designated by
Definitions. In addition to the definitions in K.S.A. 65-1,201 and amendments thereto, each of the following terms shall have the meaning assigned in this regulation: (a) “Paint” means all types of surface coatings, including stain, varnish, epoxy, shellac, polyurethane, and sealants.

(b) “Passing score” means a grade of 80% or higher on the third-party examination and training course examination for a lead occupation certificate.

(c) “Permanently covered soil” means soil that has been separated from human contact by the placement of a barrier consisting of solid, relatively impermeable materials, including pavement and concrete. Soil covered with grass, mulch, and other landscaping materials shall not be deemed permanently covered soil.

(d) “Principal instructor” means an individual who meets the following requirements:

(1) Is directly employed and monetarily compensated by a training provider;

(2) is certified to perform the lead occupation in which the individual will provide instruction or has obtained certification in an advanced lead occupation; and

(3) has the primary responsibility for organizing and teaching a training course.

(e) “Project design” means lead abatement project designs, lead hazard control project designs, occupant protection plans, and lead abatement reports. (Authorized by and implementing K.S.A. 65-1,202; effective April 9, 2010.)
months reside or are expected to reside in the housing built exclusively for the elderly, the housing shall be assumed to have been constructed before 1978 unless empirical data proves otherwise. This term shall include schools and any structure used for the care of children under six years of age.

(b) “Third-party examination” means a discipline-specific examination administered by the department to test the knowledge of a person who has completed the required training course and is applying for certification in a particular discipline.

(c) “Training course” means the approved course of instruction established by this article to prepare an individual for certification in a single discipline.

(d) “Training curriculum” means a set of course topics for instruction by a training provider for a particular occupation designed to provide specialized knowledge and skills.

(e) “Training hour” means at least 50 minutes of actual time used for learning, including time devoted to lectures, learning activities, small group activities, demonstrations, evaluations, and hands-on experience.

(f) “Training manager” means the individual who is a direct and monetarily compensated employee of a training provider, is subject to the employment standards of the Fair Labor Standards Act, and is responsible for administering a training program and monitoring the performance of principal instructors and guest instructors.

(g) “Training provider” means a person or entity who has met the requirements of K.A.R. 28-72-4 and provides training courses for the purpose of state certification or certification renewal in the occupations of lead-safe work practices, lead abatement worker, lead abatement supervisor, lead-based paint inspector, risk assessor, and project designer. (Authorized by and implementing K.S.A. 65-1,202; effective April 9, 2010.)

28-72-1x. Definition. In addition to the definitions in K.S.A. 65-1,201 and amendments thereto, the following term shall have the meaning assigned in this regulation:

“X-ray fluorescence analyzer (XRF)” means an instrument that determines lead concentration in milligrams per square centimeter (mg/cm²) using the principle of X-ray fluorescence. (Authorized by and implementing K.S.A. 65-1,202; effective April 9, 2010.)

28-72-2. General requirements for accreditation, licensure, and certification; adoption by reference. (a) Waiver. Any applicant for certification and any certified individual may authorize others, including the applicant’s or individual’s employer, to act on the applicant’s or individual’s behalf regarding the certification application. This authorization shall be indicated on the application form provided by KDHE. If at any time the applicant or certified individual decides to change this authorization, the applicant or certified individual shall notify KDHE in writing of the change.

(b) Change of address. Each certified individual shall notify KDHE in writing of a change of mailing address no later than 30 days following the change. Each lead activity firm shall notify KDHE in writing of a change in business mailing address no later than 30 days following the change. Until a change of address is received, all correspondence shall be mailed to the individual’s mailing address and the lead activity firm’s business address indicated on the most recent application form.

(c) Prior out-of-state certification. A lead occupation certificate may be issued by the secretary to any person if both of the following conditions are met:

(1) The person meets the following requirements:

(A) Has submitted a complete application;

(B) has taken the required third-party exam for the discipline applied for and received a passing score; and

(C) has provided proof of certification from another state, if KDHE has entered into an agreement with that state or if that state is a current EPA program state.

(2) All individual certification fees have been paid.
(d) Adoption by reference.
(1) 40 CFR 745.80 through 745.90, as in effect on July 1, 2008, are adopted by reference, except as specified in paragraph (d)(2). For the purpose of this regulation, each reference in the adopted CFRs to “EPA” shall mean “KDHE,” and each reference to “administrator” shall mean “secretary.”

(2) The following portions of 40 CFR 745.80 through 40 CFR 745.90 are not adopted:
   (A) 40 CFR 745.81 and 40 CFR 745.82(c);
   (B) in 40 CFR 745.83, the following terms and their definitions: child occupied facility, component or building component, interim controls, recognized test kit, renovator, and training hour;
   (C) 40 CFR 745.85(a)(3)(iii). The use of a heat gun to remove lead-based paint shall not be allowed;
   (D) 40 CFR 745.86(b)(6) and (c);
   (E) 40 CFR 745.87;
   (F) 40 CFR 745.88;
   (G) 40 CFR 745.89;
   (H) 40 CFR 745.90(a), (b)(6), and (c);
   (I) 40 CFR 745.91; and

28-72-3. Fees. The following fees shall apply: (a) Training providers. A separate accreditation fee shall be required for each training course. If a training course is taught in more than one language, a separate accreditation fee shall be required for each of these versions of the training course.

   (1) Accreditation fee ................. $500
   (2) Initial fee.
      (A) Lead abatement supervisor, lead abatement worker, and project designer courses .................. $1,000
      (B) Risk assessor and lead inspector courses ........................................... $1,000
      (C) Lead-safe work practices .............. $300
   (3) Refresher course fee.
      (A) Lead abatement supervisor, lead abatement worker, and project designer courses .................. $500
      (B) Risk assessor and lead inspector courses ........................................... $500
      (C) Lead-safe work practices .............. $150
      (4) Reaccreditation fee .................. $500

      (A)(i) Reaccreditation for lead abatement supervisor, lead abatement worker, and project designer courses ............... $1,000
      (ii) Reaccreditation for risk assessor and inspector courses .................. $1,000

      (B)(i) Refresher reaccreditation for lead abatement supervisor, lead abatement worker, and project designer courses .................. $500
      (ii) Refresher reaccreditation for risk assessor and lead inspector courses ...... $500

   (b) Lead inspector.
      (1) Individual certification .................. $200
      (2) Individual recertification ............. $100
      (c) Risk assessor.
      (1) Individual certification .................. $300
      (2) Individual recertification ............. $150

   (d) Lead abatement supervisor.
      (1) Individual certification ............... $150
      (2) Individual recertification ............ $75

   (e) Project designer.
      (1) Individual certification .................. $150
      (2) Individual recertification ............. $75

   (f) Lead abatement worker.
      (1) Individual certification ............... $50
      (2) Individual recertification ............ $25

   (g) Renovator.
      (1) Individual certification ............... $0
      (2) Individual recertification ............. $0

   (h) Third-party examination ................. $50

   (i) Lead activity firm.
      (1) License ................................ $500
      (2) License renewal ........................ $250
      (3) Lead abatement project fee ... 1% of each project or $50, whichever is greater

      (4) Abatement project reinspection fee .................. $150

   (j) Renovation firm.
      (1) License ................................ $200
      (2) License renewal ........................ $100


28-72-4. Training provider accreditation. (a) Good standing. Each applicant wishing to provide and teach lead activity training in Kansas shall be accredited as a training provider and
licensed by KDHE as a lead activity firm. Each applicant desiring accreditation of the training courses for lead inspector, risk assessor, lead abatement worker, lead abatement supervisor, project designer, or lead-safe work practices, or any combination, under this regulation, who is required to be registered and in good standing with the Kansas secretary of state’s office, shall submit a copy of the applicant’s certificate of good standing to KDHE.

(b) Application to become a training provider for a training course. Completed applications shall be submitted to KDHE. Each application shall include the following:

(1) A completed training provider course accreditation application on a form provided by KDHE, which shall include the following:

(A) The training provider’s name, address, and telephone number;

(B) the lead activity firm license number;

(C) the name and date of birth of the training manager;

(D) the name and date of birth of the principal instructor for each course;

(E) the name and date of birth for any guest instructor for each course;

(F) a list of locations at which training will take place;

(G) a list of courses for which the training provider is applying for accreditation; and

(H) a statement signed by the training manager certifying that the information in the application for accreditation, and any additional information included with the application, is true and accurate to the best of the training manager’s knowledge and understanding, that the training provider will comply with K.A.R. 28-72-4 through K.A.R. 28-72-4c, and that the training provider will conduct lead training only in those occupations in which the training provider has received accreditation;

(2) a copy of the student and instructor manuals;

(3) the course agenda;

(4) the course examination blueprint;

(5) a copy of the quality control plan as described in paragraph (d)(9) of this regulation;

(6) a copy of a sample course completion diploma as described in paragraph (d)(8) of this regulation;

(7) a description of the facilities and equipment to be used for lectures and hands-on training;

(8) a description of the activities and procedures that will be used for conducting the skills assessment for each course;

(9) a payment to KDHE for the applicable non-refundable accreditation fees specified in K.A.R. 28-72-3, unless the training provider is a state, federally recognized Indian tribe, local government, or nonprofit organization as evidenced by a letter of determination issued by the IRS, which shall accompany the application; and

(10) documentation supporting the training manager’s, principal instructor’s, and any guest instructor’s qualifications.

(c) Procedure for issuance or denial of training provider accreditation for a training course. The applicant shall be informed by KDHE in writing that the application is approved, incomplete, or denied.

(1) If an application is incomplete, the notice shall include a list of additional information or documentation required to complete the application.

(A) Within 30 calendar days after the issuance date of the notice of incomplete application, the applicant shall submit to KDHE, in writing, the information requested in the written notice.

(B) Failure to submit the information requested in the written notice within 30 calendar days shall result in denial of the application for a training course accreditation.

(C) After the information in the written notice is received, the applicant shall be informed by KDHE in writing that the application is either approved or denied.

(2) If an application is approved, a two-year accreditation certificate shall be issued by KDHE.

(3) If an application for training course accreditation is denied, the specific reason or reasons for the denial shall be stated in the notice of denial to the applicant.

(A) Training course accreditation may be denied by the secretary pursuant to K.S.A. 65-1,207(c), and amendments thereto.

(B) If an application is denied, the applicant may reapply for accreditation at any time.

(C) If an applicant is aggrieved by a determination to deny accreditation, the applicant may request a hearing with the office of administrative hearings, in accordance with the Kansas administrative procedure act.

(d) Requirements for accreditation of a training provider for a training course. For a training provider to maintain accreditation from KDHE to of-
fer a training course, the training provider shall meet the following requirements:

(1) Training manager. The training manager shall be a monetarily compensated direct employee of the training provider who meets the requirements in subsection (e). The training manager shall be responsible for ensuring that the training provider complies at all times with the requirements in these regulations. The training manager may designate guest instructors as needed to provide instruction specific to the lecture, hands-on activities, or work practice components of a course. The training manager shall ensure that each guest instructor meets the requirements in subsection (f).

(2) Principal instructor. The training provider, in coordination with the training manager, shall designate a qualified principal instructor who meets the requirements in subsection (f). The principal instructor shall be responsible for the organization of the course and oversight of the teaching of all course materials. The principal instructor shall be present during all classes or presentations given by any guest instructor.

(3) Guest instructor. The training manager may designate a guest instructor on an as-needed basis. No guest instructor shall be allowed to teach an entire training course. Each guest instructor shall meet the requirements in subsection (f).

(4) Training provider. The training provider shall meet the curriculum requirements in K.A.R. 28-72-4a for each course contained in the application for accreditation of a training provider.

(5) Delivery of course. The training provider shall ensure the availability of, and provide adequate facilities for, the delivery of the lecture, course exam, hands-on training, and assessment activities. This requirement shall include providing training equipment that reflects current work practice standards in K.A.R. 28-72-13 through K.A.R. 28-72-21 and maintaining or updating the course materials, equipment, and facilities as needed.

(6) Course exam. For each course offered, the training provider shall conduct a monitored, written course exam at the completion of each course. An oral exam may be administered in lieu of a written course exam for the lead abatement worker course only. If an oral examination is administered, the student shall be required to provide the answers to the exam in writing.

(A) The course exam shall evaluate each trainee’s competency and proficiency.

(B) Each individual shall be required to achieve a passing score on the course exam in order to successfully complete any course and receive a course completion diploma.

(C) The training provider and the training manager shall be responsible for maintaining the validity and integrity of the course exam to ensure that the exam accurately evaluates each trainee’s knowledge and retention of the course topics.

(7) Hands-on skills assessment. For each course offered, except for project designers, the training provider shall conduct a hands-on skills assessment. The training manager shall maintain the validity and integrity of the hands-on skills assessment to ensure that the assessment accurately evaluates each trainee’s performance of the work practice procedures associated with the course topics.

(8) Course completion diploma. The training provider shall issue a unique course completion diploma to each individual who passes the training course. Each course completion diploma shall include the following:

(A) The name, a unique identification number, and the address of the individual;

(B) the name of the particular course that the individual completed;

(C) the dates of course attendance; and

(D) the name, address, and telephone number of the training provider.

(9) Quality control plan. The training manager shall develop and implement a quality control plan. The plan shall be used to maintain or progressively improve the quality of the accredited provider.

(A) This plan shall contain at least the following elements:

(i) Procedures for periodic revision of training materials and the course exam to reflect innovations in the field;

(ii) procedures for the training manager’s annual review of the competency of the principal instructor; and

(iii) a review to ensure the adequacy of the facilities and equipment.

(B) An annual report discussing the results of the quality control plan shall be submitted to KDHE within one year following accreditation and at each subsequent renewal.

(10) Access by KDHE. The training provider shall allow KDHE to conduct audits as needed in order for KDHE to evaluate the training provider’s compliance with KDHE accreditation.
requirements. During this audit, the training provider shall make available to KDHE all information necessary to complete the evaluation. At KDHE’s request, the training provider shall also make documents available for photocopying.

(11) Recordkeeping. The training provider shall maintain at its principal place of business, for at least five years, the following records:

(A) All documents specified in paragraphs (e)(2) and (f)(2) that demonstrate the qualifications listed in paragraph (e)(1) for the training manager, and paragraph (f)(1) for the principal instructor and any guest instructor;

(B) curriculum or course materials, or both, and documents reflecting any changes made to these materials;

(C) the course examination and blueprint;

(D) information regarding how the hands-on skills assessment is conducted, including the following:
   (i) The name of the person conducting the assessment;
   (ii) the criteria for grading skills;
   (iii) the facilities used;
   (iv) the pass and fail rate; and
   (v) the quality control plan as described in paragraph (d)(9);

(E) results of the students’ hands-on skills assessments and course exams, and a record of each student’s course completion diploma; and

(F) any other material not listed in this paragraph (d)(11) that was submitted to KDHE as part of the training provider’s application for accreditation.

(12) Course notification. The training provider shall notify KDHE in writing at least 14 calendar days before conducting an accredited training course.

(A) Each notification shall include the following information:
   (i) The location of the course, if it will be conducted at a location other than the training provider’s training facility;
   (ii) the dates and times of the course;
   (iii) the name of the course; and
   (iv) the name of the principal instructor and any guest instructors conducting the course.

(B) If the scheduled training course has been changed or canceled, the training provider shall notify KDHE in writing at least 24 hours before the training course was scheduled to begin.

(13) Changes to a training course. Before any of the following changes is made to a training course, that change shall be submitted in writing to KDHE for review and approval before the continuation of the training course:

(A) The course curriculum;

(B) the course examination;

(C) the course materials;

(D) the training manager, principal instructors, or guest instructors; or

(E) the course completion diploma.

Within 60 calendar days after receipt of a change to a training course, the provider shall be informed by KDHE in writing that the change is either approved or disapproved. If the change is approved, the training provider shall include the change in the training course. If the change is disapproved, the training provider shall not include the change in the training course.

(14) Change of ownership. If a training provider changes ownership, the new owner shall notify KDHE in writing at least 30 calendar days before the change of ownership becomes effective. The notification shall include a new training course provider accreditation application, the appropriate fee or fees, and the date that the change of ownership will become effective. The new training course provider accreditation application shall be processed according to this regulation. The current training provider’s accreditation shall expire on the effective date specified in the notification of the change of ownership.

(15) Change of address. The training provider shall submit to KDHE a written notice of the training provider’s new address and telephone number, and a description of the new training facility. The training provider shall submit this information to KDHE not later than 30 days before relocating its business or transferring its records.

(e) Training, education, and experience requirements for the training manager.

(1) The education or experience requirements for the training manager shall include one year of experience in lead or asbestos abatement, painting, carpentry, renovation, remodeling, safety and health, or industrial hygiene, and at least one of the following:

(A) A minimum of two years of experience in teaching or training adults;

(B) a bachelor’s or graduate degree in building construction technology, engineering, industrial hygiene, safety, public health, business administration, or education; or

(C) a minimum of two years of experience in
managing a training program specializing in environmental hazards.

(2) The following records of experience and education shall be recognized by KDHE as evidence that the individual meets or exceeds KDHE requirements for a training manager:

(A) Resumes, letters of reference from past employers, or documentation to evidence past experience that includes specific dates of employment, the employer’s name, address, telephone number, and specific job duties, as evidence of meeting the experience requirements; and

(B) official academic transcripts or diplomas, as evidence of meeting the education requirements.

(f) Training, education, and experience requirements for the principal instructor and any guest instructor.

(1) The training, education, and experience requirements for the principal instructor and any guest instructor of a training course shall include the following:

(A) At least one year of experience in teaching or training adults; and

(B) at least one year of experience in lead or asbestos abatement, painting, carpentry, renovation, remodeling, occupational safety and health, or industrial hygiene, or an associate degree or higher from a postsecondary educational institution in building construction technology, engineering, safety, public health, or industrial hygiene.

(2) The following records of experience and education shall be recognized by KDHE as evidence that the individual meets or exceeds KDHE requirements for a principal instructor:

(A) Course completion diplomas issued by the training provider as evidence of meeting the training requirements and a current copy of the KDHE certification for the disciplines that the principal instructor desires to teach;

(B) official academic transcripts or diplomas, as evidence of meeting the education requirements; and

(C) resumes, letters of reference from past employers, or documentation to evidence past experience that includes specific dates of employment, the employer’s name, address, telephone number, and specific job duties, as evidence of meeting the experience requirements.

(g) (1) Training provider accreditation may be suspended or revoked by the secretary pursuant to K.S.A. 65-1.207(c), and amendments thereto.

(2) Before suspending or revoking a training provider’s accreditation, a training provider shall be given written notice of the reasons for the suspension or revocation. The training provider may request a hearing with the office of administrative hearings, in accordance with the Kansas administrative procedure act.

(h) Renewal of accreditation.

(1) Unless revoked sooner, a training provider’s accreditation shall expire two years after the date of issuance. If a training provider meets the requirements of this regulation and K.A.R. 28-72-4a, the training provider shall be reaccredited.

(2) Each training provider seeking reaccreditation shall submit an application to KDHE at least 60 calendar days before the provider’s accreditation expires. If a training provider does not submit its application for reaccreditation by that date, the provider’s reaccreditation before the end of the accreditation period shall not be guaranteed by KDHE.

(3) The training provider’s application for reaccreditation shall contain the following:

(A) A completed training provider course accreditation application on a form provided by KDHE, which shall include the following:

(i) The training provider’s name, address, and telephone number;

(ii) the name and date of birth of the training manager;

(iii) the name and date of birth of the principal instructor for each course;

(iv) a list of locations at which training will take place;

(v) a list of courses for which the training provider is applying for reaccreditation; and

(vi) a statement signed by the training manager certifying that the information provided in the application for reaccreditation, and any additional information included with the application, is true and accurate to the best of the training manager’s knowledge and understanding, that the training provider will comply with K.A.R. 28-72-4 and K.A.R. 28-72-4a, and that the training provider will conduct lead training only in those occupations in which the training provider has received accreditation;

(B) a list of courses for which the training provider is applying for reaccreditation;

(C) a description of any changes to the training facility, equipment, or course materials since the training provider’s last application was approved that adversely affects the students’ ability to learn; and
(D) a payment to KDHE for the nonrefundable fees specified in K.A.R. 28-72-3, as applicable, unless the training provider is a state, federally recognized Indian tribe, local government, or nonprofit organization as evidenced by a letter of determination issued by the IRS, which shall accompany the application.

(i) If the training provider has allowed its accreditation to expire and the provider desires to be accredited, it shall reapply in the same manner as that required for an application for an original accreditation in accordance with this regulation.


28-72-4a. Curriculum requirements for training providers. (a)(1) Each training provider of a lead inspector training course shall ensure that the lead inspector training course curriculum includes, at a minimum, 16 hours of classroom training and eight hours of hands-on training.

(2) Each lead inspector training course shall include, at a minimum, the following course topics:

(A) The role and responsibilities of an inspector;
(B) background information on lead, including the history of lead use and sources of environmental lead contamination;
(C) the health effects of lead, including the following:
   (i) The ways that lead enters and affects the body;
   (ii) the levels of concern; and
   (iii) symptoms, diagnosis, and treatments;
(D) the regulatory background and an overview of lead in applicable state and federal guidelines or regulations pertaining to lead-based paint, including the current version of each of the following:
   (i) 40 CFR part 745;
   (ii) U.S. HUD guidelines for the evaluation and control of lead-based paint hazards in housing as adopted in K.A.R. 28-72-13;
   (iii) 29 CFR 1910.1200;
   (iv) 29 CFR 1926.62; and
   (v) title X: the residential lead-based paint hazard reduction act of 1992;
(E) the regulations in this article pertaining to lead licensure, the Kansas work practice standards for lead-based paint activities specific to lead inspection activities, K.A.R. 28-72-2, and K.A.R. 28-72-51 through 28-72-54;
(F) quality control and assurance procedures in testing analysis;
(G) legal liabilities and obligations; and
(H) recordkeeping.

(3) Each lead inspector training course shall also include, at a minimum, the following course topics, the presentation of which shall require hands-on training as an integral component of the course:

(A) Lead-based paint inspection methods, including the selection of rooms and components for sampling or testing;
(B) preinspection planning and review, including developing a schematic site plan and determining inspection criteria and locations to collect samples in single-family and multifamily housing;
(C) paint, dust, and soil sampling methodologies, including the following:
   (i) soil sample collection, including soil sampling techniques, the number and location of soil samples, and interpretation of soil sampling results; and
   (ii) dust sample collection techniques, including the number and location of wipe samples and the interpretation of test results;
(D) clearance standards and testing, including random sampling; and
(E) preparation of the final inspection report.

(b) Each training provider of a risk assessor training course shall ensure that the risk assessor training course curriculum includes, at a minimum, 12 hours of classroom training and four hours of hands-on training.

(1) Each risk assessor training course shall include, at a minimum, the following course topics:

(A) The role and responsibilities of the risk assessor;
(B) the collection of background information to perform a risk assessment, including information on the age and history of the housing and occupancy by children under six years of age and women of childbearing age;
(C) sources of environmental lead contamination, including paint, surface dust and soil, water, air, packaging, and food;
(D) the regulations in this article pertaining to
lead certification, Kansas work practice standards for lead-based paint specific to risk assessment activities, K.A.R. 28-72-2, and K.A.R. 28-72-51 through 28-72-54;

(E) development of hazard control options, the role of interim controls, and operations and maintenance activities to reduce lead-based paint hazards; and

(F) legal liabilities and obligations specific to a risk assessor.

(2) Each risk assessor training course shall also include, at a minimum, the following course topics, the presentation of which shall require hands-on training as an integral component of the course:

(A) Visual inspection for the purposes of identifying potential sources of lead hazards;
(B) lead-hazard screen protocols;
(C) sampling for other sources of lead exposure, including drinking water;
(D) interpretation of lead-based paint and other lead sampling results related to the Kansas clearance standards; and

(E) preparation of a final risk assessment report.

(c) Each training provider of a lead abatement worker course shall ensure that the lead abatement worker training course curriculum includes, at a minimum, 16 hours of classroom training and eight hours of hands-on training.

(1) Each lead abatement worker training course shall include, at a minimum, the following course topics:

(A) The role and responsibilities of a lead abatement worker;
(B) background information on lead, including the history of lead use and sources of environmental lead contamination;
(C) the health effects of lead, including the following:
   (i) The ways that lead enters and affects the body;
   (ii) the levels of concern; and
   (iii) symptoms, diagnosis, and treatments;
(D) the regulatory background and an overview of lead in applicable state and federal guidelines or regulations pertaining to lead-based paint, including the current version of each of the following:
   (i) 40 CFR part 745;
   (ii) U.S. HUD guidelines for the evaluation and control of lead-based paint hazards in housing;
   (iii) 29 CFR 1910.1200;

(iv) 29 CFR 1926.62; and
(v) title X: the residential lead-based paint hazard reduction act of 1992;

(E) the regulations in this article pertaining to lead certification, the Kansas work practice standards for lead-based paint activities specific to lead abatement activities, K.A.R. 28-72-2, and K.A.R. 28-72-51 through 28-72-54; and

(F) waste disposal techniques.

(2) Each lead abatement training course shall also include, at a minimum, the following course topics, the presentation of which shall require hands-on training as an integral component of the course:

(A) Personal protective equipment information, including respiratory equipment selection, air-purifying respirators, care and cleaning of respirators, respiratory program, protective clothing and equipment, and hygienic practices;
(B) lead hazard recognition and control, including site characterization, exposure measurements, medical surveillance, and engineering controls;
(C) preabatement set-up procedures, including containment for residential and commercial buildings and for superstructures;
(D) lead abatement and lead-hazard reduction methods for residential and commercial buildings and for superstructures, including prohibited practices;
(E) interior dust abatement methods and cleanup techniques; and
(F) soil and exterior dust abatement methods.

(d) Each training provider of a lead abatement supervisor training course shall ensure that the lead abatement supervisor training course curriculum includes, at a minimum, 28 hours of classroom training and 12 hours of hands-on training.

(1) Each lead abatement supervisor training course shall include, at a minimum, the following course topics:

(A) The role and responsibilities of a supervisor;
(B) background information on lead, including the history of lead use and sources of environmental lead contamination;
(C) the health effects of lead, including the following:
   (i) The ways that lead enters and affects the body;
   (ii) the levels of concern; and
   (iii) symptoms, diagnosis, and treatments;
(D) the regulatory background and an overview of lead in applicable state and federal guidelines or regulations pertaining to lead-based paint, including the current version of each of the following:
   (i) 40 CFR part 745;
   (ii) U.S. HUD guidelines for the evaluation and control of lead-based paint hazards in housing;
   (iii) 29 CFR 1910.1200;
cluding the current version of each of the following:

(i) 40 CFR part 745;
(ii) U.S. HUD guidelines for the evaluation and control of lead-based paint hazards in housing;
(iii) 29 CFR 1910.1200;
(iv) 29 CFR 1926.62; and
(v) title X: the residential lead-based paint hazard reduction act of 1992;

(E) liability and insurance issues relating to lead abatement;

(F) the community relations process;

(G) hazard recognition and control techniques, including site characterization, exposure measurements, material identification, safety and health planning, medical surveillance, and engineering controls;

(H) the regulations in this article pertaining to lead certification and to the Kansas work practice standards for lead-based paint activities specific to lead abatement activities;

(I) clearance standards and testing;

(J) cleanup and waste disposal; and

(K) recordkeeping.

(2) Each lead abatement supervisor training course shall also include, at a minimum, the following course topics, the presentation of which shall require hands-on training as an integral component of the course:

(A) Cost estimation;

(B) risk assessment and inspection report interpretation;

(C) the development and implementation of an occupant protection plan and pre-abatement work plan, including containment for residential and commercial buildings and for superstructures;

(D) lead hazard recognition and control;

(E) personal protective equipment information, including respiratory equipment selection, air-purifying respirators, care and cleaning of respirators, respiratory program, protective clothing and equipment, and hygienic practices;

(F) lead abatement and lead-hazard reduction methods, including prohibited practices, for residential and commercial buildings and superstructures;

(G) project management, including supervisory techniques, contractor specifications, emergency response planning, and blueprint reading;

(H) interior dust abatement and cleanup techniques;

(I) soil and exterior dust abatement methods; and

(J) the preparation of an abatement report.

(e) Each training provider of a project designer training course shall ensure that the project designer training course curriculum includes, at a minimum, eight hours of classroom training. Each project designer training course shall include, at a minimum, the following course topics:

(1) The role and responsibilities of a project designer;

(2) the development and implementation of an occupant protection plan for large-scale abatement projects;

(3) lead abatement and lead-hazard reduction methods, including prohibited practices, for large-scale abatement projects;

(4) interior dust abatement or cleanup or lead-hazard control, and reduction methods for large-scale abatement projects;

(5) soil and exterior dust abatement methods for large-scale abatement projects;

(6) clearance standards and testing for large-scale abatement projects;

(7) integration of lead abatement methods with modernization and rehabilitation projects for large-scale abatement projects; and


28-72-4c. Training provider accreditation; refresher training course. (a) Application for accreditation of a training provider for a refresher training course. A training provider may seek accreditation to offer refresher training courses in any occupation. To obtain KDHE accreditation to offer refresher training courses, each training provider shall meet the following minimum requirements:

(1) Each refresher course shall review the curriculum topics of the full-length courses listed in K.A.R. 28-72-4a as appropriate. In addition, each training provider shall ensure that the refresher course of study includes, at a minimum, the following:

(A) An overview of current safety practices relating to lead-based paint activities in general, as
well as specific information pertaining to the appropriate occupation;

(B) current laws and regulations relating to lead-based paint activities in general, as well as specific information pertaining to the appropriate occupation; and

(C) current technologies relating to lead-based paint activities in general, as well as specific information pertaining to the appropriate occupation.

(2) Each refresher course, except for the project designer course and the lead-safe work practices course, shall last at least eight training hours. The project designer and lead-safe work practices refresher courses shall last at least four training hours.

(3) For each refresher training course offered, the training provider shall conduct a hands-on assessment, if applicable.

(4) For each refresher training course offered, the training provider shall conduct a course exam at the completion of the course.

(b) Any training provider may apply for accreditation of a refresher training course concurrently with its application for accreditation of the corresponding training course as described in K.A.R. 28-72-4. If the training provider submits both applications concurrently, the procedures and requirements specified in K.A.R. 28-72-4 shall be used by KDHE for accreditation of the refresher course and the corresponding training course.

(c) Each training provider seeking accreditation to offer only refresher training courses shall submit a written application to KDHE, which shall include the following:

(1) A completed training course accreditation application on a form provided by KDHE, which shall include the following:

(A) The training provider’s name, address, and telephone number;

(B) the name and date of birth of the training manager;

(C) the name and date of birth of the principal instructor for each course;

(D) a list of locations at which training will take place;

(E) a list of courses for which the training provider is applying for accreditation; and

(F) a statement signed by the training manager certifying that the information provided in the application for accreditation, and any additional information included with the application, is true and accurate to the best of the training manager’s knowledge and understanding, that the training provider will comply with K.A.R. 28-72-4 through K.A.R. 28-72-4c, and that the training provider will conduct lead training only in those occupations in which the training provider has received accreditation;

(2) a copy of the student and instructor manuals;

(3) the course agenda;

(4) the course examination blueprint;

(5) a copy of the quality control plan as described in K.A.R. 28-72-4(d)(9);

(6) a copy of a sample course completion diploma as described in K.A.R. 28-72-4(d)(8);

(7) a description of the facilities and equipment to be used for lecture and hands-on training; and

(8) a payment to KDHE for the applicable non-refundable reaccreditation fees, unless the training provider is a state, federally recognized Indian tribe, local government, or nonprofit organization as evidenced by a letter of determination issued by the IRS, which shall accompany the application.

(d) The following shall apply to each training provider applying for the accreditation of refresher training courses:

(1) The good standing requirements in K.A.R. 28-72-4(a);

(2) the procedures for training provider accreditation issuance or denial in K.A.R. 28-72-4(c);

(3) the requirements for accreditation of a training provider for a training course;

(4) the training, education, and the experience requirements for training managers and principal instructors in K.A.R. 28-72-4(e) and (f); and

(5) the provisions relating to suspension or revocation of accreditation in K.A.R. 28-72-4(g).

(e)(1) Unless revoked sooner, each training provider’s accreditation, including refresher training courses, shall expire two years after the date of issuance. If a training provider meets the requirements of subsections (a), (c), and (d), the training provider shall be reaccredited.

(2) Each training provider seeking reaccreditation of one or more refresher training courses shall submit an application to KDHE at least 60 calendar days before the training provider’s accreditation expires. If a training provider does not submit its application for reaccreditation by that date, the provider’s reaccreditation before the end of the accreditation period shall not be guaranteed by KDHE.
The training provider’s application for reaccreditation shall contain the following:

(A) A completed training provider course accreditation application on a form provided by KDHE, which shall include the following:

(i) The training provider’s name, address, and telephone number;
(ii) the name and date of birth of the training manager;
(iii) the name and date of birth of the principal instructor for each course;
(iv) a list of locations at which training will take place;
(v) a list of refresher training courses for which the training provider is applying for reaccreditation;
(vi) a statement signed by the training manager certifying that the information provided in the application for reaccreditation, and any additional information included with the application, is true and accurate to the best of the training manager’s knowledge and understanding, that the training provider will comply with K.A.R. 28-72-4, K.A.R. 28-72-4a, and K.A.R. 28-72-4c, and that the training provider will conduct lead training only in those occupations in which the training provider has received accreditation;

(B) a list of refresher training courses for which the training provider is applying for reaccreditation;

(C) a description of any changes to the training facility, equipment, or course materials since the training provider’s last application was approved that adversely affect the students’ ability to learn; and

(D) a payment to KDHE for the nonrefundable fees specified in K.A.R. 28-72-3, as applicable, unless the training provider is a state, federally recognized Indian tribe, local government, or nonprofit organization as evidenced by a letter of determination issued by the IRS, which shall accompany the application.

(4) If the training provider has allowed its accreditation to expire and the provider desires to be accredited, the training provider shall reapply in the same manner as that required for an application for an original accreditation in accordance with this regulation. (Authorized by and implementing K.S.A. 65-1,202 and 65-1,207; effective, T-28-9-13-99, Sept. 13, 1999; effective Jan. 7, 2000; amended Dec. 6, 2002; amended April 9, 2010.)

28-72-5. Application process and requirements for the certification of lead inspectors. (a) Application for a lead inspector certificate.

(1) Each applicant for a lead inspector certificate shall submit a completed application to KDHE before consideration for certificate issuance. All applications for certification shall be received by KDHE at least 30 days before the date of the third-party examination, but the deadline for filing applications may be waived by KDHE as particular circumstances justify.

(2) Each application shall include the following:

(A) A completed lead occupation certificate application on a form provided by KDHE, which shall include the following:

(i) The applicant’s full legal name, home address, and telephone number;
(ii) the name, address, and telephone number of the applicant’s current employer;
(iii) the applicant’s state-issued identification number or federal employment identification number;
(iv) the county or counties in which the applicant is employed;
(v) the address where the applicant would like to receive correspondence regarding the application or certification;
(vi) the occupation for which the applicant wishes to be certified;
(vii) proof of any certification for lead occupations in other states, including the names of the other states, type of certification, certification expiration date, certificate number, and copies of the other states’ certificate or license;
(viii) proof of any certification by the EPA, including the EPA region number, type of certification, certification expiration date, certificate number, and a copy of the EPA certificate;
(ix) the type of training completed, including the name of the training provider, certificate identification number, and dates of course attendance;
(x) any employment history or education that meets the experience requirements in subsection (b); and
(xi) the signature of the applicant, which shall certify that all information in the application is complete and true to the best of the applicant’s knowledge and that the applicant will comply with applicable state statutes and regulations;

(B) a copy of the lead inspector training course completion diploma or equivalent EPA training course diplomas, and any required refresher course completion diplomas;
(C) documentation pursuant to subsection (b) as evidence of meeting the education or experience requirements for lead inspectors; and

(D) a payment to KDHE for the nonrefundable fee specified in K.A.R. 28-72-3.

(3) Each applicant for a lead inspector certificate shall apply to KDHE within one year after the applicant’s successful completion of the lead inspector training course, as indicated on the course completion diploma. Applicants failing to apply within one year after the date on the training course completion diploma shall, before making application for certification, be required to successfully complete the eight-hour lead inspector refresher training course accredited by KDHE.

(4) Each applicant who fails to apply within two years after the lead inspector training and who has not successfully completed refresher training shall be required to successfully complete the lead inspector training course before submitting an application for a lead inspector certificate.

(b) Training, education, and experience requirements for a lead inspector certificate.

(1) Each applicant for certification as a lead inspector shall complete a lead inspector training course or its equivalent and shall be required to achieve passing scores on the course examination and the third-party examination.

(2) Each applicant for certification as a lead inspector shall meet the minimum education or experience requirements for a certified lead inspector.

(A) The minimum education or experience requirements for a certified lead inspector shall include at least one of the following:

(i) A bachelor’s degree;

(ii) an associate’s degree and one year of experience in a related field, including housing repair and inspection, and lead, asbestos, and environmental remediation work; or

(iii) either a high school diploma or a certificate of high school equivalency (GED), in addition to two years of experience in a related field, including housing repair and inspection, and lead, asbestos, and environmental remediation work.

(B) The following documents shall be recognized by KDHE as evidence of meeting the requirements listed in paragraph (b)(2)(A):

(i) Official academic transcripts or diplomas as evidence of meeting the education requirements;

(ii) resumes, letters of reference, or documentation of work experience, which at a minimum shall include specific dates of employment, each employer’s name, address, and telephone number, and specific job duties, as evidence of meeting the work experience requirements;

(iii) course completion diplomas issued by the training provider as evidence of meeting the training requirements; and

(iv) appropriate documentation of certification or registration.

(c) Procedure for issuance or denial of a lead inspector certificate.

(1) The applicant shall be informed by the secretary in writing that the application is approved, incomplete, or denied.

(A) If an application is incomplete, the notice shall include a list of additional information or documentation required to complete the application.

(i) Within 30 calendar days after the issuance date of the notice of an incomplete application, the applicant shall submit, to the secretary in writing, the information requested in the written notice.

(ii) Failure to submit the information requested in the written notice within 30 calendar days shall result in the secretary’s denial of the individual’s application for certification.

(iii) After receipt of the information requested in the written notice, the applicant shall be informed by the secretary in writing that the application is either approved or denied.

(B) If an application for certification is denied, the written notice of denial to the applicant shall specify the reason or reasons for the denial. Certification may be denied by the secretary pursuant to K.S.A. 65-1,207(b), and amendments thereto.

(C) If an application is denied, the applicant may reapply to KDHE for a lead inspector certificate by submitting a complete lead occupation application form with another nonrefundable certification fee, as specified in K.A.R. 28-72-3.

(D) If an applicant is aggrieved by a determination to deny certification, the applicant may request a hearing with the office of administrative hearings, in accordance with the Kansas administrative procedure act.

(2) Within 180 calendar days after application approval, the applicant shall be required to attain a passing score on the third-party examination for lead inspectors.

(A) An applicant shall not sit for the third-party examination for lead inspectors more than three times within 180 calendar days after the issuance date of the notice of an approved application.
(B) The applicant’s failure to obtain a passing score on the third-party examination for lead inspectors within the 180-day period following the notice of an approved application for a certificate shall result in KDHE’s denial of the individual’s application for a certificate. The individual may reapply to KDHE pursuant to this regulation but only after retaking the lead inspector training course.

(3) After the applicant passes the third-party examination, a two-year lead inspector certificate shall be issued by KDHE.


28-72-6. Application process and requirements for the certification of risk assessors. (a) Application for a risk assessor certificate.

(1) Each applicant for a risk assessor certificate shall submit a completed application to KDHE before consideration for certificate issuance. All applications for certification shall be received by KDHE at least 30 days before the date of the third-party examination, but the deadline for filing applications may be waived by KDHE as particular circumstances justify.

(2) Each application shall include the information specified in K.A.R. 28-72-5(a)(2)(A) and the following:

(A) A copy of the risk assessor and lead inspector training course completion diploma, and any required refresher course completion diplomas;

(B) documentation pursuant to subsection (b) as evidence of meeting the education or experience requirements for risk assessors; and

(C) a payment to KDHE for the nonrefundable fee specified in K.A.R. 28-72-3.

(3) Each applicant for a risk assessor certificate shall apply to KDHE within one year after the applicant’s successful completion of the risk assessor training course, as indicated on the course completion diploma. Applicants failing to apply within one year after the date on the training course completion certificate shall, before making application for certification, be required to successfully complete the eight-hour risk assessor refresher training course accredited by KDHE.

(4) Each applicant who fails to apply within two years after the risk assessor training and who has not successfully completed the refresher training course shall be required to successfully complete the risk assessor training course before submitting an application for a risk assessor certificate.

(b) Training, education, and experience requirements for a risk assessor certificate.

(1) Each applicant for a certificate as a risk assessor shall complete a risk assessor training course and a lead inspector training course and shall be required to achieve passing scores on both the course examinations and the third-party examination for risk assessors.

(2) Each applicant for a certificate as a risk assessor shall meet the minimum education and experience requirements for a certified risk assessor.

(A) The minimum education and experience requirements for a certified risk assessor shall include at least one of the following:

(i) A bachelor’s degree and at least one year of experience in a related field, including housing repair and inspection, and lead, asbestos, and environmental remediation work;

(ii) an associate’s degree and two years of experience in a related field, including housing repair and inspection, and lead, asbestos, and environmental remediation work;

(iii) certification as an industrial hygienist, professional engineer, or registered architect, or certification in a related engineering, health, or environmental field, including a safety professional and environmental scientist; or

(iv) either a high school diploma or a certificate of high school equivalency (GED), in addition to three years of experience in a field, including housing repair and inspection, and lead, asbestos, and environmental remediation work.

(B) The following documents shall be recognized by KDHE as evidence of meeting the requirements listed in paragraph (b)(2)(A):

(i) Official academic transcripts or diplomas as evidence of meeting the education requirements;

(ii) resumes, letters of reference, or documentation of work experience, which at a minimum shall include specific dates of employment, each employer’s name, address, and telephone number, and specific job duties, as evidence of meeting the work experience requirements;

(iii) course completion diplomas issued by the training provider as evidence of meeting the training requirements; and

(iv) appropriate documentation of certifications or registrations.
(c) Procedure for issuance or denial of a risk assessor certificate.

(1) Each applicant shall be informed by the secretary in writing that the application is approved, incomplete, or denied.

(A) If an application is incomplete, the notice shall include a list of additional information or documentation required to complete the application.

(i) Within 30 calendar days after the issuance date of the notice of an incomplete application, the applicant shall submit, to the secretary in writing, the information requested in the written notice.

(ii) Failure to submit the information requested in the written notice within 30 calendar days shall result in the secretary's denial of the individual's application for certification.

(B) If an application for certification is denied, the written notice of denial to the applicant shall specify the reason or reasons for the denial. Certification may be denied by the secretary pursuant to K.S.A. 65-1,207(b), and amendments thereto.

(C) If an application is denied, the applicant may reapply to KDHE for a risk assessor certificate by submitting a complete lead occupation application form with another nonrefundable certification fee, as specified in K.A.R. 28-72-3.

(D) If an applicant is aggrieved by a determination to deny certification, the applicant may request a hearing with the office of administrative hearings, in accordance with the Kansas administrative procedure act.

(2) Within 180 calendar days after application approval, the applicant shall be required to attain a passing score on the third-party examination for risk assessors.

(A) An applicant shall not sit for the third-party examination for risk assessors more than three times within 180 calendar days after the issuance date of the notice of an approved application.

(B) The applicant's failure to obtain a passing score on the third-party examination for risk assessors within the 180-day period following the notice of an approved application for a certificate shall result in KDHE's denial of the individual's application for a certificate. The individual may reapply to KDHE pursuant to this regulation but only after retaking the risk assessor training course.

(3) After the applicant passes the third-party examination, a two-year risk assessor certificate shall be issued by KDHE.


28-72-6a. Application process and requirements for the certification of an elevated blood lead level investigator. (a) Application for an elevated blood lead (EBL) level investigator certificate.

(1) Each applicant for an elevated blood lead level investigator certificate shall be selected by KDHE. Each selected applicant shall submit a completed application to KDHE before issuance of a certificate.

(2) Each application shall include the following:

(A) A completed lead occupation certificate application on a form provided by KDHE, which shall include the following:

(i) the applicant's full legal name, home address, and telephone number;

(ii) the name, address, and telephone number of the applicant's current employer;

(iii) the applicant's state-issued identification number or federal employment identification number;

(iv) the county or counties in which the applicant is employed;

(v) the address where the applicant would like to receive correspondence regarding the application or certification;

(vi) the occupation for which the applicant wishes to be certified;

(vii) proof of any certification for lead occupations in other states, including the names of the other states, type of certification, certification expiration date, certificate number, and copies of the other states' certificate or license;

(viii) proof of any certification by the EPA, including the EPA region number, type of certification, certification expiration date, certificate number, and a copy of the EPA certificate;

(ix) the type of training completed, including the name of the training provider, diploma identification number, and dates of course attendance;
(x) any employment history or education that
meets the experience requirements in subsection
(b);
(xi) any criminal history; and
(xii) the signature of the applicant, which shall
certify that all information in the application is
complete and true to the best of the applicant’s
knowledge and that the applicant will comply with
applicable state statutes and regulations;
(B) a copy of the risk assessor and lead inspector
training course completion diploma and any re-
quired refresher course completion diplomas; and
(C) documentation pursuant to subsection (b)
as evidence of meeting the education or experi-
ence requirements for an elevated blood lead
level investigator.
(b) Training, education, and experience
requirements for an elevated blood lead level
investigator certificate.
(1) Each applicant for a certificate as an ele-
vated blood lead level investigator shall complete
a risk assessor training course and a lead inspector
training course and shall be required to attain
passing scores on both course examinations.
(2) Each applicant for a certificate as an ele-
vated blood level investigator shall complete a
KDHE-sponsored EBL training course, shall
meet the minimum education and experience
requirements for a certified elevated blood lead
level investigator, and shall be required to attain
a passing score on the third-party elevated blood
lead level investigator examination.
(3) (A) The minimum education and experience
requirements for a certified elevated blood lead
level investigator shall include at least one of the
following:
(i) A bachelor’s degree and experience in a re-
lated field, including nursing, public health, hous-
ing repair and inspection, lead hazard investiga-
tion, or environmental remediation work; or
(ii) an associate’s degree and experience in a re-
lated field, including nursing, public health, hous-
ing repair and inspection, lead hazard investiga-
tion, or environmental remediation work; or
(iii) certification as an industrial hygienist, or
certification in public health or environmental
health; or
(iv) a high school diploma or a certificate of high
school equivalency (GED), in addition to experi-
ence in a related field, including nursing, public
health, housing repair and inspection, lead hazard
investigation, or environmental remediation work.
(B) The following documents shall be recog-
nized by KDHE as evidence of meeting the
requirements listed in paragraph (b)(3)(A):
(i) Official academic transcripts or diplomas as
evidence of meeting the education requirements;
(ii) resumes, letters of reference, or documen-
tation of work experience, which at a minimum
shall include specific dates of employment, each
employer’s name, address, and telephone num-
ber, and specific job duties, as evidence of meet-
ing the work experience requirements;
(iii) course completion diplomas issued by the
training provider as evidence of meeting the train-
ing requirements; and
(iv) appropriate documentation of certifications
or registrations.
(4) Upon receipt of a complete and qualifying
application, an elevated blood lead level investi-
gator certificate may be issued with specific re-
strictions pursuant to an agreement between the
applicant, the applicant’s employer or the appli-
cant’s controlling agency, and KDHE.
(c) Procedure for issuance or denial of an ele-
vated blood lead level investigator certificate.
(1) Each applicant shall be informed in writing
by the secretary that the application is approved,
complete, or denied.
(A) If an application is incomplete, the notice
shall include a list of additional information or
documentation required to complete the
application.
(i) Within 30 calendar days after the issuance
date of the notice of an incomplete application,
the applicant shall submit, to the secretary in writ-
ing, the information requested in the written
notice.
(ii) Failure to submit the information requested
within 30 calendar days shall result in the retraction of KDHE’s request to the
applicant to become an elevated blood lead level
investigator and result in the denial of the individ-
ual’s application for certification.
(iii) After receipt of the information requested
in the written notice, the applicant shall be in-
firmed by the secretary that the application is ei-
ther approved or denied.
(B) If an application for certification is denied,
the written notice of denial to the applicant shall
specify the reason or reasons for the denial. Cer-
tification may be denied by the secretary pursuant
to K.S.A. 65-1,207(b), and amendments thereto.
(C) If an application is denied, the applicant
may, at the request of KDHE, reapply to KDHE
for an elevated blood lead level investigator cer-
Certificate by submitting a complete lead occupation application form.

(D) If an applicant is aggrieved by a determination to deny certification, the applicant may request a hearing with the office of administrative hearings, in accordance with the Kansas administrative procedure act.

(2) Within 180 calendar days after application approval, the applicant shall be required to attain a passing score on the third-party examination for elevated blood lead level investigators.

(A) An applicant shall not sit for the third-party examination for elevated blood lead level investigators more than three times within 180 calendar days after the issuance date of the notice of an approved application.

(B) The applicant’s failure to obtain a passing score on the third-party examination for elevated blood lead level investigators within the 180-day period following the notice of an approved application for a certificate shall result in KDHE’s denial of the individual’s application for a certificate. At the request of KDHE, the individual may reapply to KDHE pursuant to this regulation, but only after retaking the KDHE risk-assessor training course.

(3) After the applicant passes the third-party examination, a two-year elevated blood lead level investigator certificate shall be issued by KDHE.

(4) The certificate shall be issued with specific restrictions pursuant to an agreement between the applicant or the applicant’s employer and KDHE. (Authorized by K.S.A. 65-1,202; implementing K.S.A. 65-1,202, 65-1,203 and 65-1,207; effective April 9, 2010.)

28-72-7. Application process and requirements for the certification of lead abatement workers. (a) Application for a lead abatement worker certificate.

(1) Each applicant for a lead abatement worker certificate shall submit a completed application to KDHE before consideration for certificate issuance. Each application for certification shall be received by KDHE within one year after successful completion of the lead abatement worker training course.

(2) Each application shall include the information specified in K.A.R. 28-72-5(a)(2)(A) and the following:

(A) A copy of the lead abatement worker training course completion diploma, and any required refresher course completion diplomas; and

(B) a payment to KDHE for the nonrefundable fee specified in K.A.R. 28-72-3.

(3) Each applicant for a lead abatement worker certificate shall apply to KDHE within one year after the applicant’s successful completion of the lead abatement worker training course, as indicated on the certificate of completion. Applicants failing to apply within one year after the date on the training course completion diploma shall, before making application for certification, successfully complete the eight-hour lead abatement worker refresher training course.

(4) Each applicant who fails to apply within two years after the lead abatement worker training and who has not successfully completed refresher training shall be required to successfully complete the lead abatement worker training course before submitting an application for a lead abatement worker certificate.

(b) Training, education, and experience requirements for a lead abatement worker’s certificate. Each applicant for a certificate as a lead abatement worker shall complete a lead abatement worker training course and shall be required to achieve a passing score on the course examination. The applicant shall submit a course completion diploma issued by the training provider as evidence of meeting this requirement.

(c) Procedure for issuance or denial of a lead abatement worker certificate.

(1) Each applicant shall be informed by the secretary in writing that the application is approved, incomplete, or denied.

(A) If an application is incomplete, the notice shall include a list of additional information or documentation required to complete the application.

(i) Within 30 calendar days after the issuance date of the notice of an incomplete application, the applicant shall submit, to the secretary in writing, the information requested in the written notice.

(ii) Failure to submit the information requested in the written notice within 30 calendar days shall result in the secretary’s denial of the individual’s application for certification.

(iii) After receipt of the information requested in the written notice, the applicant shall be informed by KDHE in writing that the application is either approved or denied.

(B) If an application for certification is denied, the written notice of denial to the applicant shall specify the reason or reasons for the denial. Cer-
tification may be denied by the secretary pursuant to K.S.A. 65-1,207(b), and amendments thereto.

(C) If an application is denied, the applicant may reapply to KDHE for a lead abatement worker certificate by submitting a complete lead occupation application form with another nonrefundable certification fee, as specified in K.A.R. 28-72-3.

(D) If an applicant is aggrieved by a determination to deny certification, the applicant may request a hearing with the office of administrative hearings, in accordance with the Kansas administrative procedure act.

(2) If the application is approved, a two-year lead abatement worker certificate shall be issued by KDHE.


28-72-7a. Application process for renovators and requirements for certification in lead-safe work practices. (a) Application for renovator certification.

(1) Each applicant seeking certification shall submit a completed application to KDHE before consideration for the certificate issuance. Each application for certification shall be received by KDHE within one year after successful completion of the “lead-safe work practices in Kansas” training course.

(2) Each application shall include the following:

(A) A completed certificate application on a form provided by KDHE, which shall include the following:

(i) The applicant’s full legal name, home address, and telephone number;

(ii) the name, address, and telephone number of the applicant’s current employer;

(iii) the applicant’s state-issued identification number or federal employment identification number;

(iv) the county or counties in which the applicant is employed;

(v) the address where the applicant would like to receive correspondence regarding the application or certification;

(vi) proof of any certification as a renovator in other states, including the names of the other states, type of certification, certification expiration date, certificate number, and copies of the other states’ certificate or license;

(vii) proof of any certification by the EPA, including the EPA region number, type of certification, certification expiration date, certificate number, and a copy of the EPA certificate;

(viii) the type of training completed, including the name of the training provider, diploma identification number, and date of course attendance; and

(ix) the signature of the applicant, which shall certify that all information in the application is complete and true to the best of the applicant’s knowledge and that the applicant will comply with applicable state statutes and regulations;

(B) a copy of the “lead-safe work practices in Kansas” training course completion diploma, and any required refresher course completion diplomas; and

(C) a payment to KDHE for the nonrefundable fee specified in K.A.R. 28-72-3.

(3) Each applicant for a renovator certificate shall apply to KDHE within one year after the applicant’s successful completion of the “lead-safe work practices in Kansas” training course, as indicated on the certificate of completion. Applicants failing to apply within one year after the date on the training course completion diploma shall, before making application for certification, be required to successfully complete the four-hour lead-safe work practices in Kansas refresher training course.

(b) Training, education, and experience requirements for a renovator certificate. Each applicant shall complete a “lead-safe work practices in Kansas” training course and shall be required to achieve a passing score on the course examination. The applicant shall submit a course completion certificate issued by the training provider as evidence of meeting this requirement.

(c) Procedure for issuance or denial of a renovator certificate.

(1) Each applicant shall be informed by the secretary in writing that the application is approved, incomplete, or denied.

(A) If an application is incomplete, the notice shall include a list of additional information or documentation required to complete the application.

(i) Within 30 calendar days after the issuance date of the notice of an incomplete application, the applicant shall submit, to the secretary in writ-
(ii) Failure to submit the information requested in the written notice within 30 calendar days shall result in the secretary’s denial of the individual’s application for certification.

(iii) After receipt of the information requested in the written notice, the application shall be approved by the secretary, or the applicant shall be informed in writing that the application is denied.

(B) If an application for certification is denied, the written notice of denial to the applicant shall specify the reason or reasons for the denial. Certification may be denied by the secretary pursuant to K.S.A. 65-1,207(b), and amendments thereto.

(C) If an application is denied, the applicant may reapply to KDHE for a renovator certificate by submitting a complete lead occupation application form with another nonrefundable certification fee, as specified in K.A.R. 28-72-3.

(D) If an applicant is aggrieved by a determination to deny certification, the applicant may request a hearing with the office of administrative hearings, in accordance with the Kansas administrative procedure act.

(2) If the application is approved, a five-year renovator certificate shall be issued by KDHE.

(3) A certificate may be issued with specific restrictions pursuant to an agreement between the applicant and KDHE. (Authorized by K.S.A. 65-1,202; implementing K.S.A. 65-1,202, 65-1,203, and 65-1,207; effective April 9, 2010.)

28-72-8. Application process and requirements for the certification of lead abatement supervisors. (a) Application for a lead abatement supervisor certificate.

(1) Each applicant for a lead abatement supervisor certificate shall submit a completed application to KDHE before consideration for certificate issuance. Each application for certification shall be received by KDHE at least 30 days before the date of the third-party examination, but the deadline for filing applications may be waived by KDHE as particular circumstances justify.

(2) Each application shall include the information specified in K.A.R. 28-72-5(a)(2)(A) and the following:

(A) A copy of the lead abatement supervisor training course completion diploma, and any required refresher course completion diplomas;

(B) documentation pursuant to subsection (c) as evidence of meeting the education or experience requirements for lead abatement supervisors; and

(C) a payment to KDHE for the nonrefundable fee specified in K.A.R. 28-72-3.

(3) Each applicant for a lead abatement supervisor certificate shall apply to KDHE within one year after the applicant’s successful completion of the lead abatement supervisor training course, as indicated on the course completion diploma. Each applicant failing to apply within one year after the date on the training course completion certificate shall, before making application for certification, be required to successfully complete the eight-hour lead abatement supervisor refresher training course.

(4) Each applicant who fails to apply within two years after the lead abatement supervisor training and who has not successfully completed refresher training shall be required to successfully complete the lead abatement supervisor training course before submitting an application for a lead abatement supervisor certificate.

(b) Training and experience requirements for a lead abatement supervisor certificate.

(1) Each applicant for a certificate as a lead abatement supervisor shall complete a lead abatement supervisor training course and shall be required to achieve passing scores on the course examination and the third-party examination.

(2) Each applicant for a certificate as a lead abatement supervisor shall meet the minimum experience requirements for a certified lead abatement supervisor.

(A) The minimum experience requirements for a lead abatement supervisor certificate shall include at least one of the following:

(i) At least one year of experience as a certified lead abatement worker certified by the secretary, the EPA, or an EPA-approved state;

(ii) at least two years of experience in asbestos abatement work as a construction manager or superintendent;

(iii) at least two years of experience as a manager for environmental hazard remediation projects; or

(iv) at least two years of experience as a supervisor in residential construction.

(B) The following documents shall be recognized by KDHE as evidence of meeting the requirements listed in paragraph (b)(2)(A):

(i) Resumes, letters of reference, or documentation of work experience, which shall include specific dates of employment, each employer’s name,
address, and telephone number, and specific job
duties, as evidence of meeting the work experi-
ence requirements;
(ii) course completion diplomas issued by a
training provider as evidence of meeting the train-
ning requirements; and
(iii) a copy of the lead abatement supervisor
certificate or identification badge as evidence of
having been a certified lead abatement supervisor.
(c) Procedure for issuance or denial of a lead
abatement supervisor certificate.
(1) Each applicant shall be informed by the sec-
cretary in writing that the application is approved,
incomplete, or denied.
(A) If an application is incomplete, the notice
shall include a list of additional information or
documentation required to complete the
application.
(i) Within 30 calendar days after the issuance
date of the notice of an incomplete application,
the applicant shall submit, to the secretary in writ-
ing, the information requested in the written
notice.
(ii) Failure to submit the information requested
in the written notice within 30 calendar days shall
result in the secretary's denial of the individual's
application for certification.
(B) If an application for certification is denied,
the written notice of denial to the applicant shall
specify the reason or reasons for the denial. Cer-
tification may be denied by the secretary pursuant
to K.S.A. 65-1,207(b), and amendments thereto.
(C) If an application is denied, the applicant
may reapply to KDHE pursuant to this
regulation but only after retaking the lead abate-
ment supervisor training course.
(2) Within 180 calendar days after application
approval, the applicant shall be required to attain
a passing score on the third-party examination for
lead abatement supervisors.
(A) An applicant shall not sit for the third-party
examination for lead abatement supervisors more
than three times within 150 calendar days after
the issuance date of the notice of an approved
application.
(B) The applicant's failure to obtain a passing
score on the third-party examination for lead
abatement supervisors within the 150-day period
following the notice of an approved application for
a certificate shall result in the secretary's denial of
the individual's application for a certificate. The
individual may reapply to KDHE pursuant to this
regulation but only after retaking the lead abate-
ment supervisor training course.
(3) After the applicant passes the third-party ex-
amination, a two-year lead abatement supervisor
certificate shall be issued by KDHE.
(4) A certificate may be issued with specific re-
strictions pursuant to an agreement between the
applicant and KDHE. (Authorized by K.S.A. 65-
1,202; implementing K.S.A. 65-1,202, 65-1,203,
and 65-1,207; effective, T-28-9-13-99, Sept. 13,
1999; effective Jan. 6, 2002; amended April 9, 2010.)

28-72-9. Application for the certifica-
tion of project designers. (a) Application for a
project designer certificate.
(1) Each applicant for a project designer certif-
icate shall submit a completed application to
KDHE before consideration for certificate issu-
ance. Each application for certification shall be
received by KDHE within one year of successful
completion of the project designer training
course.
(B) Each application shall include the informa-
tion specified in K.A.R. 28-72-5(a)(2)(A) and the
following:
(A) A copy of the project designer training
course completion diploma, and any required re-
resher course completion diplomas;
(B) documentation pursuant to subsection (b)
as evidence of meeting the education or experi-
ence requirements for project designers; and
(C) a payment to KDHE for the nonrefundable
fee specified in K.A.R. 28-72-3.
(D) If an applicant is aggrieved by a determina-
tion to deny certification, the applicant may re-
qust a hearing with the office of administrative
hearings, in accordance with the Kansas admin-
istrative procedure act.
(2) Within 180 calendar days after application
approval, the applicant shall be required to attain
a passing score on the third-party examination for
lead abatement supervisors.
(A) An applicant shall not sit for the third-party
examination for lead abatement supervisors more
to successfully complete the four-hour project designer refresher training course.

(4) Each applicant who fails to apply within two years of the project designer training course and who has not successfully completed a refresher training course shall successfully complete the project designer training course before submitting an application for a project designer certificate.

(b) Training, education, and experience requirements for a project designer certificate.

(1) Each applicant for a certificate as a project designer shall complete a lead abatement supervisor training course and a project designer course and shall be required to achieve passing scores on both course examinations.

(2) Each applicant for a certificate as a project designer shall meet the minimum education and experience requirements for a certified project designer.

(A) The minimum education and experience requirements for a certified project designer shall include at least one of the following:

(i) A bachelor’s degree in engineering, architecture, or a related profession, and one year of experience in building construction and one year of experience as a certified lead professional;

(ii) at least one year of experience as a certified lead hazard risk assessor, certified by the secretary, the EPA, or an EPA-approved state, and at least two years of experience in building construction and design; or

(iii) at least four years of experience as a lead abatement supervisor and four years of experience in building construction and design.

(B) The following documents shall be recognized by KDHE as evidence of meeting the requirements listed in paragraph (b)(2)(A):

(i) Official academic transcripts or diplomas, as evidence of meeting the education requirements;

(ii) resumes, letters of reference, or documentation of work experience, which shall include specific dates of employment, each employer’s name, address, and telephone number, and specific job duties, as evidence of meeting the work experience requirements;

(iii) course completion diplomas issued by the training provider as evidence of meeting the training requirements; and

(iv) a copy of the project designer certificate or identification badge as evidence of having been a certified project designer.

(c) Procedure for issuance or denial of a project designer certificate.

(1) The applicant shall be informed by the secretary in writing that the application is approved, incomplete, or denied.

(A) If an application is incomplete, the notice shall include a list of additional information or documentation required to complete the application.

(i) Within 30 calendar days after the issuance date of the notice of an incomplete application, the applicant shall submit, to the secretary in writing, the information requested in the written notice.

(ii) Failure to submit the information requested in the written notice within 30 calendar days shall result in the secretary’s denial of the individual’s application for certification.

(iii) After receipt of the information requested in the written notice, the applicant shall be informed by the secretary in writing that the application is either approved or denied.

(B) If an application for certification is denied, the written notice of denial to the applicant shall specify the reason or reasons for the denial. Certification may be denied by the secretary pursuant to K.S.A. 65-1,207(b), and amendments thereto.

(C) If an application is denied, the applicant may reapply to KDHE for a project designer certificate by submitting a complete lead occupation application form with another nonrefundable certification fee, as specified in K.A.R. 28-72-3.

(D) If an applicant is aggrieved by a determination to deny certification, the applicant may request a hearing with the office of administrative hearings, in accordance with the Kansas administrative procedure act.

(2) If the application is approved, a two-year project designer certificate shall be issued by KDHE.


28-72-10. Application process and licensure renewal requirements for lead activity firms. (a) Application for a lead activity firm license.

(1) Each applicant for a lead activity firm license shall submit a completed application to KDHE for consideration for license issuance.
(2) The application shall include the following:
(A) A completed lead activity firm application on a form provided by KDHE, which shall include the following:
   (i) The applicant’s name, address, and telephone number;
   (ii) if the applicant is a sole proprietorship, the applicant’s social security number or, if the applicant is a corporation, the applicant’s federal employee identification number;
   (iii) the county or counties in which the applicant is located;
   (iv) a description of any lead-based paint activities that the applicant will be conducting, including lead inspection, risk assessments, lead abatement projects, lead hazard control, and project design;
   (v) a certification that the lead activity firm will directly employ only KDHE-certified individuals to conduct lead-based paint activities or any KDHE-approved lead hazard control; and
   (vi) a certification that the lead activity firm and the firm’s employees will follow the Kansas work practice standards for lead-based paint activities specified in K.A.R. 28-72-13 through K.A.R. 28-72-21;
(B) if the applicant is required to be registered and in good standing with the Kansas secretary of state’s office, the applicant shall submit a copy of the applicant’s certificate of good standing to KDHE; and
(C) payment to KDHE for the applicable non-refundable fee specified in K.A.R. 28-72-3, unless the lead activity firm is a state, federally recognized Indian tribe, local government, or nonprofit organization as evidenced by a letter of determination issued by the IRS, which shall accompany the application.
(b) Procedure for issuance or denial of a lead activity firm license.
(1) Each applicant shall be informed by the secretary in writing that the application is approved, incomplete, or denied.
   (A) If an application is incomplete, the notice shall include a list of additional information or documentation required to complete the application.
   (i) Within 30 calendar days after the issuance date of the notice of an incomplete application, the applicant shall submit, to the secretary in writing, the information requested in the written notice.
   (ii) Failure to submit the information requested in the written notice within 30 calendar days shall result in the secretary’s denial of the lead activity firm’s application for licensure.
   (iii) After receipt of the information requested in the written notice, the applicant shall be informed by the secretary in writing that the application is either approved or denied.
   (B) If an application is approved, a two-year lead activity firm license shall be issued by the secretary.
   (C) If an application for licensure is denied, the written notice of denial to the applicant shall specify the reason or reasons for the denial. Licensure may be denied by the secretary pursuant to K.S.A. 65-1,207(b), and amendments thereto.
   (D) If an application is denied, the applicant may reapply at any time to KDHE for a lead activity firm license by submitting a complete lead activity firm application form with another non-refundable license fee, as specified in K.A.R. 28-72-3.
   (E) If an applicant is aggrieved by a determination to deny licensure, the applicant may request a hearing with the office of administrative hearings, in accordance with the Kansas administrative procedure act.
   (F) A license may be issued with specified restrictions pursuant to an agreement between the applicant and the secretary.
(2) If a licensed lead activity firm changes ownership, the new owner shall notify KDHE in writing no later than 30 calendar days before the change of ownership becomes effective. The notification shall include the following information:
   (A) A new lead activity firm license application;
   (B) the applicable nonrefundable fee specified in K.A.R. 28-72-3; and
   (C) the date that the change of ownership will become effective.
(3) The new lead activity firm application shall be processed in the same manner as that required for an initial license in accordance with this regulation.
(4) The current lead activity firm’s license shall expire on the effective date specified in the notification of the change of ownership.
(5) A completed application for a lead activity firm license renewal shall be submitted to KDHE at least 60 days before the expiration date on the license, accompanied by the applicable nonrefundable renewal fee specified in K.A.R. 28-72-3. However, each lead activity firm that is a state, federally recognized Indian tribe, local govern-
ment, or nonprofit organization as evidenced by a letter of determination issued by the IRS and accompanying the application shall be exempt from payment of this fee. If the licensee fails to apply at least 60 days before the license expiration date, renewal of the license by the secretary before the end of the licensing period shall not be guaranteed by KDHE.

(6) If a licensed lead activity firm allows the firm’s license to expire, the firm shall be required to submit an application in the same manner as that required for an application for an initial license, in accordance with this regulation. (Authorized by K.S.A. 65-1,202; implementing K.S.A. 65-1,202, 65-1,203, and 65-1,207; effective, T-28-9-13-99, Sept. 13, 1999; effective Jan. 7, 2000; amended Dec. 6, 2002; amended April 9, 2010.)

28-72-10a. Application process and licensure renewal requirements for renovation firms. (a) Application for a renovation firm license.

(1) Each applicant for a renovation firm license shall submit a completed application to KDHE for consideration for license issuance.

(2) The application shall include the following:

(A) A completed renovation firm application on a form provided by KDHE, which shall include the following:

(i) The applicant’s name, address, and telephone number;

(ii) if the applicant is a sole proprietorship, the applicant’s social security number or, if the applicant is a corporation, the applicant’s federal employee identification number;

(iii) the county or counties in which the applicant is located;

(iv) a description of any renovation activities that the applicant will be conducting, including remodeling, room addition, window-door removal or replacement, general repair projects, weatherization projects, interior and exterior paint projects, exterior siding installation, or other renovation activity;

(v) a certification that the renovation firm will employ KDHE-certified individuals to conduct renovation activities; and

(vi) a certification that the renovation firm and the firm’s employees will follow the Kansas work practice standards for renovation activities specified in K.A.R. 28-72-2 and K.A.R. 28-72-51 through K.A.R. 28-72-54;

(B) if the applicant is required to be registered and in good standing with the Kansas secretary of state’s office, a copy of the applicant’s certificate of good standing; and

(C) a payment to KDHE for the applicable non-refundable fee specified in K.A.R. 28-72-3.

(b) Procedure for issuance or denial of a renovation firm license.

(1) Each applicant shall be informed by the secretary in writing that the application is approved, incomplete, or denied.

(A) If an application is approved, a five-year renovation firm license shall be issued by the secretary.

(B) If an application is incomplete, the notice shall include a list of additional information or documentation required to complete the application.

(i) Within 30 calendar days after the issuance date of the notice of an incomplete application, the applicant shall submit, to the secretary in writing, the information requested in the written notice.

(ii) Failure to submit the information requested in the written notice within 30 calendar days shall result in the secretary’s denial of the firm’s application for licensure.

(iii) After receipt of the information requested in the written notice, the applicant shall be informed by the secretary in writing that the application is either approved or denied.

(C) If an application for licensure is denied, the written notice of denial to the applicant shall specify the reason or reasons for the denial. Licensure may be denied by the secretary pursuant to K.S.A. 65-1,207(a), and amendments thereto.

(D) If an application is denied, the applicant may reapply at any time to KDHE for a renovation firm license by submitting a complete renovation firm application form with another non-refundable license fee, as specified in K.A.R. 28-72-3.

(E) If an applicant is aggrieved by a determination to deny licensure, the applicant may request a hearing with the office of administrative hearings, in accordance with the Kansas administrative procedure act.

(F) A license may be issued with specified restrictions pursuant to an agreement between the applicant and the secretary.

(2) If a licensed renovation firm changes ownership, the new owner shall notify KDHE in writing, no later than 30 calendar days before the
change of ownership becomes effective. The notification shall include the following information:

(A) A new renovation firm license application;
(B) the applicable nonrefundable fee specified in K.A.R. 28-72-3; and
(C) the date that the change of ownership will become effective.

(3) The new renovation firm application shall be processed in the same manner as that required for an initial license in accordance with this regulation.

(4) The current renovation firm’s license shall expire on the effective date specified in the notification of the change of ownership.

(5) A completed application for a renovation firm license renewal shall be submitted to KDHE at least 60 days before the expiration date on the license and shall be accompanied by the applicable nonrefundable renewal fee specified in K.A.R. 28-72-3. If the licensee fails to apply at least 60 days before the license expiration date, renewal of the license by the secretary before the end of the licensing period shall not be guaranteed.

(6) If a licensed renovation firm allows the firm’s license to expire, the firm shall be required to submit an application in the same manner as that required for an application for an initial license, in accordance with this regulation.

28-72-11. Renewal of lead occupation certificates. (a) Renewal application for lead inspector, risk assessor, elevated blood lead investigator, lead abatement supervisor, lead abatement worker, renovator, and project designer.

(1) If a certified individual wishes to renew a lead occupation certificate, the individual shall submit a completed application for renewal of certificate, including the required supporting documentation, to KDHE at least 60 days before the certificate’s expiration date as indicated on the certificate. Failure of the certified individual to submit an application at least 60 days before the certificate’s expiration date may result in the certificate not being renewed before the current license expires.

(2) The certified individual applying for renewal shall complete the refresher training course for the appropriate occupation within the 12-month period immediately preceding the certificate expiration date.

(3) Each renewal application shall include the following:
(A) A completed lead occupation certificate application on a form provided by KDHE, which shall include the following:
(i) The applicant’s full legal name, home address, and telephone number;
(ii) the name, address, and telephone number of the applicant’s current employer;
(iii) the certified individual’s state-issued identification number or federal employment identification number;
(iv) the county or counties in which the certified individual is employed;
(v) the address where the certified individual would like to receive correspondence regarding the certification;
(vi) the lead occupation certificate that the applicant wishes to have renewed;
(vii) the type of refresher training course completed, including the name of the training provider, diploma identification number, and dates of course attendance; and
(viii) the signature of the applicant, which shall certify that all information in the application is complete and true to the best of the applicant’s knowledge and that the applicant will comply with applicable state statutes and regulations;

(B) a copy of the refresher training course completion diploma for the appropriate occupation; and

(C) a payment to KDHE for the appropriate nonrefundable recertification fee, as specified in K.A.R. 28-72-3.

(b) Procedure for issuance or denial of a renewal lead occupation certificate.

(1) The applicant shall be informed by the secretary in writing that the application is approved, incomplete, or denied.

(A) If an application is incomplete, the notice shall include a list of additional information or documentation required to complete the renewal application.

(i) Within 30 calendar days after the issuance date of the notice of an incomplete application, the applicant shall submit, to the secretary in writing, the information requested in the written notice.

(ii) Failure to submit the information requested in the written notice within 30 calendar days after the issuance of the notice shall result in the secretary’s denial of the individual’s application for recertification.
(iii) After receipt of the information requested in the written notice, the applicant shall be informed by the secretary in writing that the application is either approved or denied.

(B) If a renewal application for certification is denied, the written notice of denial to the applicant shall specify the reason or reasons for denial. Certification may be denied by the secretary pursuant to K.S.A. 65-1,207(b), and amendments thereto.

(C) If a renewal application is denied, the applicant may reapply to KDHE for a lead occupation certificate by submitting a complete lead occupation application form with the appropriate nonrefundable recertification fee, as specified in K.A.R. 28-72-3.

(2) If an applicant is aggrieved by a determination to deny certification, the applicant may request a hearing with the office of administrative hearings, in accordance with the Kansas administrative procedure act.

(3) If a renewal application is approved, a two-year certificate shall be issued by KDHE.


28-72-12. Application process and requirements for reapplication after certificate expiration. (a) Unless renewed or revoked sooner, each certificate shall expire two years after its effective date indicated on the current certificate. If a certified individual allows the certificate to expire before renewal but desires to be certified, the individual shall reapply to KDHE.

(b) Each application shall include the information specified in K.A.R. 28-72-5(a)(2)(A) and the following:

(1) Any employment history or education that meets the experience requirements in K.A.R. 28-72-5 through K.A.R. 28-72-9, as applicable;

(2) the signature of the applicant, which shall certify that all information in the application is complete and true to the best of the applicant’s knowledge and that the applicant will comply with applicable state statutes and regulations;

(3) a copy of the lead occupation training course completion diploma for the appropriate occupation; and

(4) a payment to KDHE for the nonrefundable certification fee appropriate to the lead occupation, as specified in K.A.R. 28-72-3.

(c)(1) Each applicant who fails to reapply before the certificate expiration date and who has not successfully completed a refresher training course shall be required to successfully complete the appropriate refresher training course. The applicant may be required to complete the initial training course again.

(2) Each certified lead inspector, risk assessor, or lead abatement supervisor who allows the certification to expire before renewal shall retake the third-party examination for the appropriate occupation.


28-72-13. Work practice standards; general standards. (a) Except as provided in K.S.A. 65-1,203 and amendments thereto, all lead-based paint activities, as defined in the act, shall be performed pursuant to the work practice standards in this article.

(b) Except as provided in K.S.A. 65-1,203 and amendments thereto, when performing any lead-based paint activity that involves an inspection, lead-hazard screen, risk assessment, or abatement, a certified individual shall perform that activity in compliance with the applicable requirements in this regulation.

(c) Certified lead inspectors and risk assessors conducting lead inspection activities shall avoid potential conflicts of interest by not being contracted, subcontracted, or employed by any lead activity firm performing lead abatement activities on the same lead abatement project.

(d)(1) Each certified individual shall comply with the following documented methodologies, which are hereby adopted by reference, when performing any lead-based paint activity:

(A) The U.S. department of housing and urban development (HUD) “guidelines for the evaluation and control of lead-based paint hazards in housing,” dated June 1995, excluding chapters 1 and 2 and including appendices 7, 8, 11, 12, 13, and 14. Chapter 7 in the June 1995 edition is not
28-72-14 adopted; instead, the 1997 revision of chapter 7 is adopted; and

(B) the EPA “residential sampling for lead: protocols for dust and soil sampling.” EPA final report, MRI project no. 9803, published March 29, 1995.

(2) If a conflict exists between either of the methodologies listed in this subsection and any federal or state statute or regulation or any city or county ordinance, the most stringent of these shall be adhered to by the certified lead inspector or risk assessor. (Authorized by and implementing K.S.A. 65-1,202 and 65-1,203; effective, T-28-9-13-99, Sept. 13, 1999; effective Jan. 7, 2000; amended Dec. 6, 2002; amended April 9, 2010.)

28-72-14. Work practice standards; inspection. (a) Except as provided in K.S.A. 65-1,203 and amendments thereto, a lead inspection or any portion of a lead inspection shall be conducted only by a lead inspector or risk assessor, and all inspections shall be conducted according to the procedures specified in this regulation.

(b) When conducting an inspection, the lead inspector or risk assessor shall select the following locations according to the documented methodologies in K.A.R. 28-72-13 (d)(1) and shall test for the presence of lead-based paint:

(1) In a residential dwelling and child-occupied facility, each interior component with a distinct painting history and each exterior component with a distinct painting history shall be tested for lead-based paint, except those components that the lead inspector or risk assessor determines to have been replaced after 1978 or not to contain lead-based paint; and

(2) in a multifamily dwelling or child-occupied facility, each component with a distinct painting history in every common area, except those components that the lead inspector or risk assessor determines to have been replaced after 1978 or not to contain lead-based paint.

(c)(1) Paint shall be sampled according to both of the following requirements:

(A) The analysis of paint to determine the presence of lead shall be conducted using the documented methodologies in K.A.R. 28-72-13 (d)(1).

(B) All collected paint chip samples shall be analyzed according to K.A.R. 28-72-19 to determine if the samples contain detectable levels of lead that can be quantified numerically.

(2) The lead inspector or risk assessor shall prepare an inspection report, which shall include the following information:

(A) The date of each inspection;

(B) the address of the building;

(C) the date of the construction;

(D) apartment numbers, if applicable;

(E) the name, address, and telephone number of the owner or owners of each residential dwelling;

(F) the name, signature, and certificate number of each certified lead inspector or risk assessor, or both, conducting testing;

(G) the name, address, and telephone number of the lead activity firm employing each lead inspector or risk assessor, or both, if applicable;

(H) each testing method and device or sampling procedure, or both, employed for paint analysis, including quality control data and, if used, the serial number of any x-ray fluorescence (XRF) device and a copy of the XRF device user’s certificate of training provided by the equipment manufacturer;

(I) a summary of laboratory results, categorized as positive or negative, and the name of each recognized laboratory that conducted the analysis, along with the laboratory’s certification number;

(J) floor plans or sketches of the units inspected, showing the appropriate test locations and any identifying number systems;

(K) a summary of the substrates tested, including the identification of component, component integrity, paint condition and color, and test identification numbers associated with the results; and

(L) the results of the inspection expressed in terms appropriate to the sampling method used.

(d) Time frame for submission of reports. The inspection report shall be provided to the owner of the property within 20 business days after completion of the lead inspection. (Authorized by and implementing K.S.A. 65-1,202 and 65-1,203; effective, T-28-9-13-99, Sept. 13, 1999; effective Jan. 7, 2000; amended Dec. 6, 2002; amended April 9, 2010.)

28-72-15. Work practice standards; lead hazard screen. (a) Except as provided in K.S.A. 65-1,203 and amendments thereto, a lead hazard screen shall be conducted only by a risk assessor.

(b) If a lead hazard screen is conducted, the risk assessor shall conduct each lead hazard screen as follows:

(1) Background information regarding the physical characteristics of the residential dwelling
or child-occupied facility and occupant-use patterns that could cause lead-based paint exposure to one or more children through the age of 72 months shall be collected.

(2) An inspection of the residential dwelling or child-occupied facility shall be conducted to achieve the following:

(A) Determine if any deteriorated paint is present; and

(B) locate at least two dust sampling locations.

(3) If deteriorated paint is present, each surface with deteriorated paint that is determined, using one or more of the documented methodologies in K.A.R. 28-72-13 (d)(1), to be in poor condition and to have a distinct painting history shall be tested for the presence of lead.

(4) In residential dwellings, a dust sample shall be collected from the floor and from each window, and in rooms, hallways, or stairwells where one or more children through the age of 72 months are most likely to come in contact with dust.

(5) In multifamily dwellings and child-occupied facilities, in addition to the floor and window samples required in paragraph (b)(4), the risk assessor shall also collect dust samples from common areas where one or more children through the age of 72 months are most likely to come into contact with dust.

(c) Dust samples shall be collected and analyzed in the following manner:

(1) All dust samples shall be taken using one or more of the documented methodologies in K.A.R. 28-72-13 (d)(1).

(2) All collected dust samples shall be analyzed according to K.A.R. 28-72-19 to determine if the samples contain detectable levels of lead that can be quantified numerically.

(d) Paint shall be sampled according to both of the following requirements:

(1) The analysis of paint to determine the presence of lead shall be conducted using one or more of the documented methodologies in K.A.R. 28-72-13 (d)(1).

(2) All collected paint chip samples shall be analyzed according to K.A.R. 28-72-19 to determine if the samples contain detectable levels of lead that can be quantified numerically.

(e) The risk assessor shall prepare a lead hazard screen report, which shall include the following information:

(1) The date of the assessment;

(2) the address of each building;

(3) the date of construction of each building;

(4) the apartment number, if applicable;

(5) the name, address, and telephone number of each owner of each building;

(6) the name, signature, and certificate number of the certified risk assessor conducting the assessment;

(7) the name, address, and telephone number of each recognized laboratory conducting analysis of collected samples, along with the laboratory’s certificate number;

(8) the results of the visual inspection;

(9) the testing method and sampling procedure employed for the paint analysis;

(10) specific locations of each paint component tested for the presence of lead;

(11) all data collected from on-site testing, including quality control data and, if used, the serial number of any XRF device, and a copy of the XRF device user’s certificate of training provided by the equipment manufacturer;

(12) all results of laboratory analysis on collected paint, soil, and dust samples;

(13) any other sampling results;

(14) any background information collected regarding the physical characteristics of the residential dwelling or multifamily dwelling and occupant-use patterns that could cause lead-based paint exposure to one or more children through the age of 72 months; and

(15) recommendations, if warranted, for a follow-up risk assessment and, as appropriate, any further actions.

(f) Time frame for submission of reports. The lead hazard screen report shall be provided to the owner of the property within 20 business days after completion of the lead hazard screen. (Authorized by and implementing K.S.A. 65-1,202 and 65-1,203; effective, T-28-9-13-99, Sept. 13, 1999; effective Jan. 7, 2000; amended Dec. 6, 2002; amended April 9, 2010.)

28-72-16. Work practice standards; risk assessment. (a) Except as provided by K.S.A. 65-1,203 and amendments thereto, a risk assessment shall be conducted only by a person certified by KDHE, according to K.A.R. 28-72-2 and K.A.R. 28-72-6 through K.A.R. 28-72-12 as a risk assessor. If a risk assessment is conducted, the assessment shall be conducted according to the procedures specified in this regulation.

(b) An inspection of the residential dwelling or child-occupied facility shall be undertaken to lo-
cate the existence of deteriorated paint, assess the extent and causes of the deterioration, and assess other potential lead-based paint hazards.

(c) Background information regarding the physical characteristics of the residential dwelling or child-occupied facility and occupant-use patterns that could cause lead-based paint exposure to one or more children through the age of 72 months shall be collected.

(d) Each surface with deteriorated paint that is determined, using one or more of the documented methodologies in K.A.R. 28-72-13 (d)(1), to be in poor condition and to have a distinct painting history, shall be tested for the presence of lead. Each other surface determined, using one or more of the documented methodologies in K.A.R. 28-72-13 (d)(1), to be a potential lead-based paint hazard and to have a distinct painting history shall also be tested for the presence of lead.

(e) In residential dwellings, single-surface dust samples from at minimum one window and at minimum one floor area shall be collected in all living areas where one or more children through the age of 72 months are most likely to come into contact with dust.

(f) For multifamily dwellings and child-occupied facilities, the samples required in subsection (e) of this regulation shall be taken. In addition, window and floor dust samples shall be collected in the following locations:

(1) Common areas adjacent to the sampled residential dwelling or child-occupied facility; and

(2) other common areas in the building where the risk assessor determines that one or more children through the age of 72 months are likely to come into contact with dust.

(g) For child-occupied facilities, window and floor dust samples shall be collected in each room, hallway, or stairwell utilized by one or more children through the age of 72 months and in other common areas in the child-occupied facility where the risk assessor determines that one or more children through the age of 72 months are likely to come into contact with dust.

(h) Soil samples shall be collected and analyzed for lead concentrations in the following locations:

(1) Exterior play areas where bare soil is present; and

(2) dripline or foundation areas where bare soil is present.

(i) All paint, dust, or soil sampling or testing shall be conducted using one or more of the documented methodologies in K.A.R. 28-72-13(d)(1).

(j) All collected paint chip, dust, or soil samples shall be analyzed according to K.A.R. 28-72-19 to determine if the samples contain detectable levels of lead that can be quantified numerically.

(k) The risk assessor shall prepare a risk assessment report, which shall include the following information:

(1) The date of the assessment;

(2) the address of each building;

(3) the date of construction of the buildings;

(4) the apartment number, if applicable;

(5) the name, address, and telephone number of each owner of each building;

(6) the name, signature, and certificate number of the risk assessor conducting the assessment;

(7) the name, address, and telephone number of each recognized laboratory conducting an analysis of collected samples, along with the laboratory's certificate number;

(8) the results of the visual inspection;

(9) the testing method and sampling procedure used for each paint analysis;

(10) specific locations of each painted component tested for the presence of lead;

(11) all data collected from on-site testing, including quality control data and, if used, the serial number of any XRF device and a copy of the XRF device user's certificate of training provided by the equipment manufacturer;

(12) all results of laboratory analyses on collected paint, soil, and dust samples;

(13) any other sampling results;

(14) any background information collected pursuant to subsection (c);

(15) to the extent that they are used as part of the lead-based paint hazard determination, the results of any previous inspections or analyses for the presence of lead-based paint, or other assessments of lead-based paint-related hazards;

(16) a description of the location, type, and severity of identified lead-based paint hazards and any other potential lead hazards; and

(17) a description of interim controls or abatement options, or both, for each identified lead-based paint hazard and the suggested prioritization for addressing each hazard. If the use of an encapsulant or enclosure is recommended, the report shall recommend a maintenance and monitoring schedule for the encapsulant or enclosure.

(l) Time frame for submission of reports. The risk assessment report shall be provided to the
owner of the property and to the person request-
ing the risk assessment within 20 business days
after completion of the lead-based paint hazard
risk assessment. (Authorized by and implement-
ing K.S.A. 65-1,202 and 65-1,203; effective, T-28-
amended Dec. 6, 2002; amended April 9, 2010.)

28-72-17. Work practice standards; el-
evated blood lead level investigation risk as-
essments. (a) In order to perform an elevated
blood lead (EBL) level investigation risk assess-
ment, the EBL inspector shall have a certificate
from KDHE.

(b) The EBL inspector shall have the parents
or guardians of the EBL child complete an ap-
proved KDHE questionnaire before sampling.
Environmental testing shall be linked to the EBL
child’s history and may include the testing of a
prior residence or other areas frequented by the
EBL child.

(c) Background information regarding the
physical characteristics of the residential dwelling
or child-occupied facility and occupant-use pat-
terns that could cause lead-based paint exposure
to one or more children through the age of 72
months shall be collected.

(d) Each surface of the dwelling itself, furni-
ture, or play structures frequented by the EBL
child that has deteriorated surface coatings shall
be tested for the presence of lead.

(e) Dust samples from areas frequented by the
EBL child, including play areas, porches, kitch-
ens, bedrooms, and living and dining rooms, shall
be collected. Dust samples shall also be collected
from automobiles, work shoes, and laundry rooms
if occupational lead exposure is a possibility.

(f) Soil samples shall be collected from bare soil
areas of play, areas near the foundation of the
house, and areas from the yard. If the EBL child
spends significant time at the park or other play
area, samples shall be collected from these areas,
unless the area has already been sampled and
documented.

(g) If necessary, water samples of the first-
drawn water from the tap most commonly used
for drinking water, infant formula, or food prep-
paration shall be collected. For the purpose of this
regulation, the term “first-drawn water” shall
mean water that is taken from the tap after an
undisturbed period of at least six hours, during
which time the water has been in contact with the
pipes and fixtures allowing any available lead to
dissolve into the water.

(h) All paint, dust, and soil collection and test-
ing shall be conducted using the documented
methodologies in K.A.R. 28-72-13 (d)(1).

(i) No later than 20 days following the comple-
tion of the environmental investigation, the EBL
investigator shall issue a report to the secretary
that details the findings of the investigation and
includes all the empirical data gathered during the
investigation.

(j) All environmental investigation reports shall
be reviewed by KDHE to determine if the expo-
sure to lead hazards found on the property are a
contributing cause of the EBL in the child.

(k) If a determination is made by KDHE that
lead hazards found on the property are a contrib-
uting cause of the EBL in the child, a lead hazard
control notice shall be issued by the secretary to
the owner and occupants of the property. The
lead hazard control notice shall include the
following:

(1) Detailed, specific actions that must be taken
to make the property lead-safe and suitable for
habitation by the EBL child or any other children
through 72 months of age;

(2) detailed strategies for both abatement and
interim control of the lead hazards found;

(3) the date by which the remediation activities
will be concluded; and

(4) the method of proving that the remediation
activities are successfully completed.

(l) The verified findings of the environmental
investigation and the lead hazard control notice
shall not be used to the detriment of occupants by
the owner of the property. The failure of any per-
son to comply with the lead hazard control notice
shall be considered a violation of K.S.A. 65-1,210,
and amendments thereto, and the person shall be
subject to the penalties provided in that statute.
( Authorized by K.S.A. 65-1,202; implementing
K.S.A. 65-1,202, 65-1,208, and 65-1,210; effective,
amended Dec. 6, 2002; amended April 9, 2010.)

28-72-18. Work practice standards; lead
abatement. (a) Except as provided in K.S.A. 65-
1,203 and amendments thereto, a lead abatement
shall be conducted only by an individual certified
by KDHE and shall be conducted according to
the procedures specified in this article.

(b) A lead abatement supervisor shall be re-
required for each lead abatement project and shall be on-site during all work-site preparation and during the postabatement cleanup of work areas.

(1) At all other times when lead abatement activities are being conducted, the lead abatement supervisor shall be on-site or available by telephone, pager, or answering service and shall be able to be present at the work site in no more than one hour.

(2) The lead abatement supervisor shall report to the work site during each lead abatement work practice standards inspection performed by KDHE. The lead activity firm that employs the lead abatement supervisor shall be subject to an abatement project reinspection fee if the lead abatement supervisor fails to be present at the work site as specified in this regulation.

(c) The lead abatement supervisor and licensed lead activity firm employing that supervisor shall ensure that all lead abatement activities are conducted according to the requirements of the Kansas work practice standards in this article and all other federal, state, and local requirements.

(d) Notification of the commencement of lead-based paint activities in a residential dwelling or child-occupied facility or as the result of a federal, state, or local order shall be given to KDHE before the commencement of abatement activities. The procedure for this notification shall be as follows:

(1) Each person or lead activity firm conducting a lead abatement project in target housing or in any child-occupied facility shall submit a notification to KDHE at least 10 business days before the onset of the lead abatement project.

(2) The notification shall be submitted to KDHE with a payment to KDHE for the nonrefundable project fee specified in K.A.R. 28-72-3.

(3) The notification form provided to the department shall include the following:

(A) The street address, city, state, zip code, and county of each location where lead abatement will occur;

(B) the name, address, and telephone number of the property owner;

(C) an indication of the type of structure or structures being abated, including single-family or multifamily dwelling, child-occupied facility, or any combination of these types;

(D) the date of the onset of the lead abatement project;

(E) the estimated completion date of the lead abatement project;

(F) the work days and hours of operation during which the lead abatement project will be conducted;

(G) the name, address, telephone number, and license number of the lead activity firm;

(H) the name and certificate number of each lead abatement worker;

(I) the type or types of lead abatement strategy or strategies that will be utilized, including enclosure, encapsulation, replacement, removal, or any combination of these strategies, and the specific locations within the unit where these strategies will be utilized;

(J) the signature of each lead abatement supervisor, which shall certify that all information provided in the project notification is complete and true to the best of the supervisor’s knowledge; and

(K) a written certification from the lead abatement supervisor, which shall include a copy of the clearance report, within 10 days after successfully achieving clearance, that clearly states that all abatement control options were conducted in accordance with all local, state, and federal regulations, as well as in accordance with the preabatement notification letter submitted to KDHE.

(e) Emergency notification. If the lead activity firm is unable to comply with the 10-day notification period due to an emergency situation, the lead activity firm shall perform the following:

(1) Notify KDHE by telephone, facsimile, or electronic mail within 24 hours after the onset of the lead abatement project; and

(2) submit written notification and payment of fees as described in subsection (d) no more than two business days after the onset of the lead abatement project.

(f) A written occupant protection plan, which shall be unique to each residential dwelling or child-occupied facility, shall be developed before the lead abatement begins. The occupant protection plan shall describe the measures and management procedures that will be taken during the lead abatement to protect the building occupants from exposure to any lead-based paint hazards.

(1) The certified lead abatement supervisor or project designer responsible for the project shall prepare the occupant protection plan.

(2) The occupant protection plan shall meet the following requirements:

(A) Describe the work practices and strategies that will be taken during the lead abatement project to protect the building occupants from exposure to any lead hazards;
include the results of any lead inspections or risk assessments completed before the commencement of the lead abatement project; and (D) be submitted to KDHE with the lead abatement project notification.

(g) The work practices listed below shall be restricted as follows:

(1) Open-flame burning or torching of lead-based paint shall be prohibited.

(2) Machine sanding or grinding, or abrasive blasting or sandblasting of lead-based paint shall be prohibited unless used with high efficiency particulate air (HEPA) exhaust control that removes particles of 0.3 microns or larger from the air at 99.97 percent or greater efficiency.

(3) Dry scraping of lead-based paint shall be permitted only within 12 inches of electrical outlets or when treating defective paint spots totaling no more than two square feet in any one room, hallway, or stairwell, or totaling no more than 20 square feet on exterior surfaces.

(4) Operating a heat gun on lead-based paint shall be prohibited.

(5) Hydro blasting or pressurized water washing of lead-based paint shall be prohibited.

(6) The use of methylene chloride-based chemical strippers shall be prohibited.

(7) Solvents that have flashpoints below 140 Fahrenheit shall be prohibited.

(8) Enclosure strategies shall be prohibited if the barrier is not warranted by the manufacturer to last at least 20 years under normal conditions or if the primary barrier is not a solid barrier.

(9) Encapsulation strategies shall be prohibited if the encapsulant is not warranted by the manufacturer to last at least 20 years under normal conditions or if the encapsulant has been improperly applied.

(h) Permissible lead abatement project strategies.

(1) The following strategies shall be permissible for lead abatement projects:

(A) Replacement;

(B) the use of an enclosure;

(C) encapsulation; and

(D) removal.

(2) Each lead abatement strategy not specified in this article shall be submitted to and approved by KDHE for evaluation before implementation. (Authorized by and implementing K.S.A. 65-1,202 and 65-1,203; effective, T-28-9-13-99, Sept. 13, 1999; effective Jan. 7, 2000; amended Dec. 6, 2002; amended April 9, 2010.)

28-72-18a. Work practice standards; lead abatement: replacement. When conducting a lead abatement project using the replacement strategy, the certified lead professional or licensed firm shall meet the following minimum requirements: (a) The site shall be prepared by first establishing a regulated area using fencing, barrier tape, or other appropriate barriers. The regulated area shall be marked to prevent uncertified personnel and restricting the general public from approaching closer than 20 feet to the abatement operation.

(b) Signs shall be posted at all entrances to the regulated area and shall include the words “WARNING: LEAD AREA. POISON. NO SMOKING OR EATING” in bold lettering not smaller than two inches tall, with additional language or symbols prohibiting entry to the regulated area by uncertified personnel and the general public. All signs shall be in a language that is easily recognizable by all certified lead professionals and by members of the general public where the lead abatement activities are taking place.

(c) Any heating and cooling system within the regulated area shall be shut down and the vents sealed with 6-mil polyethylene sheeting to prevent lead dust accumulation within the system.

(d) All items shall be cleaned within the regulated area by HEPA vacuuming or wet wiping with a cleaning solution, or both. Items shall then be either removed from the area or covered with 6-mil polyethylene sheeting and sealed with duct tape, to provide an airtight and watertight seal.

(e) At least two layers of 6-mil, or thicker, polyethylene sheeting shall be placed on the floor at the base of the component and extend at least 10 feet beyond the perimeter of the component to be replaced.

(f) The component and the area adjacent to the component shall be thoroughly wetted using a garden sprayer, airless mister, or other appropriate means to reduce airborne dust.

(g) After removal of the component, the surface behind the removed component shall be thoroughly wetted to reduce airborne dust.

(h) The component shall be wrapped or bagged completely in 6-mil polyethylene sheeting and
sealed with duct tape to prevent loss of debris or dust.

(i) Before installing a new component, the area of replacement shall be cleaned by HEPA vacuuming the area again. Cleaning shall begin at the end of the work area farthest from the main entrance to the area and from the top to the bottom of the regulated area. (Authorized by and implementing K.S.A. 65-1,202; effective, T-28-9-13-99, Sept. 13, 1999; effective Jan. 7, 2000; amended April 9, 2010.)

28-72-18b. Work practice standards; lead abatement: enclosure. When conducting a lead abatement project using the enclosure strategy, the certified lead professional shall meet the following minimum requirements: (a) The site shall be prepared by first establishing a regulated area using fencing, barrier tape, or other appropriate barriers. The regulated area shall be marked to prevent uncertified personnel and the general public from approaching closer than 20 feet to the abatement project.

(b) Signs shall be posted at all entrances to the regulated area and shall include the words “WARNING: LEAD AREA, POISON. NO SMOKING OR EATING” in bold lettering not smaller than two inches tall, with additional language or symbols prohibiting entry to the regulated area by uncertified personnel and the general public. All signs shall be in a language that is easily recognized by all certified lead professionals and by members of the general public where the lead abatement activities are taking place.

(c) Any heating and cooling systems within the regulated area shall be shut down and the vents sealed with 6-mil polyethylene sheeting to prevent lead dust accumulation within the system.

(d) All items shall be cleaned within the regulated area by HEPA vacuuming or wet wiping with a cleaning solution, or both. Items shall then be either removed from the area or covered with 6-mil polyethylene sheeting and sealed with duct tape.

(e) At least one layer of 6-mil, or thicker, polyethylene sheeting shall be placed on the floor at the base of the component and extend at least 10 feet beyond the perimeter of the component to be enclosed.

(f) The surface to be enclosed shall be permanently labeled behind the enclosure horizontally and vertically, approximately every two feet with this warning: “Danger: Lead-Based Paint.” The lettering on the label shall be boldfaced, at least two inches tall, and in a contrasting color.

(g)(1) The enclosure shall be applied directly onto the painted surface, or a frame shall be constructed of wood or metal, using nails, staples, or screws. Glue may be used in conjunction with the aforementioned fasteners, but shall not be used alone. All enclosure items shall be back-caulked at all edges, seams, and abutment edges.

(2) The material used for the enclosure barrier shall be solid and rigid enough to provide adequate protection. Wallpaper, contact paper, films, folding walls, drapes, and similar materials shall not meet this requirement.

(3) Enclosure systems and their adhesives shall be designed to last at least 20 years.

(4) The substrate or building structure to which the enclosure is fastened shall be structurally sufficient to support the enclosure barrier for at least 20 years. If there is deterioration of the substrate or building structure that may impair the enclosure from remaining dust-tight for a minimum of 20 years, the substrate or building structure shall be repaired before attaching the enclosure. This deterioration may include mildew, water damage, dry rot, termite damage, or any structural damage.

(h) Preformed steel, aluminum, vinyl, or other construction material may be used for window frames, exterior siding, trim casings, column enclosures, moldings, or other similar components if they can be sealed.

(i) A material equivalent to one-quarter inch rubber or vinyl may be used to enclose stairs.

(j) The seams, edges, and fastener holes shall be sealed with caulk or other sealant, providing a dust-tight system.

(k) All equipment used in the regulated area shall be thoroughly cleaned with a cleaning solution or vacuumed with a HEPA vacuum, or both, before removal from the regulated area.

(l) Before clearance, the installed enclosure and surrounding regulated area shall be cleaned by vacuuming with a HEPA vacuum, wiping down all surfaces with a cleaning solution, rinsing all surfaces, and then HEPA vacuuming the area again. Cleaning shall begin at the end of the work area farthest from the main entrance to the area and from the top to the bottom of the regulated area.

(m) All enclosure systems used shall meet the requirements of all applicable building codes and fire, health, safety, and environmental regulations. (Authorized by and implementing K.S.A. 65-1,
28-72-18c. Work practice standards; lead abatement: encapsulation. (a) The encapsulation strategy of lead abatement shall not be used on the following:

1. Friction surfaces, including window sashes and parting beads, door jambs and hinges, floors, and door thresholds;
2. Deteriorated components, including rotten wood, rusted metal, spalled or cracked plaster, and loose masonry;
3. Impact surfaces, including doorstops, window wells, and headers;
4. Deteriorated surface coatings if the adhesion or cohesion of the surface coating is uncertain or indeterminable; and
5. Incompatible coatings.

(b) When conducting a lead abatement project using the encapsulation strategy, the certified personnel shall comply with the following minimum requirements:

1. The certified lead professional or licensed firm shall select an encapsulant that is a low volatile organic compound (V.O.C.), that is warranted by the manufacturer to last for at least 20 years, and that meets the requirements of all applicable building codes as well as fire, health, and environmental regulations.
2. Each surface to be encapsulated shall have sound structural integrity and sound surface coating integrity and shall be prepared according to the manufacturer’s recommendations.
3. The site shall be prepared by first establishing a regulated area using fencing, barrier tape, or other appropriate barriers. The regulated area shall be marked to prevent uncertified personnel and the general public from approaching closer than 20 feet to the abatement project.
4. Signs shall be posted at all entrances to the regulated area and shall include the words “WARNING: LEAD AREA. POISON. NO SMOKING OR EATING” in bold lettering at least two inches tall, with additional language or symbols prohibiting entry to the regulated area by uncertified personnel and the general public. All signs shall be in a language that is easily recognized by all certified lead professionals and by members of the general public where the lead abatement activities are taking place.
5. Any heating and cooling systems within the regulated area shall be shut down and the vents sealed with 6-mil polyethylene sheeting to prevent lead dust accumulation within the system.
6. All items shall be cleaned within the regulated area by HEPA vacuuming or wet wiping with a cleaning solution, or both. Items shall then be either removed from the area or covered with 6-mil polyethylene sheeting and sealed with duct tape.
7. At least two layers of 6-mil, or thicker, polyethylene sheeting shall be placed on the ground at the base of the component and shall extend at least 10 feet beyond the perimeter of the component to be encapsulated.
8. A patch test shall be conducted in accordance with the HUD guidelines adopted by reference in K.A.R. 28-72-13 (d)(1) before general application of the encapsulant to determine the adhesive and cohesive properties of the encapsulant on the surface to be encapsulated. The encapsulant shall be applied in accordance with the manufacturer’s recommendations.
9. After the manufacturer’s recommended curing time, the entire encapsulated surface shall be inspected by a lead abatement supervisor or a project designer. Each unacceptable area shall be evaluated to determine if a complete failure of the system is indicated or if the system can be patched or repaired. Unacceptable areas shall be evidenced by delamination, wrinkling, blistering, cracking, cratering, and bubbling of the encapsulant.
10. After the encapsulation is complete, the regulated area shall be cleaned by vacuuming with a HEPA vacuum, wiping down all surfaces with a cleaning solution, rinsing all surfaces, and then HEPA vacuuming the area again. Cleaning shall begin at the end of the work area farthest from the main entrance to the area and from the top to the bottom of the regulated area.
11. All equipment used in the regulated area shall be thoroughly cleaned with a cleaning solution or vacuumed with a HEPA vacuum, or both, before removal from the regulated area. (Authorized by and implementing K.S.A. 65-1, 202; effective, T-28-9-13-99, Sept. 13, 1999; effective Jan. 7, 2000; amended April 9, 2010.)

28-72-18d. Work practice standards; lead abatement: removal. (a) Removal strategies. Acceptable removal strategies shall include the following:

or manual wet sanding shall be acceptable for the removal of lead surface coatings.

(2) Mechanical removal strategies. Using power tools that are HEPA-shrouded or locally exhausted shall be acceptable removal strategies for lead surface coatings. HEPA-shrouded or exhausted mechanical abrasion devices, including sanders, saws, drills, roto-peens, vacuum blasters, and needle guns shall be acceptable.

(3) Chemical removal strategies. Chemical strippers shall be used in compliance with the manufacturer’s recommendations.

(b) Soil abatement. When soil abatement is conducted, the lead-bearing soil shall be removed, tilled, or permanently covered in place as indicated in this subsection.

(1) Removed soil shall be replaced with fill material containing no more than 100 ppm of lead. Soil that is removed shall not be reused as topsoil.

(2) If tilling is selected, soil in a child-accessible area shall be tilled to a depth that results in less than 400 ppm lead of the homogenized soil, or other concentrations approved by the department. Soil in an area not accessible to children shall be tilled to a depth that results in less than 1,200 ppm lead of the homogenized soil.

(3) “Permanently covered soil” shall have the meaning specified in K.A.R. 28-72-1p(c).

(4) Soil abatement shall be conducted to prevent lead-contaminated soil from being blown from the site or from being carried away by water runoff or through percolation to groundwater.

(c) Interior removal. When conducting a lead abatement project using the removal strategy on interior surfaces, the certified lead professional or licensed firm shall meet the following minimum requirements:

(1) The site shall be prepared by first establishing a regulated area using fencing, barrier tape, or other appropriate barriers. The regulated area shall be marked to prevent uncertified personnel and the general public from approaching closer than 20 feet to the abatement project.

(2) Signs shall be posted at all entrances to the regulated area and shall include the words “WARNING: LEAD AREA. POISON. NO SMOKING OR EATING” in bold lettering at least two inches tall, with additional language or symbols prohibiting entrance to the regulated area by uncertified personnel and the general public. All signs shall be in a language that is easily recognized by all certified lead professionals and by members of the general public where the lead abatement activities are taking place.

(3) Each heating and cooling system within the regulated area shall be shut down and the vents shall be sealed with 6-mil polyethylene sheeting to prevent lead dust accumulation within the system.

(4) All items within the regulated area shall be cleaned by HEPA vacuuming or wet wiping with a cleaning solution, or both. Items shall then be either removed from the area or covered with 6-mil polyethylene sheeting and sealed with duct tape.

(5) All windows below and within the regulated area shall be closed.

(6) A critical barrier shall be constructed.

(7) At least two layers of 6-mil, or thicker, polyethylene sheeting shall be placed on the floor at the base of the component and shall extend at least 10 feet beyond the perimeter of the component being abated. If the chemical strategy is used, the certified lead professional or licensed firm shall follow the manufacturer’s recommendations regarding a chemical-resistant floor cover.

(8) All equipment used in the regulated area shall be thoroughly cleaned with a cleaning solution or vacuumed with a HEPA vacuum, or both, before removal from the regulated area.

(9) At the end of each work shift, the top layer of 6-mil polyethylene sheeting shall be removed and used to wrap and contain the debris generated by the shift. The 6-mil polyethylene sheeting shall then be sealed with duct tape and kept in a secured area until final disposal. The second layer of 6-mil polyethylene sheeting shall be HEPA vacuumed, left in place, and used during the next shift. A single layer of 6-mil polyethylene sheeting shall be placed on this remaining polyethylene sheeting before lead abatement resumes.

(10) After the removal is complete, the regulated area shall be cleaned by vacuuming with a HEPA vacuum, wiping down all surfaces with a cleaning solution, rinsing all surfaces, and then HEPA vacuuming the area again. Cleaning shall begin at the end of the work area farthest from the entrance to the area and from the top to the bottom of the regulated area.

(d) Exterior removal. When conducting a lead abatement project using the removal strategy on exterior surfaces, these minimum requirements shall be met:

(1) The site shall be prepared by first establishing a regulated area using fencing, barrier tape, or
other appropriate barriers. The regulated area shall be marked to prevent uncertified personnel and the general public from approaching closer than 20 feet to the abatement project.

(2) Signs shall be posted at all entrances to the regulated area and shall include the words “WARNING: LEAD AREA. POISON. NO SMOKING OR EATING” in bold lettering at least two inches tall, with additional language or symbols prohibiting entry to the regulated area by uncertified personnel. All signs shall be in a language that is easily recognized by all certified lead professionals and by members of the general public where the abatement activities are taking place.

(3) All movable items shall be moved 20 feet from working surfaces. Items that cannot be readily moved 20 feet from working surfaces shall be covered with 6-mil polyethylene sheeting and sealed with duct tape.

(4) At least one layer of 6-mil, or thicker, polyethylene sheeting shall be placed on the ground and shall extend at least 10 feet from the abated surface, plus another five feet out for each additional 10 feet in surface height over 20 feet. In addition, the polyethylene sheeting shall meet the following criteria:

A. Be securely attached to the side of the building, with cover provided to all ground plants and shrubs in the regulated area;
B. be protected from tearing or perforating;
C. contain any water, including rainfall, that may accumulate during the lead abatement; and
D. be weighted down to prevent disruption by wind gusts.

(5) All windows in the regulated area and all windows below and within 20 feet of working surfaces shall be closed.

(6) Work shall cease if constant wind speeds are greater than 15 miles per hour.

(7) Work shall cease and cleanup shall occur if rain begins.

(8) All equipment used in the regulated area shall be thoroughly cleaned with a cleaning solution or vacuumed with a HEPA vacuum, or both, before removal from the regulated area.

(9) The regulated area shall be HEPA vacuumed and cleaned of lead-based paint chips, polyethylene sheeting, and other debris generated by the abatement project work at the end of each workday. Debris shall be kept in a secured area until final disposal. (Authorized by and implementing K.S.A. 65-1,202; effective, T-28-9-13-99, Sept. 13, 1999; effective Jan. 7, 2000; amended April 9, 2010.)

28-72-18e. Work practice standards; postabatement clearance procedures. Except as provided in K.S.A. 65-1-203 and amendments thereto, the following postabatement or lead hazard control clearance procedures shall be performed only by a risk assessor:

(a) Following lead abatement or required lead hazard control, a visual inspection shall be performed to determine if deteriorated painted surfaces or visible amounts of dust, debris, or residue are still present. These conditions shall be eliminated before continuation of the clearance procedures.

(b) Following the visual inspection and any post-abatement or lead hazard control cleanup required by subsection (a), clearance sampling for lead-contaminated dust shall be conducted. Clearance sampling shall be conducted by employing single-surface sampling techniques.

(c)(1) Dust samples for clearance purposes shall be taken using one or more of the documented methodologies in K.A.R. 28-72-13(d)(1).

(2) Dust samples for clearance purposes shall be taken a minimum of one hour after completion of final postabatement or lead hazard control cleanup activities.

(d) The following postabatement or lead hazard control activities shall be conducted as appropriate, based upon the extent or manner of lead abatement activities conducted in or to the residential dwelling or child-occupied facility:

(1) After conducting a lead abatement or lead hazard control with containment between abated and unabated areas, one dust sample shall be taken from one window, if available, and at least one dust sample shall be taken from the floors of no fewer than four rooms, hallways, or stairwells within the containment area. In addition, one dust sample shall be taken from the floor outside the containment area. If there are fewer than four rooms, hallways, or stairwells within the containment area, then all rooms, hallways, or stairwells shall be sampled.

(2) After conducting a lead abatement or lead hazard control in which no containment was utilized, two dust samples shall be taken from no fewer than four rooms, hallways, or stairwells in the residential dwelling or child-occupied facility. One dust sample shall be taken from one window, if available, and one dust sample shall be taken from the floor of each room, hallway, or stairwell.
selected. If there are fewer than four rooms, hallways, or stairwells within the residential dwelling or child-occupied facility, then all rooms, hallways, or stairwells shall be sampled.

(3) Following an exterior paint abatement or lead hazard control, a visual inspection shall be conducted. All horizontal surfaces in the outdoor living area closest to the abated surface shall be found to be free of visible dust and debris. In addition, a visual inspection shall be conducted to determine the presence of paint chips on the drip-line or next to the foundation below any exterior surface abated. If paint chips are present, they shall be removed from the site and properly disposed of, according to all applicable federal, state, and local requirements.

(e) The rooms, hallways, or stairwells selected for sampling shall be selected according to one or more of the documented methodologies in K.A.R. 28-72-13(d)(1).

(f) The risk assessor shall compare the residual lead level, as determined by the laboratory analysis, from each dust sample with applicable clearance levels for lead in dust on floors and windows as established below in this subsection. If the residual lead levels in a dust sample exceed the clearance levels, all the components represented by the failed sample shall be recleaned and retested until clearance levels are met. Following completion of a lead abatement activity, all dust, soil, and water samples shall comply with the following clearance levels:

(1) Dust samples:

<table>
<thead>
<tr>
<th>Media</th>
<th>Clearance Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Floors</td>
<td>less than 40 (\mu g/ft^2)</td>
</tr>
<tr>
<td>Interior window sills</td>
<td>less than 250 (\mu g/ft^2)</td>
</tr>
<tr>
<td>Window troughs and exterior walking surfaces</td>
<td>less than 400 (\mu g/ft^2)</td>
</tr>
</tbody>
</table>

(2) Soil samples:

<table>
<thead>
<tr>
<th>Media</th>
<th>Clearance Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bare soil (rest of yard)</td>
<td>less than 1,200 ppm or 1,200 mg/l</td>
</tr>
<tr>
<td>Bare soil (small, high-contact areas, including sand boxes and gardens)</td>
<td>less than 400 ppm</td>
</tr>
<tr>
<td>Water</td>
<td>less than 15 ppb or 15 (\mu g/L)</td>
</tr>
</tbody>
</table>

(g) In a multifamily dwelling with similarly constructed and maintained residential dwellings, random sampling for the purposes of clearance may be conducted if the following conditions are met:

(1) The certified individuals who abate, perform lead hazard control, or clean the residential dwelling do not know which residential dwelling will be selected for the random sample.

(2) A sufficient number of residential dwellings are selected for dust sampling to provide a 95 percent level of confidence that no more than five percent or 50 of the residential dwellings, whichever is smaller, in the randomly sampled population exceed the appropriate clearance levels.

(3) The randomly selected residential dwellings are sampled and evaluated for the clearance according to the procedures found in this regulation.

(h) A postabatement or post-lead hazard control clearance report shall be prepared by a lead abatement supervisor. The postabatement or post-lead hazard control clearance report shall include the following information:

(1) The start and completion dates of the lead abatement or lead hazard control;

(2) the name and address of each licensed lead activity firm conducting the lead abatement or lead hazard control and the name of each lead abatement supervisor assigned to the lead abatement or lead hazard control project;

(3) the name, address, and signature of each risk assessor conducting clearance sampling and the date of clearance testing;

(4) the results of clearance testing and soil analysis, if applicable, and the name of each recognized laboratory that conducted the analysis;

(5) a detailed written description of the abatement or lead hazard control, including the lead abatement or lead hazard control methods used, locations of rooms or components where abatement or lead hazard control occurred, reason for selecting particular abatement or lead hazard control methods for each component, and any suggested monitoring of encapsulants or enclosures; and

(6) a written certification from the firm stating that all lead abatement or lead hazard control has taken place in accordance with all applicable local, state, and federal laws and regulations.

(i) Time frame for submission of reports. The clearance report shall be provided to the owner of the property within 20 business days after completion of the clearance inspection. (Authorized by and implementing K.S.A. 65-1,202 and 65-1,203; effective, T-28-9-13-99, Sept. 13, 1999; ef-
28-72-19. Work practice standards; collection and laboratory analysis of samples. All paint chip, dust, and soil samples collected pursuant to the work practice standards contained in this article shall meet the following conditions:

(a) Be collected by a lead inspector, risk assessor, or elevated blood lead level investigator using adequate quality control; and

(b) be analyzed by a recognized laboratory. (Authorized by and implementing K.S.A. 65-1,202; effective, T-28-9-13-99, Sept. 13, 1999; effective Jan. 7, 2000; amended Dec. 6, 2002; amended April 9, 2010.)


28-72-21. Work practice standards; quarterly reports; recordkeeping. (a) All reports and plans required in this article shall be maintained for at least three years by the licensed lead activity firm or certified individual who prepared the report or plan.

(b) Each lead activity firm that employs or contracts with lead abatement professionals shall submit to KDHE a written report listing all lead abatement, lead hazard control, and lead abatement clearance projects occurring during each calendar quarter in the state of Kansas, on or before the following dates each year:

1. January 10;
2. April 10;
3. July 10; and
4. October 10.

(c) Each report shall include the following information:
1. The name, address, and license number of the lead activity firm;
2. the complete mailing address of the property where the lead activity work occurred, including the zip code;
3. a description of the type of activity that occurred;
4. the date the activity was completed;
5. a listing of the names of all lead professionals who performed the work for the lead activity firm during the reporting period, including the complete names, certificate numbers, and certificate expiration dates; and

28-72-22. Enforcement. (a) A notice of noncompliance (NON) may be issued by the secretary for any violation of the act or this article. A NON shall be the recommended response for a first-time violator of this article. Compliance assistance information shall be included in the NON to ensure future compliance with KDHE regulations.

(b) (1) The NON shall require the violator to take corrective action in order to comply with this article. The corrective action shall depend upon the specific violations. The NON may require that proof of action be submitted to the secretary by a date specified in the NON.

(2) Mitigating factors in each case in which a NON has been issued shall be documented in the case file. (Authorized by K.S.A. 65-1,202; implementing K.S.A. 65-1,202 and 65-1,208; effective, T-28-9-13-99, Sept. 13, 1999; effective Jan. 7, 2000; amended April 9, 2010.)

28-72-51. Definitions. For purposes of this article, the definitions in K.A.R. 28-72-1a through K.A.R. 28-72-1x, as well as the following definitions, shall apply:

(a) “Acknowledgment statement” means a form that is signed by the owner or occupant of housing confirming that the owner or occupant received a copy of the pamphlet and renovation notice before the renovation began.

(b) “Certificate of mailing” means a receipt from the postal service that provides evidence that the renovator mailed the pamphlet and renovation notice to each owner or occupant. The pamphlet and renovation notice shall be mailed at least seven days before the start of renovation.

(c) “Compensation” means payment or goods received for services rendered. Payment may be in the form of money, goods, services, or bartering.

(d) “Emergency renovation operations” means unplanned renovation activities performed in response to a sudden, unexpected event that, if not immediately attended to, presents a safety or public health hazard or threatens property with sig-
significant damage. Emergency renovation operations shall include renovations to repair damage from a tree that fell on a house and renovations to repair a water pipe break in an apartment complex.

(e) “EPA” is defined in K.A.R. 28-72-1e.

(f) “Housing for the elderly” means retirement or similar types of housing specifically reserved for households of one or more persons 62 years of age or older at the time the unit is first occupied.

(g) “Lead-based-paint-free housing” means target housing that has been determined by a certified inspector or certified risk assessor to be free of paint or other surface coatings that contain lead equal to or in excess of one milligram per square centimeter or 0.5 percent by weight.

(h) “Lessor” means any entity that offers target housing for lease, rent, or sublease, including the following:
   (1) Individuals;
   (2) partnerships;
   (3) corporations;
   (4) trusts;
   (5) government agencies;
   (6) housing agencies; and
   (7) nonprofit organizations.

(i) “Minor repair and maintenance” means activities including the following:
   (1) Performing minor electrical work that disturbs six square feet or less of painted surface per component;
   (2) drilling holes in the wall to run an electrical line; or
   (3) replacing a light fixture.

(j) “Occupant” means any person or entity that enters into an agreement to lease, rent, or sublease target housing or any person that inhabits target housing, including the following:
   (1) Individuals;
   (2) partnerships;
   (3) corporations;
   (4) trusts;
   (5) government agencies;
   (6) housing agencies; and
   (7) nonprofit organizations.

(k) “Owner” means any person or entity that has legal title to housing, including the following:
   (1) Individuals;
   (2) partnerships;
   (3) corporations;
   (4) trusts;
   (5) government agencies;
   (6) housing agencies; and
   (7) nonprofit organizations.

(l) “Pamphlet” has the meaning specified in 40 CFR 745.83 as adopted in K.A.R. 28-72-2.

(m) “Record of notification” means a written statement documenting the steps taken to provide pamphlets and renovation notices to occupants and owners in residential dwellings.

(n) “Renovation” has the meaning specified in 40 CFR 745.83 as adopted in K.A.R. 28-72-2.

(o) “Renovation firm” means any individual, organization, or entity that has met the requirements for licensing by KDHE as specified in K.A.R. 28-72-10a.

(p) “Renovation notice” means a notice of renovation activities to occupants and owners of residential dwellings. The notice shall describe the scope, location, and expected duration of the renovation activity.

(q) “Renovator” means a person who has received certification from the secretary, as specified in K.A.R. 28-72-7a, and is receiving compensation for a renovation.

(r) “Self-certification of delivery” means an alternative method of documenting the delivery of the pamphlet and renovation notice to the occupant. This method may be used whenever the occupant is unavailable or unwilling to sign a confirmation of receipt of pamphlet.

(s) “Supplemental renovation notice” means any additional notification that is required when the scope, location, or duration of a project changes.

(t) “Zero-bedroom dwelling” means any residential dwelling in which the living area is not separated from the sleeping area. This term shall include dormitory housing and military barracks. This term shall not include efficiency and studio apartments. (Authorized by and implementing K.S.A. 65-1,202; effective June 23, 2000; amended April 9, 2010.)

28-72-52. Applicability. (a) Except as provided in subsection (b) of this regulation, this article and the requirements of 40 CFR 745.80 through 745.91, as adopted in K.A.R. 28-72-2, shall apply to all renovation of target housing performed for compensation.

(b) This article shall not apply to renovation activities that are limited to any of the following:
   (1) Minor repair and maintenance activities, including minor electrical work and plumbing, that disrupt six square feet or less of painted surface per component;
(2) emergency renovation operations; or
(3) if the renovator has obtained a copy of the
determination, any renovation in target housing in
which a written determination has been made by
an inspector or risk assessor who has been certi-
fied in accordance with this article that the com-
ponents affected by the renovation are free of
paint and other surface coatings that contain lead
equal to or in excess of 1.0 milligram per square
centimeter or 0.5 percent by weight. (Authorized
by and implementing K.S.A. 65-1,202; effective
June 23, 2000; amended April 9, 2010.)

28-72-53. Information distribution
requirements. (a) Renovations in target housing.
No more than 60 days before beginning renova-
tion activities in any residential dwelling unit of
target housing, the renovator shall perform the
following:
(1) Provide the owner of the unit with the pam-
phlet and renovation notice and comply with one
of the following:
(A) Obtain, from the owner, a written acknow-
ledgment that the owner has received the pam-
phlet and renovation notice; or
(B) obtain a certificate of mailing at least seven
days before the renovation; and
(2) if the owner does not occupy the dwelling
unit, provide an adult occupant of the unit with
the pamphlet and renovation notice and comply
with one of the following:
(A) Obtain from the adult occupant a written
acknowledgment that the occupant has received
the pamphlet and renovation notice, or certify in
writing that the pamphlet and renovation notice
have been delivered to the dwelling and that the
renovator has been unsuccessful in obtaining a
written acknowledgment from an adult occupant.
This certification shall include the following:
(i) The address of the unit undergoing
renovation;
(ii) the date and method of delivery of the pam-
phlet and renovation notice;
(iii) the names of persons delivering the pam-
phlet and renovation notice;
(iv) the reasons for lack of acknowledgment, in-
cluding the occupant’s refusal to sign and una-
vailability of adult occupants;
(v) the signature of the renovator; and
(vi) the date of signature; or
(B) obtain a certificate of mailing at least seven
days before the renovation.
(b) Renovations in common areas. No more
than 60 days before beginning renovation activi-
ties in common areas of multifamily housing, the
renovator shall perform the following:
(1) Provide the owner with the pamphlet and
renovation notice and comply with one of the
following:
(A) Obtain from the owner a written acknow-
ledgment that the owner has received the pam-
phlet and renovation notice; or
(B) obtain a certificate of mailing at least seven
days before the renovation;
(2) provide a pamphlet and a renovation notice
to each unit of the multifamily housing before the
start of renovation. This notification shall be ac-
complished by distributing written notice to each
affected unit. The notice from the renovator shall
describe the general nature and locations of the
planned renovation activities and the expected
starting and ending dates; and
(3) if the scope, location, or expected starting
and ending dates of planned renovation activities
change after the initial notification, provide fur-
ther written notification to the owners and occu-
pants providing revised information on the ongo-
ing or planned activities. This subsequent
notification shall be provided before the renovator
initiates work beyond that which was described in
the original notice.
(c) Written acknowledgment. Sample language
for the written acknowledgments required in par-
grahs (a)(1)(A), (a)(2)(A), and (b)(1)(A) shall be
provided by the KDHE upon request from the
renovator. These acknowledgments shall be writ-
ten in the same language as that in the text of the
contract agreement for the renovation or, in the
case of non-owner-occupied target housing, in the
same language as that in the lease or rental agree-
ment or the pamphlet and shall include the follow-
ing:
(1) A statement recording the owner or occu-
pant’s name and acknowledging receipt of the
pamphlet and renovation notice before the start
of renovation, the address of the unit undergoing
renovation, the signature of the owner or occup-
pant as applicable, and the date of the signature; and
(2) either a separate sheet or part of any written
contract or service agreement for the renovation.
(d) Lead poisoning prevention poster.
(1) Each commercial establishment that offers
paint or supplies intended for the removal or ap-
plication of paint shall display, in a conspicuous
location near the painting supplies, a poster con-
taining a warning statement, with the following information at a minimum:

(A) The dry sanding and the dry scraping of paint in dwellings built before 1978 are dangerous.

(B) The improper removal of old paint is a significant source of lead dust and the primary cause of lead poisoning.

(C) Renovators are required by regulation to notify owners and occupants of the hazards associated with lead paint before doing work.

The commercial establishment shall also include contact information so that consumers and renovators can obtain more information.

(2) Sample posters and materials that commercial establishments may use to comply with this subsection shall be available from KDHE.

(e) Compliance. A commercial establishment shall be deemed to be in compliance with this regulation if the commercial establishment displays the lead poisoning prevention poster as required in subsection (d) and makes the pamphlet available to its customers. (Authorized by and implementing K.S.A. 65-1,202; effective June 23, 2000; amended April 9, 2010.)

Article 73.—ENVIRONMENTAL USE CONTROLS PROGRAM


(b) “Applicant” means the owner, as defined in K.S.A. 65-1,222 (c) and amendments thereto, of an eligible property who submits to the secretary an application for approval of environmental use controls for the eligible property.

(c) “Eligible property” means real property that exhibits environmental contamination exceeding department standards for unrestricted use and that is being or has been investigated or remediated, or both, as a result of participating in a department-approved program.

(d) “Environmental contamination” means “pollution” or “contamination,” as those terms are used in the following acts and statutes, as well as any regulations adopted under the authority of those statutes, unless this act or any of the following acts specifically exclude or exempt certain forms of pollution or contamination from the provisions of this act:

(1) K.S.A. 65-3452a through K.S.A. 65-3457a, and amendments thereto, concerning hazardous substances;

(2) the voluntary cleanup and property redevelopment act, K.S.A. 65-34,161 through K.S.A. 65-34,174, and amendments thereto;

(3) the Kansas drycleaner environmental response act, K.S.A. 65-34,141 through K.S.A. 65-34,155, and amendments thereto;

(4) K.S.A. 65-3430 through K.S.A. 65-3447, and amendments thereto, concerning hazardous waste;

(5) K.S.A. 65-161 through K.S.A. 65-171y, and amendments thereto, concerning the waters of the state;

(6) the Kansas storage tank act, K.S.A. 65-34,100 through K.S.A. 65-34,130, and amendments thereto; and

(7) K.S.A. 65-3401 through K.S.A. 65-3427, and amendments thereto, concerning solid waste.

(e) “Environmental use control agreement” means a legal document specifically defining the environmental use controls and other related requirements for an eligible property according to K.A.R. 28-73-3. The agreement shall be issued by the secretary and shall be signed by the applicant. The signatures of the secretary and applicant shall be notarized, and as required by K.S.A. 65-1,225 and amendments thereto, the agreement shall be recorded by the register of deeds in the county where the eligible property is located.

(f) “Financial assurance” means any method of guaranteeing or ensuring adequate financial capability that is approved by the secretary as part of a long-term care agreement. One or more of the following methods of financial assurance may be required by the secretary as a part of a long-term care agreement:

(1) An environmental insurance policy;

(2) a financial guarantee;

(3) a surety bond guaranteeing payment or performance or a similar performance bond;

(4) an irrevocable letter of credit;

(5) documentation of the applicant’s qualification as self-insurer; and

(6) other methods the secretary determines are adequate to ensure the protection of public health and safety and the environment.

Federal and state governmental entities that qualify as applicants under these regulations shall not be required to provide financial assurance.

(g) “Legal description” means identification of the land boundaries of an eligible property that is subject to an environmental use control agreement. The identification of land boundaries shall
be provided by one or more of the following methods:

(1) A definite and unequivocal identification of lines and boundaries that contains dimensions to enable the description to be plotted and retraced and that describes the legal surveys by county and by at least one of the following additional identifiers:
   (A) Government lot;
   (B) aliquot parts; or
   (C) quarter section, section, township, and range;

(2) a metes and bounds legal survey commencing with a corner marked and established in the U.S. public land survey system; or

(3) the identifying number or other description of the subject lot, block, or subdivision if the land is located in a recorded subdivision or recorded addition to the subdivision.

(h) “Legal survey” means a boundary survey or land survey that is performed by a land surveyor licensed in the state of Kansas and that is conducted for both of the following purposes:

(1) Describing, documenting, and locating the boundary lines of an eligible property, a portion of an eligible property, or both; and

(2) plotting a parcel of land that includes the eligible property.

(i) “Long-term care agreement” means a legally binding document that is entered into as provided in K.A.R. 28-73-4 by an applicant and the secretary and that describes the responsibilities and financial obligations of the applicant to fund the department’s inspection and maintenance activities at a category 3 property, as described in K.S.A. 65-1,226 and amendments thereto.

(j) “Residual contamination” means environmental contamination remaining at a property that prohibits the unrestricted use of that property.

(k) “Unrestricted use” means that there are no limits or conditions placed on the use of a property, including use for residential purposes. (Authorized by and implementing K.S.A. 2007 Supp. 65-1,232; implementing K.S.A. 2007 Supp. 65-1,224 and 65-1,228; effective April 7, 2006; amended Jan. 30, 2009.)

Article 75.—HEALTH INFORMATION