

Bill 3126 "The Advancement in Stem Cell Cures and Therapies Act".

AUTHORITY:

Oklahoma State Board of Health; 63 O.S. Sections 1-105 and 1-2710 et seq.

COMMENT PERIOD:

February 2, 2009 through March 12, 2009. Interested persons may discuss informally the proposed rules with John Corpolongo, MS, Screening, Special Services, and Soonerstart; or may before March 12, 2009, submit written comment to John Corpolongo, MS, Chief, Screening, Special Services, and Soonerstart, Oklahoma State Department of Health, 1000 N.E. 10th Street, Oklahoma City, OK 73117-1299; or may at the hearing ask to present written or oral views.

PUBLIC HEARING:

Part of the regular meeting of the State Board of Health, March 12, 2009, which begins at 11:00 a.m. in Room 307 of the State Health Department Building, 1000 N.E. 10th Street, Oklahoma City, Oklahoma.

REQUESTS FOR COMMENTS FROM BUSINESS ENTITIES:

Business entities affected by these proposed rules are requested to provide the agency with information, in dollar amounts if possible, about the increase in level of direct costs, indirect costs, or other costs expected to be incurred by the business entity due to compliance with the proposed rules. Business entities may submit this information in writing before March 12, 2009 to John Corpolongo, MS, Screening, Special Services, and Soonerstart, Oklahoma State Department of Health, 1000 N.E. 10th Street, Oklahoma City, OK 73117-1299, or by e-mail to John@health.ok.gov.

COPIES OF PROPOSED RULES:

The proposed rules may be obtained for review from staff of Screening, Special Services, and Soonerstart, Oklahoma State Department of Health, 1000 N.E. 10th Street, Oklahoma City, OK 73117-1299.

RULE IMPACT STATEMENT:

Pursuant to 75 O.S., §303(D), a rule impact statement will be prepared and will be available at the same location listed above for reviewing and obtaining copies of the proposed rules.

CONTACT PERSON:

John Corpolongo, MS, Chief, Screening, Special Services, and Soonerstart, (405) 271-6617

[OAR Docket #09-59; filed 1-9-09]

TITLE 310. OKLAHOMA STATE DEPARTMENT OF HEALTH CHAPTER 661. HOSPICE

[OAR Docket #09-60]

RULEMAKING ACTION:

Notice of proposed PERMANENT rulemaking

PROPOSED RULES:

- Subchapter 1. General Provisions
 - 310:661-1-2 [AMENDED]
- Subchapter 2. Licenses
 - 310:661-2-1 [AMENDED]
 - 310:661-2-4 [AMENDED]
- Subchapter 3. Administration
 - 310:661-3-2 [AMENDED]
 - 310:661-3-3.1 [NEW]
- Subchapter 5. Minimum Standards
 - 310:661-5-1.1 [NEW]
 - 310:661-5-1.2 [NEW]
 - 310:661-5-1.3 [NEW]
 - 310:661-5-2 [AMENDED]
 - 310:661-5-2.1 [NEW]
 - 310:661-5-2.2 [NEW]
 - 310:661-5-2.3 [NEW]
 - 310:661-5-2.4 [NEW]
 - 310:661-5-3.1 [NEW]
 - 310:661-5-4.1 [NEW]
 - 310:661-5-6 [NEW]
 - 310:661-5-7 [NEW]
 - 310:661-5-8 [NEW]
 - 310:661-5-9 [NEW]
- Subchapter 6. Hospice Inpatient Service Requirements
 - 310:661-6-7 [AMENDED]

SUMMARY:

The proposed amendments to Subchapter 1 add certain definitions in order to clarify and provide standard meanings for terms used in proposed new language contained in subsequent sections of this rule; new terms include "Alternate administrative office", "Bereavement counseling", "Clinical note", "Comprehensive assessment", "Dietary counseling", "Employee", "Initial assessment", "Palliative care", and "Physician designee". Conforming changes have been made throughout the rule and obsolete language has been removed.

The existing rule language of Chapter 2 describes the licensure application and issuance process and establishes the fee structure. The amendments to Subchapter 2 add a new fee requirement of \$500.00 for each alternate administrative office requested as part of a licensed hospice. This new fee will help defray the Department's expenses associated with providing oversight for these additional licensed hospice locations.

The current rule language contained in Subchapter 3 explains the required elements for the administration and business practices of a licensed hospice. The proposed amendments add new language to give a more complete description of some of these required elements, removes obsolete and potentially contradictory language, and better defines certain practices such as those associated with the required initial certification of a terminal illness and training of personnel. Amendments to this Subchapter also add a new section of rule that specifies the content of clinical records, describes how these records are protected, transferred, and retrieved, as well as how entries are authenticated.