

**DISTRICT OF COLUMBIA
DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS**

ERRATUM

The Director of the Department of Consumer and Regulatory Affairs (DCRA), pursuant to the authority set forth in D.C. Official Code § 47-2853.10(a)(12) and Mayor's Order 2000-70, dated May 2, 2000, D.C. Official Code § 42-1305(2) and Mayor's Order 99-82, dated May 21, 1999, hereby gives errata notice of final rulemaking action taken by the Director published in the D.C. Register at 54 DCR 1303 on February 9, 2007, which amended sections 2701.1 and 2708.13 of DCMR Title 17 Chapter 27. The original Notice of Final Rulemaking contained a typographical error in the paragraph numbered three (3) in section 2708.13.

The corrected section 2708.13 paragraph three (3) is republished as follows:

“3. When does the Seller's Disclosure Statement have to be provided to the Purchaser?
In a sale, before or at the time the prospective transferee executes a purchase agreement with the transferor. In an installment sales contract (where a binding purchase contract has not been executed), or in the case of a lease with an option to purchase, before or at the time the prospective transferee executes the installment sales contract or lease with the transferor.”

DISTRICT DEPARTMENT OF THE ENVIRONMENT

NOTICE OF FINAL RULEMAKING

The Acting Director of the District Department of the Environment, pursuant to authority of section 6 of the District of Columbia Hazardous Waste Management Act of 1977, effective March 16, 1978 (D.C. Law 2-64; D.C. Official Code § 8-1305 (2001)); Mayor's Order 2005-70, dated April 19, 2005 (52 DCR 5495); Section 107 of the District Department of the Environment Establishment Act of 2005, effective February 15, 2006 (D.C. Law 16-51; D.C. Official Code § 8-151.07(4) (2001)); and Mayor's Order 2006-61, dated June 14, 2006 (53 DCR 5684), hereby gives notice of his intent to take final rulemaking action to amend the Hazardous Waste Regulations in chapters 42 and 43 of Title 20 of the District of Columbia Municipal Regulations (DCMR).

The proposed rules were published at 53 *D.C. Register* page 10329 on Dec 29, 2006. On April 5, 2006, the proposed rulemaking was submitted to the Council of the District of Columbia for a forty-five (45) day period of review. The proposed rulemaking was deemed approved on June 15, 2007.

No comments were received concerning these rules during the public comment period and no changes have been made since their publication as a Notice of Proposed Rulemaking. These final rules will be effective upon publication of this notice in the *D.C. Register*.

Deletions are shown in strikethrough and new language in bold and underlined.

Title 20 (Environment) of the District of Columbia Municipal Regulations is amended as follows:

A. Chapter 42, STANDARDS FOR THE MANAGEMENT OF HAZARDOUS WASTE AND USED OIL, is amended as follows:

- 1) By striking the phrases "2004 Supp." and "2005 Supp." wherever they appear and inserting the figure "(2001)" in their place.
- 2) By striking the phrase "Department of Health" wherever it appears and inserting the phrase "District Department of the Environment" in its place.
- 3) Section 4201, RULES OF INTERPRETATION FOR FEDERAL REGULATIONS INCORPORATED BY REFERENCE, is amended as follows:
 - a) Subsection 4201.3 is amended to read as follows:

4201.3 Unless specified otherwise, whenever a provision in the Hazardous Waste Management Regulations refers to Volume 40 of the *Code of Federal Regulations* (40 CFR), the provision shall refer to ~~Volume 40 revised as of July 1, 2004~~ **the most recently updated Volume 40 in publication and any amendments thereto.**

- b) Subsection 4201.4 is amended to read as follows:

4201.4 Unless specified otherwise, whenever a provision in the Hazardous Waste Management Regulations refers to a volume of the *Code of Federal Regulations* other than Volume 40, the **provision** ~~citation~~ shall refer to the ~~volume published as of July 1, 2004, and any amendments to the volume since its last revision date that were published in the Federal Register on or before June 30, 2004~~ **most recently updated volumes in publication and any amendments thereto.**

- 4) Section 4206, RECORD-RETENTION AND REPORTING REQUIREMENTS, subsection 4206.2 is amended to read as follows:

4206.2 Whenever the RCRA regulations in 40 CFR Parts 124, 260 through 266, 268, 270, 273, and 279 require that a document be sent to EPA, DOT, or another federal agency, the person required to send the document to EPA, DOT, or other federal agency shall,

at the same time, send a copy to the Department's Hazardous Waste Division at the following address:

DOH/EHA District Department of the Environment
Bureau of Hazardous Material and Toxic Substances BHMTS
Hazardous Waste Division
51 N Street, N.E., Third Floor
Washington, D.C. 20002.

B. Chapter 43, HAZARDOUS WASTE MANAGEMENT REGULATIONS ADMINISTRATION AND ENFORCEMENT, is amended as follows:

- 1) By striking the phrases "2004 Supp." and "2005 Supp." wherever they appear and inserting the figure "(2001)" in their place.
- 2) Section 4300.1 is amended by striking the phrase "Department of Health" and inserting the phrase "District Department of the Environment" in its place.
- 3) Section 4390, FEE SCHEDULE, is amended as follows:
 - a) Subsections 4390.1 through 4390.4 are amended to read as follows:

4390.1 Except as provided in § 4390.5, each conditionally exempt small quantity generator shall pay an annual permit fee of two hundred dollars (\$200) for each generating site on or before March 1 of each year, ~~for the following calendar year or any portion thereof.~~

4390.2 Except as provided in § 4390.5, each small quantity generator of one hundred (100) to one thousand (1000) kilograms of hazardous waste per calendar month shall pay an annual permit fee of five hundred dollars (\$500) for each generating site on or before March 1 of each year, ~~for that following calendar year or any portion thereof.~~

4390.3 Except as provided in § 4390.5, each large quantity generator shall pay an annual permit fee of one thousand dollars (\$1000) for each generating site on or before March 1 of each year, ~~for that following calendar year or any portion thereof.~~

4390.4 Except as provided in § 4390.5, each owner or operator of a universal waste transfer facility, used oil transfer facility, or used oil processor or re-refiner shall pay an annual permit fee of five hundred dollars (\$500) on or before March 1 of each year, ~~for that following calendar year or any portion thereof.~~

b) Subsection 4390.8 is amended to read as follows:

4390.8 The owner or operator of a facility or unit permitted under § 4270 shall pay an annual facility permit fee of two thousand, five hundred dollars (\$2500) on or before March 1 of each year, for that following calendar year or any portion thereof.

c) Subsection 4390.12 is deleted.

4) Section 4399, DEFINITIONS, is amended as follows:

a) To add the following definitions:

i) **CFR - the Code of Federal Regulations, which includes the most recently updated volumes in publication and any amendments thereto.**

ii) **D.C. Code - the District of Columbia (D.C.) Official Code. All D.C. Official Code citations are to the volumes published in 2001 as revised by the codifier through annual supplements.**

iii) **D.C. Official Code - the District of Columbia (D.C.) Official Code. All D.C. Official Code citations are to the volumes published in 2001 as revised by the codifier through annual supplements.**

b) The definition of "Department" is amended to read as follows:

Department – the District Department of ~~Health~~ the **Environment** or a successor agency.

c) The definition of "Director" is amended to read as follows:

Director – the Director of the District **Department of the Environment** ~~Department of Health~~ or his or her designee.

DEPARTMENT OF HEALTH**NOTICE OF FINAL RULEMAKING**

The Director of the Department of Health, pursuant to the authority set forth in section 19(a)(3) of the District of Columbia Pharmacist and Pharmacy Regulation Act of 1980, effective September 16, 1980, (D.C. Law 3-98; D.C. Official Code § 47-2885.18(a)(3)); the District of Columbia Uniform Controlled Substances Act of 1981, effective August 5, 1981, (D. C. Law 4-29; D.C. Official Code § 48-901.01 *et seq.*); Mayor's Order 98-48, dated April 15, 1998, Section 4902 of the Fiscal Year 2002 Budget Support Act of 2001, effective October 3, 2001, (D.C. Law 14-28; D.C. Official Code § 7-731); Section 15 of the District of Columbia Drug Manufacture and Distribution Licensure Act of 1990, effective June 13, 1990, (D.C. Law 8-137; D.C. Official Code § 48-714(a)); and Mayor's Order 98-88, dated May 29, 1998; hereby gives notice of his intent to take final rulemaking action to adopt the following amendment to Title 22 of the District of Columbia Municipal Regulations (DCMR) in not less than thirty (30) days from the date of publication of this notice in the D.C. Register. The purpose of the amendment is to repeal Chapter 5 (Drug Control). This chapter implemented the Dangerous Drug Act - the Act of July 24, 1956, Chapter 7 of Title 33, District of Columbia Code (70 Stat. 612). The Dangerous Drug Act was superceded by the District of Columbia Uniform Controlled Substances Act of 1981, effective August 5, 1981, (D. C. Law 4-29; D.C. Official Code § 48-901) rendering Chapter 5 obsolete.

These rules were previously published as proposed rulemaking on April 20, 2007 at 54 DCR 3548. No comments were received in connection with this notice and no substantive changes have been made to the regulations. This rulemaking will become effective upon publication of this notice in the D.C. Register.

TITLE 22 District of Columbia Municipal Regulations, (PUBLIC HEALTH AND MEDICINE)(August 1986) is amended as follows:

Chapter 5 (DRUG CONTROL) is repealed in its entirety.

DISTRICT OF COLUMBIA DEPARTMENT OF HEALTH

NOTICE OF FINAL RULEMAKING

The Director of the Department of Health, pursuant to the authority set forth in section 1301 of the Assisted Living Residence Regulatory Act of 2000 (hereinafter "the Act"), effective June 24, 2000, D.C. Law 13-127, D.C. Official Code § 44-101.01 *et seq.*, at 44-113.01, and in accordance with Mayor's Order 2005-137, dated September 27, 2005, hereby gives notice of the adoption of the following new Chapter 101 of Title 22 of the District of Columbia Municipal Regulations. These rules establish licensing fees for assisted living residences. Proposed rules were published in the *D.C. Register* on November 10, 2006; no comments were received that necessitated a change. In addition, the required forty-five (45) day Council review period is complete.

The purpose of this rulemaking is to protect the health and safety of individuals receiving assisted living services in the District of Columbia. These rules currently set licensing fees; subsequent amendments will set forth, as needed, standards in addition to those contained in the Act under which licensed assisted living residences must operate. Enforcement actions for violation of any provision of this Chapter shall be implemented pursuant to the procedures contained in 22 DCMR Chapter 31.

Title 22 DCMR is amended by adding the following new Chapter 101:

ASSISTED LIVING RESIDENCES**10100 GENERAL PROVISIONS**

10100.1 These rules are implemented pursuant to and in accordance with the Assisted Living Residence Regulatory Act of 2000 (hereinafter "the Act"), effective June 24, 2000, D.C. Law 13-127, D.C. Official Code § 44-101.01 *et seq.* Each assisted living residence must comply with the Act and with these rules, which together constitute standards for licensing and operation of assisted living residences within the District of Columbia.

10101 FEES

10101.1 As provided in Section 302(b) of the Act, each assisted living residence facility seeking an initial license shall pay a base fee of one hundred dollars (\$100.00), plus a fee of six dollars (\$6.00) per resident based on license capacity. These fees shall be paid at the time of the facility's application for the initial license.

10101.2 As provided in Section 304(d) of the Act, each assisted living residence facility seeking a renewal of its license shall pay a base fee of one hundred

dollars (\$100.00), plus a fee of six dollars (\$6.00) per resident based on license capacity. These fees shall be paid at the time of the facility's application for the renewal license.

10101.3 Each assisted living residence facility seeking an initial license or renewal license which fails to submit its application timely, as provided in Sections 302(a) and 304(b) of the Act, shall pay, in addition to the base fee and per-resident fee specified herein, a late fee of one hundred dollars (\$100.00). This fee shall be paid at the time of the facility's application for the license.

10101.4 As provided in Section 305 of the Act, each assisted living residence facility seeking a revised license as required due to changes within the facility shall pay the following fees, as applicable, which fees shall be paid at the time of the facility's request for revision of the license:

- (a) For a revision based on changes any of which require re-inspection of the facility, a base fee of one hundred dollars (\$100.00), plus a fee of six dollars (\$6.00) per resident based on license capacity; or
- (b) For a revision based on changes which do not require re-inspection of the facility, a fee of one hundred dollars (\$100.00).

10102 – 10199 RESERVED

DEPARTMENT OF HEALTH

NOTICE OF FINAL RULEMAKING

The Director of the Department of Health, pursuant to the authority set forth in An Act to enable the District of Columbia to receive Federal financial assistance under Title XIX of the Social Security Act for a medical assistance program, and for other purposes, approved December 27, 1967 (81 Stat. 744; D.C. Official Code § 1-307.02), and Mayor's Order 97-42, dated February 18, 1997, hereby gives notice of the adoption of an amendment to section 964 to Chapter 9 of Title 29 of the District of Columbia Municipal Regulations (DCMR) entitled "Medicaid Reimbursement for Adult Dental Services". The Director took final rulemaking action to adopt these rules on May 23, 2007. These rules authorize a dental reimbursement rate to support the State Plan Amendment that expands the coverage of dental services to all eligible adult Medicaid recipients. A Notice of Emergency and Proposed Rulemaking was published April 20, 2007, at 54 DCR 3591. In response to the Notice of Emergency and Proposed Rulemaking, the Department received one comment urging that the reimbursement rate be the same for adult Medicaid recipients as for juvenile Medicaid recipients. A review of the reimbursement rates for the dental services disclosed that the rates of reimbursement for adult and juvenile Medicaid recipients were identical. Therefore, no changes have been made since publication of the Notice of Emergency and Proposed Rulemaking.

The State Plan Amendment authorizing these rules was approved by the Council of the District of Columbia on November 14, 2006, by Resolution 16-875, the Expansion of Adult Dental Services Emergency Approval Resolution of 2006, published December 1, 2006, at 53 DCR 9540. These final rules will become effective upon publication of this notice in the *D.C. Register*.

Chapter 9 of Title 29 DCMR (Medicaid Program) is amended by adding the following new section 964.3 to Section 964, to read as follows:

SECTION 964 ADULT DENTAL SERVICES

964.3 The reimbursement rates for dental services provided on or after April 1, 2007, to eligible Medicaid recipients over the age of twenty-one (21) shall be as follows:

DESCRIPTION OF SERVICE	RATE
Periodic Dental Screening	\$35.00
Limit Oral Eval Problm Focus	\$50.00
Comprehensive Oral Evaluation	\$77.50
Extensive Oral Eval Prob Focus	\$67.50
Re-Eval Est Pt. Problem Focus	\$45.00
Comp Periodontal Evaluation	\$77.50
Intraor Complete Film Series	\$91.00
Periapical X Ray; First Film	\$20.00
Periapical X Ray; Each Additional FL	\$16.00
Occlusal X Ray	\$29.00
Bitewing, Single First Film	\$21.00
Dental Bitewings Two Films	\$40.00

DESCRIPTION OF SERVICE	RATE
Dental Bitewings Four Films	\$48.00
P.A. Film	\$100.00
Panorex	\$80.00
Cephalometric Film	\$100.00
Pulp Test	\$39.00
Study Models	\$75.00
Preventive Prohylaxis (Adult)	\$77.50
Topical Fluor W/O Prophy Adult	\$26.00
Dental Sealants	\$38.00
Fixed, Band Type	\$230.00
Fixed, Band Type Bilat (New)	\$325.00
Amalgam One Surface, Permanent	\$90.00
Amalgam Two Surfaces, Permanent	\$115.00
Amalgam Three Surfaces, Permanent	\$139.00
Amalgam Four Surfaces, Permanent	\$165.00
Acrylic or Plastic Restoration, III	\$106.00
Resin Two Surfaces Anterior	\$135.00
Composite Resin 3 Surfaces Restoration	\$165.00
Esthetic Restoration Class IV	\$200.00
Resin Based Composite One Surface	\$120.00
Resin Based Composite Two Surface	\$160.00
Resin Based Composite Three Surface	\$200.00
Temporary Crown	\$55.00
Dowel Post	\$45.00
Replacement Crown	\$75.00
Pulp Cap Direct Excluding Final Rest	\$55.00
Pulpotomy	\$134.00
One Canal; Excludes Final Restoration	\$498.00
Two Canals; Excludes Final Restoration	\$591.00
Three Canals; Excludes Final Restoration	\$728.00
Retreatment of Previous Root Canal	\$657.00
Apexification/Recalcification Initial Visit	\$248.00
Apicoectomy	\$467.00
Apicoectomy/Periradicular Surg (Ea Add'l)	\$248.00
Retrograde Amalgam	\$180.00
Gingivectomy or Gingivoplasty, 5 MOR.T	\$446.00
Gingivectomy or Gingivoplasty, 1 T to 3 T	\$160.00
Gingival Flap Proc W/ Planin	\$125.00
Gngvl Flap W Rootplan 1-3 Th	\$125.00
Bone Replacement Graft 1 st	\$452.00
Bone Replacement Graft-Ea add'l site Quad	\$339.00
Deep Scaling	\$181.00
Full Mouth Debridement	\$130.00
Complete Upper Denture	\$1,120.00
Complete Lower Denture	\$1,125.00

DESCRIPTION OF SERVICE	RATE
Upper Partial	\$375.00
Dentures Maxill Part Resin	\$838.00
Dentures Maxill Part Metal	\$1,200.00
Dentures Mandibl Part Metal	\$1,200.00
Repair Broken Complete Denture	\$145.00
Replace FX Broken & Tooth on Denture	\$125.00
Extraction Erupted Tooth	\$110.00
Extraction of Tooth, Erupted	\$192.00
Extraction of Tooth, Soft Tiss. Imp	\$210.00
Extraction of Tooth Partial Bony	\$285.00
Extraction of Tooth, Complete Bony, Impac	\$350.00
Impact Tooth Rem Bony W/Comp	REVIEW REQUIRED
Root Tips	\$350.00
Replantation Of Tooth With Splint	\$375.00
Surgical Exposure Of Boney Impaction	\$341.00
Mobilization Erupted	\$352.00
Biopsy of Oral Tissue Soft	\$201.00
Alveolectomy with Extraction	\$200.00
Alveoplasty not in conj w/lect. per quad	\$295.00
Stomatoplasty per arch uncomplicated	\$635.00
Excision Of Benign Lesion To 1	REVIEW REQUIRED
Excision Benign Lesion Compl	REVIEW REQUIRED
Excision Malig Lesion<=1.25c	REVIEW REQUIRED
Excision Malig Lesion>1.25cm	REVIEW REQUIRED
Excision Malig Les Complicat	REVIEW REQUIRED
Excision of Canula	\$330.00
Incision Drainage Abscess, Intraoral	\$155.00
Incision & Drainage Extraoral	\$250.00
Curettage Of Fistulous Tract	\$247.00
Fx,Open Reduction Maxilla	REVIEW REQUIRED
Fx,Closed Reduction Maxilla	REVIEW REQUIRED
Fx,Open Reduction Mandible	REVIEW REQUIRED
Fx,Closed Reduction Mandible	REVIEW REQUIRED
Fx, Open Reduction Zygomatic A	REVIEW REQUIRED
Closed Reduction Of Dislocation	\$112.50
Condylectomy	\$675.00
Meniscectomy	\$630.00
Arthrotomy	\$450.00
Arthrocentesis	\$ 36.00
Sutures	\$190.00
Debridement & Repair Of Soft Tissue	\$307.00
Osteoplasty(Prognathism, Microg)	\$975.00
Frenulectomy	\$313.00
Intercep Dental Tx Primary	REVIEW REQUIRED
Compre Dental Tx Adolescent	REVIEW REQUIRED

DESCRIPTION OF SERVICE	RATE
Bite Plane	\$166.00
Fixed Appliance Therapy	\$677.00
Orthodontic Procedure	REVIEW REQUIRED
Palliative Treatment of Dental Pain	\$85.00
General Anesthesia	\$260.00
Sedation Ea. Add'l 15 min	\$112.00
Nitrous	\$ 46.00
Consultation	\$112.50
Hospital Visit	\$33.00
Consultant Evaluation Exam	\$67.50
Occlusal Equilibration by Report	\$40.00
Occlusal Adjustment Ltd	\$116.00
Occlusal Adjustment Complete	\$474.00

**DISTRICT OF COLUMBIA
DEPARTMENT OF INSURANCE, SECURITIES, AND BANKING**

NOTICE OF FINAL RULEMAKING

The Commissioner of the Department of Insurance, Securities, and Banking ("Commissioner"), pursuant to the authority set forth in sections 12 and 23 of the Health Maintenance Organization Act of 1996 ("Act"), effective April 9, 1997 (D.C. Law 11-235, D.C. Official Code §§ 31-3411 and 31-3422 (2001)), hereby gives notice of adoption of the following amendments to Chapter 31 (Investment Guidelines for Health Maintenance Organizations) of Title 26 (Insurance) of the District of Columbia Municipal Regulations. The purpose of the amendments is to authorize health maintenance organizations to deposit invested securities in clearing corporations. The Notice of Proposed Rulemaking was published in the D.C. Register at 53 DCR 10105 (December 22, 2006). No comments were received.

Chapter 31 (Investment Guidelines for Health Maintenance Organizations) of Title 26 (Insurance) of the District of Columbia Municipal Regulations is amended as follows:

A new section 3104 is added to read as follows:

3104 DEPOSIT OF SECURITIES IN CLEARING CORPORATIONS

- 3104.1 An HMO may deposit or arrange for the deposit of securities held in or purchased for its general account in a clearing corporation.
- 3104.2 When securities are deposited with a clearing corporation, certificates representing securities of the same class of the same issuer may be merged and held in bulk in the name of the nominee of the clearing corporation with any other securities deposited with the clearing corporation by any person, regardless of the ownership of the securities, and certificates representing securities of small denominations may be merged into one or more certificates of larger denominations.
- 3104.3 The records of a custodian through which an HMO holds securities in a clearing corporation shall at all times show that the securities are held for the HMO and shall show the accounts for or in which the securities are held.
- 3104.4 Ownership of, and other interests in, the securities in a clearing corporation may be transferred by bookkeeping entry on the books of the clearing corporation without physical delivery of certificates representing the securities.

Section 3199 is amended to read as follows:

3199 DEFINITIONS

3199.1 "Admitted asset" means the investments authorized or permitted under this chapter, and in addition, includes only the following:

- (a) Petty cash and other cash funds in the HMO's principal or official branch office(s) and under the control of the HMO;
- (b) Immediately withdrawable funds on deposit in demand accounts, in a bank, savings bank, or trust company as defined in subsection 3199.4, or like funds actually in the principal or any official branch office at statement date, and in transit to such bank, savings bank or trust company with authentic deposit credit given prior to the close of business on the fifth (5th) bank working day following the statement date;
- (c) The amount fairly estimated as recoverable on cash deposited in a closed bank, savings bank, or trust company, if qualifying under subsection 3199.4 prior to the suspension of such bank, savings bank or trust company;
- (d) Bills and accounts receivable collateralized by securities of the kind in which the HMO is authorized to invest;
- (e) Premiums receivable from: (1) groups or individuals which are not more than sixty (60) days past due; and (2) the District, the United States, any state of the United States or any political subdivision thereof which is not more than ninety (90) days past due;
- (f) Amounts due under insurance policies or reinsurance arrangements from insurance companies authorized to do business in the District;
- (g) Tax refunds due from the District, the United States, any state of the United States or any political subdivision thereof;
- (h) The interest accrued on mortgage loans conforming to the requirements of this chapter, not exceeding in aggregate amount on an individual loan of one year's total due and accrued interest;
- (i) The rents accrued and owing to the HMO on real and personal property, directly or beneficially owned, not exceeding on each individual property the amount of one year's total due and accrued rent;
- (j) Interest or rents accrued on conditional sales agreements, security interests, chattel mortgages, and real or personal property under lease to other

corporations, all conforming to the provisions of this chapter, and not exceeding on any individual investment, the amount of one year's total due and accrued rent;

- (k) The fixed and required interest due and accrued on bonds and other like evidences of indebtedness, conforming to the provisions of this chapter, and not in default;
- (l) Dividends receivable on shares of stock conforming to the provisions of this chapter, provided that the market price taken for valuation purposes does not include the value of the dividend;
- (m) The interest or dividends due and payable, but not credited, on deposits in banks, savings banks and trust companies, or on accounts with savings and loan associations;
- (n) Interest accrued on secured loans conforming to the provisions of this chapter, not exceeding the amount of one year's interest on any loan;
- (o) Interest accrued on tax anticipation warrants;
- (p) The amortized value of electronic computer or data processing machines or systems purchased for use in connection with the business of the HMO, including software purchased and developed specifically for the HMO's use and purposes;
- (q) Amounts due from affiliates pursuant to management contracts or service agreements which meet the requirements of D.C. Code § 35-3003 to the extent that the affiliate has liquid assets with which to pay the balance and maintain its accounts on a current basis; provided that the aggregate amount due from affiliates may not exceed the lesser of ten percent (10%) of the organization's admitted assets or twenty-five percent (25%) of the HMO's net worth as defined in this chapter. Any amount outstanding more than three (3) months shall be deemed not current. For purpose of this paragraph "affiliates" shall have the same meaning as that term is defined in D.C. Code § 35-3701;
- (r) Intangible assets, including, but not limited to, organization good will and purchased good will, to the extent reported in the most recent annual or quarterly financial statement filed with the Commissioner after April 9, 1997. However, such assets shall be amortized, by the straight-line method, to a value of zero no later than December 31, 1999; provided, however, that no HMO shall be required pursuant to the foregoing provision to amortize such assets in an amount greater than \$ 300,000 in any one year, and in cases where

amortization of such assets by December 31, 1999 would otherwise require amortization of an annual amount in excess of \$ 300,000, the HMO shall be required only to amortize such assets at a rate of \$ 300,000 per year until all such assets have been amortized to a value of zero, unless the continuation of the current amortization schedule would result in an earlier zero value, in which case the current amortization schedule shall be applied;

- (s) Amounts due from patients or enrollees for health care services rendered which are not more than sixty (60) days past due;
 - (t) Amounts advanced to providers under contract to the organization for services to be rendered to enrollees pursuant to the contract. Amounts advanced must be for a period of not more than three (3) months and must be based on historical or estimated utilization patterns with the provider and must be reconciled against actual incurred claims at least semi-annually. Amounts due in the aggregate may not exceed fifty percent (50%) of the organization's net worth as defined in subsection 3199.13. Amounts due from a single provider may not exceed the lesser of five percent (5%) of the HMO's admitted assets or ten percent (10%) of the HMO's net worth;
 - (u) Cost reimbursement due from the Health Care Financing Administration of the U.S. Department of Health and Human Services, for furnishing covered medicare services to medicare enrollees which are not more than twelve (12) months past due; and
 - (v) Prepaid rent or lease payments no greater than three (3) months in advance, on real property used for the administration of the HMO's business or for the delivery of medical care.
- 3199.2 "Bank, savings bank or trust company" means any bank, savings bank or trust company organized and supervised under the laws of the District, the United States or any state thereof, if the bank, savings bank or trust company has the insurance protection afforded by an agency of the United States.
- 3199.3 "Business corporation" means a corporation organized for other than not-for-profit purposes.
- 3199.4 "Business entity" means a sole proprietorship, a corporation, an association, a partnership, a limited partnership, a business trust, or a limited liability company.
- 3199.5 "Capital" means capital stock paid up, if any, and its use in a provision does not imply that a not for profit HMO without stated capital stock is excluded from the provision. The capital of such an HMO will be zero.

- 3199.6 "Clearing corporation" means:
- (a) A clearing corporation as defined in section 28:8-102(a)(5) of the District of Columbia Official Code;
 - (b) With respect to securities issued by institutions organized or existing under the laws of a foreign country or securities used to meet the deposit requirements pursuant to the laws of a foreign country as a condition of doing business in the foreign country, a corporation that is organized or existing under the laws of a foreign country and that is legally qualified under those laws to effect transactions in securities by computerized book-entry; and
 - (c) The Treasury/Reserve Automated Debt Entry System and the Treasury Direct book-entry securities system described in part 357 of title 31 of the U.S. Code of Federal Regulations.
- 3199.7 "Custodian" means a national bank, state bank, trust company, or broker/dealer that participates in a clearing corporation."
- 3199.8 "Direct" when used in connection with "obligation" means that the designated obligor shall be primarily liable on the instrument representing the obligation.
- 3199.9 "District" means the District of Columbia.
- 3199.10 "Facility" means and includes real estate and any and all forms of tangible personal property and services used constituting an operating unit.
- 3199.11 "Guaranteed or insured" means that the guarantor or insurer will perform or insure the obligation of the obligator or will purchase the obligation to the extent of the guaranty or insurance.
- 3199.12 "Mortgage" shall include a trust deed or other lien on real property securing an obligation for the payment of money.
- 3199.13 "Security" has the same meaning as in section 28:8-102(a)(15) of the District of Columbia Official Code.
- 3199.14 "Servicer" means a business entity that has a contractual obligation to service a pool of mortgage loans. The service provided shall include, but is not limited to, collection of principal and interest, keeping the accounts current, maintaining or confirming in force hazard insurance and tax status and providing supportive accounting services.

- 3199.15 "Single credit risk" means the direct, guaranteed or insured obligations of any one business entity including affiliates thereof.
- 3199.16 "Surplus" means the amount properly shown as total net worth on a company's balance sheet, plus all voluntary reserves, but not including capital paid-up.
- 3199.17 "Tangible net worth" means the par value of all issued and outstanding capital stock of a corporation (or in the case of shares having no par value, the stated value) and the amounts of all surplus accounts less the sum of:
- (a) Such intangible assets as deferred charges, organization and development expense, discount and expense incurred in securing capital, good will, trademarks, trade names and patents;
 - (b) Leasehold improvements; and
 - (c) Any reserves carried by the corporation and not otherwise deducted from assets.
- 3199.18 "Unconditional" when used in connection with the term "obligation" means that nothing remains to be done or to occur to make the designated obligor liable on the instrument, and that the legal holder shall have the status at least equal to that of general creditor of the obligor."

**PUBLIC SERVICE COMMISSION OF THE DISTRICT OF COLUMBIA
1333 H STREET, N.W., SUITE 200, WEST TOWER
WASHINGTON, DC 20005**

NOTICE OF FINAL RULEMAKING

**ET00-2, IN THE MATTER OF POTOMAC ELECTRIC POWER COMPANY'S
PUBLIC SPACE OCCUPANCY SURCHARGE ELECTRICITY TARIFF, P.S.C.-
D.C. No. 1**

1. The Public Service Commission of the District of Columbia ("Commission") hereby gives notice, pursuant to Section 2-505 of the District of Columbia Official Code,¹ of its final rulemaking action taken in the above-captioned proceeding.

2. Pursuant to D.C. Official Code Section 10-1141.6,² Potomac Electric Power Company's ("Pepco") filed with the Commission an updated Rider "PSOS" - Public Space Occupancy Surcharge on February 12, 2007.³ In the filing, Pepco shows the process to be used to recover from its customers the fees paid by Pepco to the District of Columbia Government for the rental of public structures in public space. Specifically, Pepco proposes to amend the following tariff pages:

ELECTRICITY TARIFF, P.S.C.-D.C. No. 1

32nd Revised Page No. R-1

32nd Revised Page No. R-2

25th Revised Page No. R-2.1

1st Revised Page No. 2.2

8th Revised Page No. R-33

3. In its filing, Pepco states that its "updated Rider PSOS surcharge is to become effective with meter readings on and after March 1, 2007."⁴ The updated Rider

¹ D.C. Official Code § 2-505 (2001 Ed.).

² D.C. Official Code § 10-1141.06 (2001 Ed.), states that [e]ach public utility company regulated by the Public Service Commission shall recover from its utility customers all lease payments which it pays to the District of Columbia pursuant to this title through a surcharge mechanism applied to each unit of sale and the surcharge amount shall be separately stated on each customer's monthly billing statement.

³ *ET00-2, In The Matter Of Potomac Electric Power Company's Public Occupancy Surcharge Electricity Tariff, P.S.C.-D.C. No. 1*, Letter to Dorothy Wideman, Commission Secretary, from Paul H. Harrington, Associate General Counsel, re: *Rider "PSOS"*, filed February 12, 2007 (hereinafter referred to as "Rider PSOS").

⁴ *ET00-2, Rider PSOS* at 1.

PSOS will consist of two parts: 1) one part reflects the payments made by Pepco to the District of Columbia for the current calendar year and 2) another part that reflects the over or under recovery from the prior year. The supporting calculations for the updated Rider PSOS illustrate a change from \$0.00154 per kilowatthour to 0.00219 per kilowatthour, an increase of 42.2 percent in the surcharge rate.⁵ In addition, Pepco asserts that the Rider PSOS is to be updated annually, commencing March 1, 2007.⁶

4. A Notice of Proposed Rulemaking was published in the *D.C. Register* on March 2, 2007.⁷ No comments were filed in response to the filing. Subsequently, the Commission approved Pepco's Rider PSOS filing by Order No. 14301. Pepco's Rider Public Space Occupancy Surcharge will become effective upon the date of publication of this Notice of Final Rulemaking in the *D.C. Register*.

⁵ ET00-2, Rider PSOS at 1

⁶ ET00-2, Rider PSOS at 1.

⁷ 54 *D.C. Reg.* 1892-1893 (2007).

DISTRICT OF COLUMBIA TAXICAB COMMISSION

NOTICE OF FINAL RULEMAKING

The Chairperson of the District of Columbia Taxicab Commission pursuant to the authority set forth under § 14 (a) of the District of Columbia Taxicab Commission Establishment Act of 1985, effective March 25, 1986, D.C. Law 6-97; D.C. Official Code § 50-307 (b) (1) (J), 50-308 (b), and 50-313 (a), and Mayor's Order 87-156, dated July 1, 1987, hereby gives notice of his final rulemaking action taken on May 9, 2007, to add section 1201.7 to Chapter 12 of Title 31 of the District of Columbia Municipal Regulations ("DCMR"). The notice of proposed rulemaking was published in the *DC Register* on March 16, 2007. The final rulemaking requires limousine operators to maintain a written or printed manifest. A public hearing was held on April 11, 2007, and no comments were received by the Commission. This rule will become effective on the date this notice in the D.C. Register.

The following section in 31 DCMR Chapter 12 is added as follows:

1201 GENERAL REQUIREMENTS

1201.7 Every operator of a limousine shall maintain an itinerary/trip ticket, work order, log sheet or electronic device that contains a daily log of all trips engaged in during the operation of the vehicle. The operator is also required to transfer information from an electronic device or cellular telephone from which it was retrieved to a written or printed format which shall be considered a manifest. The format shall consist of an itinerary/trip ticket, work order or log sheet and shall contain, but not be limited to, the following:

- (a) the date;
- (b) time of pick up;
- (c) address or location of the pick up;
- (d) final destination; and
- (e) time of discharge.