

DISTRICT OF COLUMBIA BOARD OF EDUCATION

NOTICE OF FINAL RULEMAKING

The Executive Director of the D.C. Board of Education (Board), pursuant to the authority set forth in D.C. Code, 2001 edition, Section 38-101, hereby gives notice of final rulemaking action taken by the Board at its March 15, 2006 Board meeting to amend Chapter 37 of the Board Rules, Title 5 of the D.C. Municipal Regulations, regarding procurement and negotiated services contracts. The revisions amend Section 3702.10 and add a new Section 3702.11. These revisions will do the following: 1) changes the Board contract approval level from \$100,000 to \$500,000, 2) requires the Superintendent to submit to the Board a monthly report listing all approved contract actions, 3) requires the Superintendent to certify that all contract actions comply with federal and local laws, and 4) requires the Superintendent to report monthly on compliance with the requirements of the "Small, Local, and Disadvantaged Business enterprise Development and Assistance Emergency Act of 2005."

The final rulemaking will take effect upon its publication in the *D.C. Register*. The proposed rulemaking on this subject was published in the *D.C. Register* on February 3, 2006.

Amend Section 3702.10:

3702.10 Requests for the acquisition and purchase of services and goods ~~one~~ valued five hundred thousand dollars (\$100,000\$500,000) or more ~~not in the aggregate in value, other than for bulk purchases,~~ shall be submitted in advance to the Board of Education for approval. ~~If the Board does not, by a resolution approved by a majority of all members, indicate its disapproval of the purchase within (30) days of its submission to the Board, the request shall be deemed approved.~~ Requests for the acquisition of services and goods valued between \$100,000 and \$499,999 that were not competitively solicited by the District of Columbia Public Schools shall be submitted to the Board of Education on a monthly basis, for informational purposes.

Section 3702.12 is added:

3702.12 The Superintendent will submit monthly to the Board of Education a listing of all contracts or agreements entered into by the District of Columbia Public Schools, which will include the following categories: contractor, contract amount, type of contract, source of funding, identify whether the contractor is a certified local, small, or disadvantaged business enterprise, type of procurement, period of performance, source of funding, number of bids received, description of contract, program office, performance measures, past performance evaluation (if applicable), and identification of subcontractors.

Section 3702.13 is added

3702.13 The Superintendent shall certify that all contracts or agreements valued at \$100,000 and above entered into by the District of Columbia Public Schools comply with applicable federal and District of Columbia laws.

Section 3702.14 is added

3702.14 The Superintendent shall certify monthly that the District of Columbia Public Schools complies with the requirements of the "Small, Local, and Disadvantaged Business Enterprise Development and Assistance Emergency Act of 2005," D.C. Code § 2-217.01 *et seq.*

Copies of this rulemaking are available from the Office of the Board of Education by calling (202) 442-4289.

DEPARTMENT OF HEALTH

NOTICE OF FINAL RULEMAKING

The Director of the Department of Health, pursuant to the authority set forth under § 302(14) of the District of Columbia Health Occupations Revision Act of 1985 (Act), effective March 25, 1986 (D.C. Law 6-99; D.C. Official Code § 3-1203.02 (14)), and Mayor's Order 98-140, dated August 20, 1998, hereby gives notice of the adoption of the following amendments to Chapter 76 of Title 17 of the District of Columbia Municipal Regulations (DCMR).

These rules were previously published as proposed rulemaking on February 3, 2006, at 53 DCR 672. One comment was received from the American Academy of Sleep Medicine stating that the organization formerly known as the American Sleep Disorders Association is now named the American Academy of Sleep Medicine. Therefore § 7607.8(e)(8) was corrected to reflect the organization's correct name. The correction does not constitute a substantial alteration under 1 DCMR § 510.5.

The purpose of these amendments is to revise the continuing education requirements for respiratory therapists to require licensees to complete a minimum of three (3) unit hours of continuing education (CEUs) in ethics each renewal period; to limit acceptance of CEUs to programs and activities administered or approved by organizations set forth in the regulations; to exclude basic life support and CPR from eligibility as use for CEUs; to limit acceptance of independent home studies and distance learning education activities to eight (8) CEUs per renewal period; and to add regulations regarding the random auditing of continuing education credits for renewal applicants.

These final rules will be effective upon publication of this notice in the D.C. Register.

17 DCMR Chapter 76, RESPIRATORY THERAPY, is amended to read as follows:

Section 7606 is amended to read as follows:

- 7606.1 Except as provided in § 7606.2, all applicants for the renewal, reactivation, or reinstatement of a license to practice respiratory therapy in the District shall demonstrate successful completion of approved continuing education units (CEUs) in accordance with this section.
- 7606.2 This section shall not apply to applicants for an initial District of Columbia license, nor to applicants for the first renewal of a license granted by examination.
- 7606.3 To qualify for reactivation of a license to practice respiratory therapy, a person in inactive status, as defined in § 511 of the Act (D.C. Official Code § 3-1205.11), shall submit proof of having successfully completed eight (8) approved CEUs for each year that the applicant was in inactive status, up to a maximum of forty (40) CEUs.

- 7606.4 To qualify for reinstatement of a license, an applicant shall submit proof of having successfully completed eight (8) approved CEUs for each year after January 31, 2003, that the applicant's license was not renewed, up to a maximum of forty (40) CEUs. If an applicant whose license has expired does not apply for reinstatement of a license pursuant to this section within five (5) years of the date that the applicant's license expires, the applicant shall meet the requirements for obtaining an initial license.
- 7606.5 To qualify for renewal of a license an applicant shall:
- (a) Have completed sixteen (16) (CEUs) in approved continuing education programs during the two (2) year period preceding the date the license expires. A minimum of three (3) hours of the total continuing education credits shall have been in ethics;
 - (b) Attest to completion of the required continuing education credits on the renewal application form; and
 - (c) Be subject to a random audit for compliance with the continuing education requirement.
- 7606.6 Except as provided in § 7606.7, an applicant under this section shall prove completion of required continuing education credits by submitting with the application the following information with respect to each program:
- (a) The name and address of the sponsor of the program;
 - (b) The name of the program, its location, a description of the subject matter covered, and the names of the instructors;
 - (c) The dates on which the applicant attended the program;
 - (d) The hours of credit claimed; and
 - (e) Verification by the sponsor of completion, by signature or stamp.
- 7606.7 Applicants for renewal of a license shall only be required to prove completion of the required continuing education credits by submitting proof pursuant to § 7606.6 if requested to do so as part of the random audit, or if otherwise requested to do so by the Board.
- 7606.8 The Board shall conduct a random audit of continuing education credits at the completion of each renewal period.
- 7606.9 An applicant who falsely certifies completion of continuing education credits shall be subject to disciplinary action.

- 7606.10 An applicant for renewal of a license who fails to renew the license by the date the license expires may renew the license for up to sixty (60) days after the date of expiration by completing the application, submitting the required supporting documents, and paying the required late fee. Upon renewal, the licensee shall be deemed to have possessed a valid license during the period between the expiration of the license and its renewal.
- 7606.11 If an applicant for renewal of a license fails to renew the license and pay the late fee within the sixty (60) days after the expiration of the license, the expired license shall be deemed to have lapsed on the date of expiration and the applicant shall thereafter be required to apply for reinstatement of an expired license and meet all requirements and fees for reinstatement.
- 7606.12 If an applicant's license lapses, the applicant shall be subject to disciplinary action, including denial of a license, if the applicant practices respiratory therapy after the date the license lapses.
- 7606.13 The Board may, in its discretion, grant an extension of the sixty (60) day period to renew the license after expiration, if the applicant's failure to renew was for good cause. As used in this section "good cause" includes the following:
- (a) Serious and protracted illness of the applicant; and
 - (b) The death or serious and protracted illness of a member of the applicant's immediate family.

Section 7607 is amended to read as follows:

- 7607.1 Beginning with the renewal period of 2007, the Board shall only grant CEUs for continuing education programs and activities administered or approved by organizations listed in § 7607.8 of this chapter.
- 7607.2 For the renewal period of 2007 only, the Board may accept CEUs for education programs and activities that were not administered or approved by an organization listed in § 7607.8 of this chapter if:
- (a) The Board determines that the CEUs were sufficiently related to the practice of respiratory therapy;
 - (b) The program or activity was approved by a recognized approving body; and
 - (c) The CEUs were obtained prior to the enactment of these regulations.
- 7607.3 The Board may approve a seminar, workshop, or an educational program given at a conference for approved CEU credit, if the seminar, workshop, or program is administered or approved by one of the organizations listed in § 7607.8 of this

chapter.

7607.4 The Board may approve CEU credit for an applicant who serves as an instructor or speaker at a seminar, workshop, or program that is approved by one of the organizations listed in § 7607.8 of this chapter for both preparation and presentation time, subject to the following restrictions:

- (a) The maximum number of approved CEUs that may be granted for preparation time is twice the number of hours spent preparing for the presentation;
- (b) The maximum number of approved CEUs that may be granted pursuant to this subsection is fifty percent (50%) of an applicant's CEU requirement;
- (c) If an applicant has previously received a credit in connection with a particular presentation, the Board shall not grant credit for a subsequent presentation unless it involves either a different subject or substantial additional research concerning the same subject; and
- (d) The presentation shall have been presented during the period for which credit is claimed.

7607.5 The Board may approve the following independent home studies and distance learning continuing education activities:

- (a) Publication of an article in a professional journal, publication of a book or a chapter in a book, or publication of a book review in a professional journal or bulletin provided that the article, book or chapter was published during the period for which credit is claimed; and
- (b) Internet courses, video courses, telecourses, videoconferences, and teleconferences offered by accredited colleges or universities, or pre-approved by the AARC or MD/DC Society.

7607.6 The Board may grant continuing education credit under § 7607.5.(a) only if the applicant proves to the satisfaction of the Board that the work has been published or accepted for publication during the period for which credit is claimed.

7607.7 No more than eight (8) CEUs may be accepted in any renewal period, or for reinstatement or reactivation of a license, for approved independent home studies and distance learning continuing education activities.

7607.8 To qualify for approval by the Board, a continuing respiratory care education seminar, workshop, or program shall be administered or approved by:

- (a) The American Association of Respiratory Care (AARC);
- (b) The Maryland/District of Columbia Society for Respiratory Care (MD/DC Society);
- (c) A health care facility accredited by the Joint Commission on the Accreditation of Health Care Organizations (JCAHCO);
- (d) A college or university approved by an accrediting body recognized by the Council on Postsecondary Accreditation or the Secretary of the United States Department of Education; or
- (e) Any of the following organizations provided that the training is related to respiratory care services:
 - (1) American Medical Association under Physician Category I.
 - (2) American Thoracic Society
 - (3) American Association of Cardiovascular and Pulmonary Rehabilitation
 - (4) American Heart Association
 - (5) American Nurses Association
 - (6) American College of Chest Physicians
 - (7) American Society of Anesthesiologists
 - (8) American Academy of Sleep Medicine
 - (9) The Accreditation Council for Continuing Medical Education (ACCME),
 - (10) The American College of Cardiology
 - (11) The American Lung Association
 - (12) The National Society for Cardiopulmonary Technologists

7607.9 The Board shall not grant CEU credit for basic life support courses or training, or for CPR courses or training.

7607.10 The applicant shall verify that a seminar, workshop, or program is approved by the Board pursuant to this section, prior to attending the seminar, workshop or program.

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), Reorganization Plan No. 4 of 1996, and Mayor's Order 97-42, dated February 18, 1987 hereby gives notice of the adoption of an amendment to sections 921 ("Standards for Determining D.C. Medicaid Reimbursement Costs for Prescribed Multiple Source Drugs and Other Drugs and Methodology for Determining Prescription Reimbursement") through 925 of Chapter 9 of Title 29 of the District of Columbia Municipal Regulations (DCMR).

These amendments are required to enable the Medicaid program to change the existing nursing facility pharmacy reimbursement methodology to a nursing facility pharmacy point-of sale methodology that is designed to improve the quality of pharmacy care for recipients. Currently, District nursing facilities are paid an all-inclusive per diem rate that covers the cost of care for all resident services including pharmaceuticals. Upon implementation of the Point of Sale (POS) system and case mix reimbursement methodology, prescription costs will be carved out and reimbursed directly by the Medicaid program. These rules: (1) establish pharmacy dispensing fees for nursing home pharmacy providers and other reimbursement requirements; (2) establish a reimbursement methodology for nursing home pharmacy providers who are also federally approved 340-B (Public Health Service) providers; and (3) updates the rules to reflect the name change of the Centers for Medicare and Medicaid Services, formerly the Health Care financing Administration. The Medicaid Program projects an increase in total pharmacy expenditures of \$12 million in FY 2004 to \$21 million in FY 2010.

The United States Congress in 2003 enacted the "Medicare Prescription Drug Improvement and Modernization Act of 2003", which established the Medicare Prescription Drug Program known as "Part D". All Medicaid recipients eligible for Medicare part A or enrolled in Medicare Part B are entitled to the new Part D drug benefit. The States are required to implement part D on January 1, 2006. The pharmacy point of sale allows the Medicaid program to implement the mandates required for the Part D benefit.

The corresponding State Plan amendment was approved by the Council of the District of Columbia and the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services with an effective date of January 1, 2006.

A notice of emergency and proposed rulemaking was published in the D.C. Register on December 30, 2005 (53 DCR 11309). No comments were received. No substantive changes have been made. Section 924.4 was amended to clarify and list the classes of drugs that the Medicaid program will continue to cover for persons who are dually eligible after January 1, 2006.

Amend sections 921 through 925 of Chapter 9 (Medicaid Program) of Title 29 DCMR to read as follows:

- 921 STANDARDS FOR DETERMINING D.C. MEDICAID REIMBURSEMENT COSTS FOR PRESCRIBED MULTIPLE SOURCE DRUGS AND OTHER DRUGS AND METHODOLOGY FOR DETERMINING PRESCRIPTION REIMBURSEMENT
- 921.1 The provisions of this rule shall govern the determination of reimbursement costs to pharmacies, including nursing home pharmacy providers, by the D.C. Medicaid Program and the methodology for determining prescription reimbursement for prescribed multiple source drugs and other drugs provided to eligible Medicaid recipients. The Medicaid Program restricts payment to only those drugs supplied from manufacturers that have signed a national agreement, as specified in section 1927(a) of the Social Security Act or have an approved existing agreement.
- 922 METHODS FOR DETERMINING COSTS OF PRESCRIBED MULTIPLE SOURCE DRUGS
- 922.1 The allowable cost for multiple source drugs designated by the Centers for Medicare and Medicaid Services (CMS) of the United States Department of Health and Human Services and included in its listings issued pursuant to 42 CFR 447.332, shall be the lower of the following:
- (a) The upper limit established by CMS, which is determined by multiplying the cost of the lowest cost drug by one hundred and fifty percent (150%); or
 - (b) The estimated acquisition cost, as determined by the Medical Assistance Administration based upon information from drug manufacturers and local wholesale price data.
- 922.2 If a drug is unavailable in the local market at a cost at or below the CMS limit described in subsection 922.1 (a), the allowable cost shall be the lowest price, determined by the CMS, at which the drug is available in the local market.
- 922.3 The CMS upper limit for a drug price shall not apply if a physician certifies in his or her own handwriting that a specific brand is medically necessary for a particular patient.
- 922.4 The handwritten phrase "Medically Necessary" or "Brand Necessary" shall appear on the face of the prescription form. If the prescription is for a nursing facility resident a handwritten phrase "Medically Necessary" or "Brand Necessary" shall be documented in the resident's medical record accompanied by a copy of the physician's order and plan of care.
- 922.5 Neither a dual line prescription form, check-off box on the a prescription form or check off-box on the physician's orders and plan of care shall satisfy the certification requirement.

- 922.6 The Department shall supplement the CMS listing by adding drugs and their prices which, in the judgment of CMS, meet the following requirements:
- (a) The formulation of the drug approved by the U.S. Food and Drug Administration (FDA) has been evaluated as therapeutically equivalent in the most current edition of its publication, Approved Drug Products with Therapeutic Equivalence Evaluations (including supplements or in successor publications); and
 - (b) At least two (2) suppliers list the drug (which has been classified by the FDA as category "A" in its publication, Approved Drug Products with Therapeutic Equivalence Evaluations, including supplements or in successor publications) based on listing of drugs which are locally available.
- 922.7 Each pharmacy that participates in the Medicaid program shall be notified in writing by the Department of Health, Medical Assistance Administration (MAA), of the established maximum allowable cost for the selected multiple source drugs listed pursuant to this section.
- 923 METHODS FOR DETERMINING COSTS OF OTHER PRESCRIBED DRUGS
- 923.1 Costs for prescribed drugs not listed by CMS shall be the average wholesale price, minus ten percent (10%).
- 923.2 The average wholesale price shall be the price, at the time of service, set forth in the most recent listing supplied to MAA by the First Data Bank National Drug Data File Services.
- 924 METHOD ESTABLISHED FOR DETERMINING PRESCRIPTION REIMBURSEMENT
- 924.1 Pharmacy claims for a community or retail pharmacy provider shall be reimbursed at the lower of the following:
- (a) The allowable cost, established pursuant to section 922 or 923, as appropriate, plus a dispensing fee of four dollars and fifty cents (\$4.50) per prescription; or
 - (b) The pharmacy's usual and customary charge to the general public.
- 924.2 Effective January 1, 2006, pharmacy claims for a nursing home pharmacy provider shall be reimbursed at the lower of the following:

- (a) The allowable cost, established pursuant to section 922, 923 or 924.3, as appropriate, plus a dispensing fee of four dollars and fifty cents (\$4.50) per non-IV (intravenous) prescription; or seven dollars and twenty-five cents (\$7.25) per IV prescription; or seventeen dollars and twenty-five cents (\$17.25) for cassette, TPN (total parenteral nutrition) or container-related prescriptions; or
 - (b) The pharmacy's usual and customary charge for non-Medicaid residents.
- 924.3 The allowable cost for drugs purchased by a nursing home pharmacy provider who is also a federally approved 340-B (Public Health Service) provider for Medicaid shall not exceed the actual acquisition cost for each 340-B purchased drug. Pharmacy claims for 340-B providers shall be excluded from any manufacturer's rebate.
- 924.4 Effective January 1, 2006, drugs covered by Medicare for persons who are dually eligible for Medicare and Medicaid shall be billed to Medicare under the Medicare Prescription Drug Benefit -Part D. The Medicaid program shall continue to provide coverage to persons who are dually eligible for the following excluded or otherwise restricted drug or restricted classes of drugs to the same extent that it provides coverage to all Medicaid recipients:
- (a) Select agents when used for weight gain: Megesterol
 - (b) Select prescription vitamins and mineral products except prenatal vitamins and fluoride: Folic Acid, Vitamin B12
 - (c) Select non-prescription drugs: analgesics, antacids, diabetic therapy, bowel diagnostic preparation kits
 - (d) All barbiturates
 - (e) All benzodiazepines
- 924.5 An additional supply of medications may be dispensed for use by a nursing facility resident during a short-term medically approved trip away from the facility during holidays or family trips.
- 924.6 Prescribed drugs for purposes of nursing homes pharmacy reimbursement shall not include over-the-counter medications, syringes for diabetic preparations, geriatric vitamin formulations, or senna extract single dose preparations except when required for diagnostic radiological procedures performed under the supervision of a physician.
- 925 DEFINITIONS

925.1 For the purposes of this Chapter, the following terms and phrases shall have the meanings ascribed:

Brand – any registered trade name commonly used to identify a drug.

Container- a light resistant receptacle designed to hold a specific dosage form which is or maybe in direct contact with the item and does not interact physically or chemically with the item or adversely affect the strength, quality or purity of the item.

Department of Health, Medical Assistance Administration (MAA) - an administration within the District of Columbia Department of Health that is responsible for the day-to-day administration and oversight of the District's Medicaid Program.

Multiple source drug – a drug marketed or sold by three (3) or more manufacturers or labelers, or a drug marketed or sold by the same manufacturer, or labeler under two (2) or more different proprietary names or both under a proprietary name and without such a name.

Prescribed drugs – legend drugs approved as safe and effective by the U.S. Food and Drug Administration and those over-the-counter medications which fall into the following categories:

- (a) Oral analgesics with a single active ingredient (i.e. aspirin, acetaminophen, ibuprofen, etc);
- (b) Ferrous salts (sulfate, gluconate, etc.);
- (c) Antacids with up to three active ingredients, (i.e.- Aluminum, magnesium, bismuth, etc.);
- (d) Diabetic preparations (i.e.- Insulin, syringes, etc.);
- (e) Pediatric, prenatal and geriatric vitamin formulations;
- (f) Family planning drugs and supplies;
- (g) Senna extract, single dose preparations when required for diagnostic radiological procedures performed under the supervision of a physician;
- (h) The class of barbiturates approved as safe and effective by the Federal Food and Drug Administration; and
- (i) The class of benzodiazepines approved as safe and effective by the Federal Food and Drug Administration.

DEPARTMENT OF HEALTH

NOTICE OF FINAL RULEMAKING

The Director of the Department of Health, pursuant to section 8(c) of the District of Columbia Substance Abuse Treatment and Prevention Act of 1989, effective March 15, 1990 (D.C. Law 8-80; D.C. Official Code § 44-1207(c)), and Mayor's Order 98-87, dated May 29, 1998, hereby gives notice of his final rulemaking action to adopt the following amendment to Chapter 23 of Title 29 of the District of Columbia Municipal Regulations (DCMR). The purpose of these final rules is to specify, in conformity with current practices, that the Addiction Prevention and Recovery Administration (APRA) is responsible for the inspection, monitoring and certification of all substance abuse treatment facilities and programs operating in the District of Columbia. Notice of Proposed Rulemaking was published in the D.C. Register on October 7, 2005, at 52 DCR 8959. No comments were received concerning these rules and no changes have been made since publication as a Notice of Proposed Rulemaking. These final rules will be effective upon publication of this notice in the D.C. Register.

Chapter 23 (Certification Standards for Substance Abuse Treatment Facilities and Programs) of Title 29 (Public Welfare) (May 1987) is amended as follows:

Section 2300.1 is amended to read as follows:

2300.1 The Department of Health (DOH), Addiction Prevention and Recovery Administration (APRA), is the Single State Agency (SSA) responsible for the development and promulgation of rules, regulations and certification standards for prevention and treatment services related to the abuse of alcohol, tobacco and other drugs (ATOD) in the District of Columbia. APRA, as the SSA, is also responsible for the inspection, monitoring and certification of all substance abuse treatment facilities and programs operating within the District of Columbia.

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

NOTICE OF FINAL RULEMAKING

TELEPHONE TARIFF 06-1 AND FORMAL CASE NO. 988, IN THE MATTER
OF THE APPLICATION OF VERIZON WASHINGTON, DC INC. FOR
AUTHORITY TO AMEND THE GENERAL REGULATIONS TARIFF, P.S.C.-
D.C.- NO. 201

1. The Public Service Commission of the District of Columbia ("Commission") hereby gives notice of its final rulemaking action taken in Order No. 13906 (March 22, 2006), to approve the tariff application of Verizon Washington, DC Inc. ("Verizon DC")¹ to amend and establish the following tariff pages:

GENERAL REGULATIONS TARIFF, P.S.C.-D.C.- NO. 201
Section 0, Contents, 2nd Revised Page 2
Section 1A, Original Page 3

2. Through this tariff filing, Verizon DC requested authority to implement a surcharge tariff pursuant to the District of Columbia Universal Service Trust Fund ("DC USTF") rate rebalancing proposal approved by the Commission in Formal Case No. 988, Order No. 13842.² This surcharge is to be separately identified on the customer's bill and reflect the monthly amount of \$0.17 per non-Centrex line and \$0.02 per Centrex line. As warranted, each year the tariff will be updated to reflect Verizon's current payments into the DC USTF, as well as, any true-up to reflect any over- or under-recovery of Verizon's payment into the DC USTF.

3. The Commission issued a Notice of Proposed Rulemaking, published in the D.C. Register on January 27, 2005, inviting the public to submit comments on the proposed tariff amendment.³ No comments were filed. Subsequently, the Commission, in Order No. 13906, approved Verizon DC's Application finding that Verizon DC's request for authority to implement a surcharge tariff pursuant to the DC USTF rate rebalancing proposal complied with the directives of Order No. 13842 and Section 2815

¹ *Telephone Tariff 06-1 and Formal Case No. 988, In the Matter of the Application of Verizon Washington, DC Inc. For Authority to Amend the Local Exchange Services Tariff, P.S.C. - No. 201, Letter from J. Henry Ambrose of Verizon Washington, DC Inc. to Dorothy Wideman, Commission Secretary, filed January 6, 2006 ("Application").*

² *Formal Case No. 988, In The Matter Of The Development Of Universal Service Standards And The Universal Service Trust Fund For The District Of Columbia, Order No. 13842, rel. Dec. 20, 2005.*

³ 53 D.C. Reg. 570-571 (2005).

of the Commission's Universal Service rules.⁴ This tariff amendment shall become effective upon publication of this Notice of Final Rulemaking in the D.C. Register.

⁴ Chapter 28, Universal Service, 15 DCMR §§ 2800, 2815 (2003). Section 2815 permits recovery for a carrier's contribution into the fund.

PUBLIC SERVICE COMMISSION OF THE DISTRICT OF COLUMBIA
1333 H STREET, N.W., 2nd FLOOR, WEST TOWER
WASHINGTON, D.C. 20005

NOTICE OF FINAL RULEMAKING

TELEPHONE TARIFF 05-3, IN THE MATTER OF THE APPLICATION OF
VERIZON-WASHINGTON, D.C., INC., FOR AUTHORITY TO AMEND THE
LOCAL EXCHANGE SERVICES TARIFF, P.S.C. - D.C. -No. 202

1. The Public Service Commission of the District of Columbia ("Commission") hereby gives notice of its final rulemaking action, taken in Order No. 13904 (March 20, 2006), to approve the tariff application of Verizon Washington, DC Inc. ("Verizon DC")¹ to amend the following tariff pages:

LOCAL EXCHANGE SERVICES TARIFF, P.S.C.-D.C. NO. 202

Section 2, 5th Revised Page 2

6th Revised Page 3

2. Through this tariff filing, Verizon DC requested authority to amend the above-referenced tariff pages, effective April 1, 2006, concurrent with the implementation of the District of Columbia Universal Trust Fund ("DC USTF") rate rebalancing.² Verizon DC proposed to increase the rates for the services below which, for the most part, are to be offset with the DC USTF rate rebalancing decreases approved by the Commission on December 20, 2005.³

¹ Telephone Tariff 05-3, In the Matter of the Application of Verizon Washington, DC, Inc. for Authority to Amend the Local Exchange Services Tariff, P.S.C.-D.C.-No. 202, Letter from J. Henry Ambrose, Verizon DC Vice President for Regulatory Matters to Dorothy Wideman, Commission Secretary (December 12, 2005) ("Application").

² See Formal Case No. 988, In the Matter of the Development of Universal Service Standards and the Universal Service Trust Fund for the District of Columbia, Universal Service Working Group's Rate Rebalancing Proposal (November 4, 2005); See also Formal Case No. 988, Order No. 13810, rel. November 8, 2005.

³ See Formal Case No. 988, Order No. 13842, rel. December 20, 2005.

	<u>Current</u>	<u>Proposed</u>	<u>Increase</u>	<u>% Increase</u>
<u>Basic Residential Dial Tone Line Services:</u>				
(1) Unlimited Flat Rate Service	\$12.78	\$13.10	\$0.32	2.5%
(2) Message Rate / "B" Service	\$7.29	\$7.61	\$0.32	4.4%
(3) Economy 1 Service	\$6.00	\$6.32	\$0.32	5.3%
(4) Flat/Rate Message Rate Service	\$8.59	\$8.91	\$0.32	3.7%
<u>Basic Business Dial Tone Line Service:</u>				
(5) Message Rate Service	\$14.60	\$15.26	\$0.66	4.5%
<u>Usage:</u>				
(6) Residential Message Units	\$0.060	\$0.065	\$0.005	8.3%
(7) Business Message Units	\$0.090	\$0.099	\$0.009	10.0%

3. Verizon DC asserted that these services were categorized under Price Cap Plan 2004 in the Basic Services basket, and thus, with the exception of Basic Residential Dial Tone Services, permitted an increase in the rates for each service by up to 10 percent annually.⁴ Price Cap Plan 2004 allowed Verizon DC to request a rate increase up to \$0.32 for its Basic Residential Dial Tone Services after January 1, 2006.⁵

4. The Commission issued a Notice of Proposed Rulemaking, published in the *D.C. Register* on December 30, 2005, inviting the public to submit comments on the proposed tariff revision.⁶ No comments were filed. Subsequently, the Commission, in Order No. 13904, approved Verizon DC's Application, finding that Verizon DC's request for authority to raise monthly rates for its Basic Residential Dial Tone Line Services, Basic Business Dial Tone Line Service, and Residential and Business Message Units complied with Price Cap Plan 2004. This tariff modification shall become effective upon publication of this Notice of Final Rulemaking in the *D.C. Register*.

⁴ See Application at 2. See also Formal Case No. 1005, In the Matter of Verizon Washington, D.C. Inc.'s Price Cap Plan 2004 for the Provision of Local Telecommunications Services in the District of Columbia, Order No. 13370, rel. September 9, 2004. ("Price Cap Plan 2004").

⁵ Price Cap Plan 2004 at § 3 (a) (1).

⁶ 52 D.C. Reg. 11297-11297 (2005).

UNIVERSITY OF THE DISTRICT OF COLUMBIA

NOTICE OF FINAL RULEMAKING

The Board of Trustees of the University of the District of Columbia, pursuant to the authority set forth under §201.(a) of the District of Columbia Public Postsecondary Education Reorganization Act Amendments ("Act") effective January 2, 1976 (D.C. Law 1-36; D.C. Official Code § 38-1202.06) hereby gives notice of its amendment of Section 110 of Chapter 1 of Title 8, DCMR. This rule reduced the mandatory committee structure to a list of only four mandatory committees with descriptions and discretion to the chairperson to create any further Committee structure deemed to be needed. No changes were made to this rule as published with the Notice of Proposed Rulemaking in the D.C. Register on January 27, 2006 at 53 DCR 573. This rule will become effective upon publication of this notice in the D.C. Register.

Chapter 1 of Title 8 DCMR is amended as follows:

110 COMMITTEES OF THE BOARD OF TRUSTEES

110.1 The Chairperson of the Board shall annually propose a structure of standing committees in addition to the Executive Committee; the Audit, Budget and Finance Committee; the Academic Affairs Committee, and the Student Affairs Committee for adoption by resolution of a majority of the full Board.

- (a) The Executive Committee shall be comprised of the Officers of the Board. The Executive Committee shall have all or much of the power of the Board between meetings. Interim actions taken by the Executive Committee must be submitted for ratification by the Board at its next regularly scheduled meeting.
- (b) The Academic Affairs Committee shall consist of a chairperson and at least two (2) other members of the Board. It shall ensure that the academic program of the University is consistent with the institution's mission and strategies; that the academic budget reflects the institution's academic priorities; that the faculty personnel policies and procedures complement academic priorities; that the institution's academic programs are appropriate for its students, that technology is effectively used to enhance the academic programs of the University, and that the institution assesses the effectiveness of its academic programs.

- (c) The Audit, Budget and Finance Committee shall consist of the Treasurer, who shall be its chairperson and at least two (2) other members of the Board. It shall monitor the institution's financial operations; oversee annual and long-range operating budgets; ensure that accurate and complete financial records are maintained; submit to the full Board for its approval capital budgets that exceed prescribed amounts; select independent accountants to perform the annual audit; meet with the auditors before the process begins to review the general scope and procedures for the audit and to discuss areas where the Committee may desire special emphasis; upon completion of the audit again meet with the auditors to review the financial statements, their report of the adequacy of internal controls, and other findings; review the auditor's "management letter"; present the financial statement to the full Board; review the results of other work done by the auditors; oversee the institution's conflict-of-interest policy, including how it pertains to the Board; recommend investment policies to the Board; manage asset classes; review investment expenses; and oversee accounting and financial reporting; ensure that timely and accurate information is presented to the Board; and communicate with and educate the Board on all aspects of the University's financial status.
- (d) The Student Affairs Committee shall consist of a chairperson and at least two (2) other Board members. It shall be responsible for representing students' interest in the Board's policy-making activities; ensuring adequate resources for the student affairs programs; keeping pace with the changing needs of students' and promoting the role of the campus in the community.

110.2 In accordance with the provisions of D.C. Official Code §1204.02, The Chairperson may establish such advisory committees as deemed necessary to advise on policy. Such committees may consist of members of the Board, students, faculty members, parents, and governmental, educational, business, industrial, labor, and community representatives. The membership and scope of concern of each such committee shall be carefully defined. Such committees may be abolished or reconstituted by majority vote of the Board. The Board may assign issues for consideration to such committees, establishing a deadline for report or recommendations. Such committees, in written reports distributed in the agenda package at least ten (10) days prior to any regular meeting of the Board, may raise issues within their domains to the Board for consideration.

- 110.3 The Chairperson shall establish the name, number of members, and jurisdiction of each standing committee of the Board.
- 110.4 The Committee of the Whole shall automatically be a part of the committee structure and shall include all Board members.
- 110.5 The Chairperson of the Board may establish ad hoc committees at any time, either by announcement at a meeting of the Board or in writing to the members of the Board. When establishing an ad hoc committee, the Chairperson shall set forth the name, membership, and purpose of the ad hoc committee.
- 110.6 An ad hoc committee shall be dissolved upon the submission of a final report and recommendation(s) to the Board, upon the expiration of a specified term of the committee that is set forth when the ad hoc committee is established, or by vote of a majority of the full Board.
- 110.7 Standing and ad hoc committees of the Board shall not have executive power unless specifically provided by the provisions of this title or unless that power is specifically delegated to the committee to deal with a particular matter by official act of the Board.
- 110.8 The chairperson of a standing or ad hoc committee shall preside over committee meetings, may enter into discussion and vote on any item of business, and shall present the report of the committee to the Board.
- 110.9 The chairperson of a committee may appoint a chairperson pro tempore to assume the duties of the chair in the absence of the chairperson.
- 110.10 All committees of the Board are fact-finding and deliberative bodies.

UNIVERSITY OF THE DISTRICT OF COLUMBIA

NOTICE OF FINAL RULEMAKING

The Board of Trustees of the University of the District of Columbia pursuant to the authority set forth under §201(a) of the District of Columbia Public Postsecondary Education Reorganization Act Amendments ("Act") effective January 2, 1976 (D.C. Law 1-36; D.C. Official Code § 38-1202.06) hereby gives notice of its amendment of Section 728 to Chapter 7 of Title 8, DCMR entitled "Tuition and Fees". This rule establishes a revised, comprehensive schedule of tuition and fees to reflect and absorb some of the significantly increased costs of education of the past eight years. No changes were made to this rule as published with the Notice of the Proposed Rulemaking in the D.C. Register on January 27, 2006 at 53 DCR 576. This rule will become effective upon publication of this notice in the D.C. Register.

Chapter 7 of Title 8 DCMR is amended as follows:

728 TUITION AND FEES: Degree-granting Programs

728.1 The following tuition rates shall be in effect for Fall Semester 2006 for all student of the University for each semester:

Undergraduate students (D.C. residents)	Increase \$15.00 per credit hour to \$90.00 per credit hour
Undergraduate students (non-residents)	Increase \$15.00 per credit hour to \$200.00 per credit hour
Graduate students (D.C. residents)	Increase \$27.00 per credit hour to \$225.00 per credit hour
Graduate students (non-residents)	Increase \$21.00 per credit hour to \$350.00 per credit hour
Law students (D.C. residents)	Increase \$175.00 per semester to \$3,675.00 per semester
Law students (non-residents)	Increase \$350.00 per semester to \$7,350.00 per semester

728.2 Reserved

728.3 The University will charge the following student fees:

(a) Each semester and summer of enrollment beginning Fall Semester 2006, each undergraduate and graduate student shall pay the following mandatory fees:

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| (1) Activity Fee | Increase \$10.00 per semester to \$25.00 per semester |
| (2) Athletic Fee | Increase \$15.00 per semester to \$90.00 per semester |
| (3) Health Services Fee | Increase \$10.00 per semester to \$25.00 per semester |
| (4) Technology Fee | Increase \$10.00 per semester to \$40.00 per semester |
| (5) Student Center Fee | Initiate Student Center Fee at \$75.00 per semester |

(b) Each semester and summer of enrollment beginning Fall Semester 2006, each law school student shall pay the following mandatory fees:

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| (1) Law School Student Activity Fee | Increase \$100.00 per semester to \$210.00 per semester |
| (2) Law School Materials /Technology Fee | Increase \$60.00 per semester to \$85.00 per semester |

728.4 The University shall charge the following miscellaneous fees to all students.

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| (a) Application Fee, Graduate | Increase \$30.00 to \$50.00 |
| (b) Application Fee, International | Increase \$30.00 to \$50.00 |
| (c) Application Fee, Undergraduate | Increase \$30.00 to \$50.00 |

(d) Change of Course Fee	Increase \$5.00 to \$10.00
(e) Credit by Special Examination	Increase \$45.00 to \$50.00
(f) Duplicate I.D. Card Fee	Increase \$5.00 to \$10.00
(g) Enrollment Fee, Domestic Students	Initiate at \$50.00 per semester
(h) Enrollment Fee, International Students	Initiate at \$50.00 per semester
(i) Graduate Writing Proficiency Exam	Increase \$10.00 to \$50.00
(j) Graduation Fee, Graduate	Increase \$35.00 to \$65.00
(k) Graduation Fee, Undergraduate	Increase \$20.00 to \$50.00
(l) Laboratory Fee	Increase \$15.00 to \$50.00
(m) Late Application	Initiate at \$50.00
(n) Late Application for Tuition Installment Plan	Increase \$5.00 to \$20.00
(o) Late Registration	Increase \$25.00 to \$50.00
(p) Law School Graduation Fee (3 rd yr only)	Increase \$100.00 to \$325.00
(q) New Student Orientation Fee	Initiate at \$15.00
(r) Readmission Application Fee	Increase \$5.00 to \$15.00
(s) Returned Check Fee	Increase \$15.00 to \$35.00
(t) Student Health Insurance	No increase, to remain \$175
(u) Transcript, each after first one	No increase, to remain at \$5.00

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| (v) Transcript, first one | No increase, to remain free |
| (w) Transfer Student Fee | Initiate at \$75.00 |
| (x) Tuition Management System | No increase, to remain at \$30.00 |
| (y) Withdrawal Fee | Increase \$3.00 to \$5.00 |
- 728.5 Each student who does not have health insurance coverage or other means of health care financing shall obtain health insurance designated by the University or join a health maintenance organization designated by the University.
- 728.6 A separate laboratory fee of Fifty Dollars (\$50.00) shall be charged for each laboratory course. The laboratory fees collected under this subsection shall be reserved for expenditures related to improvement and maintenance of University laboratories.
- 728.7 The technology fees assessed and collected under this section shall be reserved for expenditures related to improvement and maintenance of technology available to University students, faculty, and staff.