

Michigan Department of Licensing and Regulatory Affairs
Office of Regulatory Reinvention
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**REGULATORY IMPACT STATEMENT
and
COST-BENEFIT ANALYSIS**

PART 1: INTRODUCTION

In accordance with the Administrative Procedures Act (APA) [1969 PA 306], the department/agency responsible for promulgating the administrative rules must complete and submit this form electronically to the Office of Regulatory Reinvention (ORR) no less than (28) days before the public hearing [MCL 24.245(3)-(4)]. Submissions should be made by the departmental Regulatory Affairs Officer (RAO) to **orr@michigan.gov**. The ORR will review the form and send its response to the RAO (see last page). Upon review by the ORR, the agency shall make copies available to the public at the public hearing [MCL 24.245(4)].

Please place your cursor in each box, and answer the question completely.

ORR-assigned rule set number:

2014-073-CH

ORR rule set title:

Communicable and Related Diseases

Department:

Michigan Department of Community Health

Agency or Bureau/Division

Bureau of Legal Affairs

Name and title of person completing this form; telephone number:

Bob Swanson, Director, Division of Immunization, 517-335-8159

Mary Grace Stobierski, Section Manager, Communicable Disease Division, 517-335-8165

Reviewed by Department Regulatory Affairs Officer:

Matthew H. Rick

PART 2: APPLICABLE SECTIONS OF THE APA

MCL 24.207a “Small business” defined.

Sec. 7a.

“Small business” means a business concern incorporated or doing business in this state, including the affiliates of the business concern, which is independently owned and operated and which employs fewer than 250 full-time employees or which has gross annual sales of less than \$6,000,000.00.”

MCL 24.240 Reducing disproportionate economic impact of rule on small business; applicability of section and MCL 24.245(3).

Sec. 40.

(1) When an agency proposes to adopt a rule that will apply to a small business and the rule will have a disproportionate impact on small businesses because of the size of those businesses, the agency shall consider exempting small businesses and, if not exempted, the agency proposing to adopt the rule shall reduce the economic impact of the rule on small businesses by doing all of the following when it is lawful and feasible in meeting the objectives of the act authorizing the promulgation of the rule:

(a) Identify and estimate the number of small businesses affected by the proposed rule and its probable effect on small businesses.

(b) Establish differing compliance or reporting requirements or timetables for small businesses under the rule after projecting the required reporting, record-keeping, and other administrative costs.

(c) Consolidate, simplify, or eliminate the compliance and reporting requirements for small businesses under the rule and identify the skills necessary to comply with the reporting requirements.

(d) Establish performance standards to replace design or operational standards required in the proposed rule.

(2) The factors described in subsection (1)(a) to (d) shall be specifically addressed in the small business impact statement required under section 45.

(3) In reducing the disproportionate economic impact on small business of a rule as provided in subsection (1), an agency shall use the following classifications of small business:

(a) 0-9 full-time employees.

(b) 10-49 full-time employees.

(c) 50-249 full-time employees.

(4) For purposes of subsection (3), an agency may include a small business with a greater number of full-time employees in a classification that applies to a business with fewer full-time employees.

(5) This section and section 45(3) do not apply to a rule that is required by federal law and that an agency promulgates without imposing standards more stringent than those required by the federal law.

MCL 24.245 (3) “Except for a rule promulgated under sections 33, 44, and 48, the agency shall prepare and include with the notice of transmittal a **regulatory impact statement** containing...” (information requested on the following pages).

[**Note:** Additional questions have been added to these statutorily-required questions to satisfy the **cost-benefit analysis** requirements of Executive Order 2011-5.]

MCL 24.245b Information to be posted on office of regulatory reinvention website.

Sec. 45b. (1) The office of regulatory reinvention shall post the following on its website within 2 business days after transmittal pursuant to section 45:

- (a) The regulatory impact statement required under section 45(3).
 - (b) Instructions on any existing administrative remedies or appeals available to the public.
 - (c) Instructions regarding the method of complying with the rules, if available.
 - (d) Any rules filed with the secretary of state and the effective date of those rules.
- (2) The office of regulatory reinvention shall facilitate linking the information posted under subsection (1) to the department or agency website.

PART 3: DEPARTMENT/AGENCY RESPONSE

Please place your cursor in each box, and provide the required information, using complete sentences. Please do not answer the question with “N/A” or “none.”

Comparison of Rule(s) to Federal/State/Association Standards:

(1) Compare the proposed rule(s) to parallel federal rules or standards set by a state or national licensing agency or accreditation association, if any exist. Are these rule(s) required by state law or federal mandate? If these rule(s) exceed a federal standard, please identify the federal standard or citation, and describe why it is necessary that the proposed rule(s) exceed the federal standard or law, and specify the costs and benefits arising out of the deviation.

MCL 333.5111 requires the Department to maintain a list of disease & infections, with annual updates to the list. This part of the public health code was revised in 2010.

MCL 333.9227 requires the Department to promulgate rules governing immunization

R325.171-172 eliminates unnecessary terms and outdated lists of disease and infections, which are duplicative and cause confusion with the list mandated by MCL 333.5111

R325.173-174 updates the rules to reference the 2010 revision of the public health code in MCL 333.5111

R325.176 is supported by federal standards. The Advisory Committee on Immunization Practices (ACIP) is a group of medical and public health experts that develops recommendations on how to use vaccines to control diseases in the United States. The recommendations stand as public health advice that will lead to a reduction in the incidence of vaccine preventable diseases and an increase in the safe use of vaccines and related biological products. ACIP was established under Section 222 of the Public Health Service Act (42 U.S.C. § 217a) and is governed by its [charter](#). Many other states have implemented similar rule changes in an effort to assure as many individuals are vaccinated across the states as possible. A policy statement recently published by the Association of Immunization Managers recommends that each state implement rules which require education at the time a non-medical exemption is signed.

R325.175 is consistent with the Public Health Code’s grant of authority to Local Health Departments and their Health Officers.

R325.178 is eliminated because effective FY2010 there is no funding and no legislative appropriation line for this activity

R325.179a updates the rule to be consistent with the list mandated in MCL 333.5111

R325.180 updates to the most current version of the “Compendium of Animal Rabies Control” (2011 vs 2008) and updates to the current MDCH Bureau name

The proposed rule revisions do not exceed federal standards or law.

(2) Compare the proposed rule(s) to standards in similarly situated states, based on geographic location, topography, natural resources, commonalities, or economic similarities. If the rule(s) exceed standards in those states, please explain why, and specify the costs and benefits arising out of the deviation.

R325.171-174 updates reflect what is done in similarly situated states

R325.175 All state provide similar authority to Public Health to assure that the public is protected from the spread of vaccine preventable diseases to susceptible individuals.

R325.176 The proposed changes will reflect the updated Advisory Committee on Immunization Practices (ACIP) recommendations which all states use as a standard set of rules for Recommendation. The process for requesting and obtaining an exemption to a compulsory immunization varies from state to state. The different steps and procedures for obtaining a waiver may include: making a request and asserting the basis for the waiver, information and education requirements, review of the request by public health officials, renewal requirements, and exclusion notification. Six states require vaccine education and information be provided to families who submit a waiver. Michigan is only 1 of 19 states that allow for the Personal Belief Exemption, (Other Exemption).

(3) Identify any laws, rules, and other legal requirements that may duplicate, overlap, or conflict with the proposed rule(s). Explain how the rule has been coordinated, to the extent practicable, with other federal, state, and local laws applicable to the same activity or subject matter. This section should include a discussion of the efforts undertaken by the agency to avoid or minimize duplication.

R325.171-174 has been updated to reference and coordinate with MCL 333.5111 which was updated in 2010. It eliminates redundancy & confusion between these rules and the public health code.

R325.175 There are no conflicts associated with this proposed change.

R325.176 There are no conflicts associated with this proposed change. Updated computerized assessments will be programmed by the state and provided to all schools through the use of Michigan Care Improvement Registry. Educational and support materials will be provided by the state for local health department education. These rule changes have been discussed at several meetings of stakeholders including Local Health Department Health Officers, Immunization Nurse Coordinators, Michigan Advisory Committee on Immunizations Committee Members, and representatives from the Michigan Department of Education.

Purpose and Objectives of the Rule(s):

(4) Identify the behavior and frequency of behavior that the proposed rule(s) are designed to alter. Estimate the change in the frequency of the targeted behavior expected from the proposed rule(s). Describe the difference between current behavior/practice and desired behavior/practice. What is the desired outcome?

The rule changes for disease reporting bring the rules in line with the public health code: R 325.171 eliminates terminology that is no longer needed.

R 325.172 adds a reference to the updated public health code (MCL333.5111) and eliminates the duplicative nature of the diseases and infections which are now updated and maintained annually per the public health code.

R325.173 adds a reference to MCL333.5111

R325.174 better coordinates with the public health code by referencing MCL 333.5207 with regard to individuals who have a declared health threat

R325.175, Does not alter current behavior or practice. Authority is already granted within the Public Health Code but this modification to the rules is more specific to the exclusion of individuals who have not been vaccinated in an outbreak situation.

The rule changes for the immunization requirements bring the required vaccines in line with national recommendations.

R 325.176, Rule 6(k) removes old implementation date which is no longer needed.

R 325.176, Rule 8 (d) updates the guidance to be in line with national (ACIP) immunization recommendations for the use of polio vaccine that are recommended on or after the fourth birthday. This may reduce the amount of doses that are needed for a child or adolescent.

R 325.176, Rule 8(l) removes old implementation date which is no longer needed.

R 325.176, Rule 9 changes the reporting requirement of children in 6th grade to a 7th grade requirement to bring the rules in line with the recent changes to the public health code.

R 325.176, Rule 9(a and b) changes the requirement for diphtheria and tetanus vaccine to more closely reflect the national (ACIP) immunization recommendations. This may reduce the amount of doses that a child or adolescent needs.

R 325.176, Rule 9(c) changes the requirement for Tdap vaccine to more align with the national (ACIP) immunization recommendations and with the change to the newly implemented 7th grade reporting requirement. This change will allow more time for immunization clinicians to vaccinate adolescents for the Tdap vaccine within the routine 11-12 year old adolescent schedule. This change will align Tdap immunization as part of the primary care visit and may reduce the number of doctor visits for families.

R 325.176, Rule 9(d) Changes the wording for the polio vaccine requirement to be more in line with the changes made to the ACIP recommendations. This may reduce the amount of doses that are needed for some children and teens

R 325.176, Rule 9(i)(i) removes old implementation date which is no longer needed.

R325.176, Rule 9(j) changes the requirement for Meningococcal vaccine to more align with the national (ACIP) immunization recommendations and with the change to the newly implemented 7th grade reporting requirement. This change will allow more time for immunization clinicians to vaccinate adolescents for the Meningococcal vaccine within the routine 11-12 year old adolescent schedule. This change will align Meningococcal immunization as part of the primary

care visit and may reduce the number of doctor visits for families.

R325.176 Rule 12 adds language to require education to the parent of a student who is signing a non-medical exemption for immunizations. This education will be done by the local health department to be sure the person signing the waiver understands the risks to them by not having their child vaccinated. They also must understand the risks that it poses to others within that program should a vaccine preventable disease be introduced in the program. This requirement will assure that parents are educated on the risks and benefits of vaccinating their child. The balance between the clear public benefit of vaccination and the importance of parental autonomy in making vaccination decisions can be optimally achieved by focusing on assuring the sincerity of fully informed parents' beliefs. The desired outcome would be less exemptions of convenience and an increased number of children and teens protected from vaccine-preventable diseases.

(5) Identify the harm resulting from the behavior that the proposed rule(s) are designed to alter and the likelihood that the harm will occur in the absence of the rule. What is the rationale for changing the rule(s) and not leaving them as currently written?

With regard to disease and infection reporting by physicians and laboratories, this rule change eliminates an outdated list of diseases and infections that are currently in the rules. Per the public health code, the department now annually updates and publishes these lists. Thus, the change will eliminate duplicative lists and will decrease confusion as to which list to use.

With the proposed rule changes, vaccine recommendations and school exemption policies will be updated and aligned with federal standards. Vaccine waivers are sometimes signed for reasons other than the intended purposes of the waivers. When this happens it leaves the Michigan population at risk of vaccine preventable diseases if too many individuals remain unvaccinated. The rule does not eliminate any authority provided in the Public Health Code to sign a waiver. This rule merely assures that people are educated on the risks to their children and the individuals around them if they decide not to vaccinate.

(6) Describe how the proposed rule(s) protect the health, safety, and welfare of Michigan citizens while promoting a regulatory environment in Michigan that is the least burdensome alternative for those required to comply.

Updated disease reporting rules brings the department into compliance with the public health code, eliminates duplication and decreases confusion, thus expediting disease reporting by healthcare professionals, leading to improved disease control and prevention for Michigan citizens.

Updated vaccine recommendations will be programmed and assessed in Michigan Care Improvement Registry (MCIR).

Studies have shown that the ease of obtaining a non-medical exemption has been associated with an increased number of vaccine exemptions. Research indicates that seeking exemptions is often a missed opportunity for vaccine risk communication and education. Parents seeking non-medical exemptions should be informed of the individual and community risks of not having their child vaccinated. Vaccine waivers are sometimes signed for reasons other than the intended purposes of the waivers. When this happens it leaves the Michigan population at risk of vaccine preventable diseases if too many individuals remain unvaccinated. The rule does not eliminate any authority provided in the Public Health Code to sign a waiver. This rule merely

assures that people are educated on the risks to their children and the individuals around them if they decide not to vaccinate.

(7) Describe any rules in the affected rule set that are obsolete, unnecessary, and can be rescinded.

All updates to the rules are included in this revision.

Fiscal Impact on the Agency:

Fiscal impact is an increase or decrease in expenditures from the current level of expenditures, i.e. hiring additional staff, an increase in the cost of a contract, programming costs, changes in reimbursement rates, etc. over and above what is currently expended for that function. It would not include more intangible costs or benefits, such as opportunity costs, the value of time saved or lost, etc., unless those issues result in a measurable impact on expenditures.

(8) Please provide the fiscal impact on the agency (an estimate of the cost of rule imposition or potential savings on the agency promulgating the rule).

R325.171-174 will have no fiscal impact on the agency.

R325.175 will have no fiscal impact on the agency.

R325.176 Rule 6-9: Schools will be notified of these changes to the rules using our website and communications from local health departments as well as a direct mailing to the schools which occurs July of every year.. Immunization reporting by a school is done using the MCIR/SIRS system. The only additional cost that a school could face is for the child who is not in compliance with the immunization requirements. The school would need to notify the parents of the student to obtain the needed immunization information. But this process is already in place for other vaccines required for school entry. The updates to vaccine recommendations, changes in grade reporting will be made to the MCIR system so it can be tracked, assessed, and monitored by schools, local health departments, and MDCH. Additionally, the proposed rule change might save money at the schools since changing from a 6th grade requirement to a 7th grade reporting requirement fits closer to the ACIP nationally recognized immunization schedule and therefore will be easier for the schools to meet this requirement. In addition, the first year of the transition from 6th grade reporting to 7th grade reporting will reduce costs to all agencies since the students were reported last year. There was a one-time cost of less than \$25,000 to DCH to update MCIR. The updates have already been implemented since they were needed to meet the new requirements laid out in the Public Health Code.

R325.176 Rule 12 Local health departments (LHD) may use current immunization staff to provide parent education using a variety of methods based on local needs. (for example Phone conversations, appointments at LHD clinics). In discussions with LHDs that have a similar waiver policy, the costs were minimal since the education was done during their routine immunization clinics.

(9) Describe whether or not an agency appropriation has been made or a funding source provided for any expenditures associated with the proposed rule(s).

None.

(10) Describe how the proposed rule(s) is necessary and suitable to accomplish its purpose, in relationship to the burden(s) it places on individuals. Burdens may include fiscal or administrative

burdens, or duplicative acts. So despite the identified burden(s), identify how the requirements in the rule(s) are still needed and reasonable compared to the burdens.

R325.176 Rule 12- Non-medical exemptions have increased in Michigan from 2% to 6% in recent years. The cost and time of excluding students who are unvaccinated and the cost of a disease that could have been prevented far exceeds the costs related to this new rule.

Impact on Other State or Local Governmental Units:

(11) Estimate any increase or decrease in revenues to other state or local governmental units (i.e. cities, counties, school districts) as a result of the rule. Estimate the cost increases or reductions on other state or local governmental units (i.e. cities, counties, school districts) as a result of the rule. Please include the cost of equipment, supplies, labor, and increased administrative costs, in both the initial imposition of the rule and any ongoing monitoring.

R325.171-174 will impose no additional costs to other state or local government units
R325.176 Rule 6-9 There will be no additional costs to school or childcare agencies, if anything these rules have the potential to reduce costs to schools.
R325.176 Rule 12 Local health departments (LHDs) are autonomous and may decide to increase or decrease staff or services to accomplish this goal. LHDs are in support of this change.

(12) Discuss any program, service, duty or responsibility imposed upon any city, county, town, village, or school district by the rule(s). Describe any actions that governmental units must take to be in compliance with the rule(s). This section should include items such as record keeping and reporting requirements or changing operational practices.

R325.176 Rule 6-9 No additional reports are required
R325.176 Rule 12 Statement that parent received education will be added to existing form.

(13) Describe whether or not an appropriation to state or local governmental units has been made or a funding source provided for any additional expenditures associated with the proposed rule(s).

None.

Rural Impact:

(14) In general, what impact will the rules have on rural areas? Describe the types of public or private interests in rural areas that will be affected by the rule(s).

None.

Environmental Impact:

(15) Do the proposed rule(s) have any impact on the environment? If yes, please explain.

No

Small Business Impact Statement:

[Please refer to the discussion of "small business" on page 2 of this form.]

(16) Describe whether and how the agency considered exempting small businesses from the proposed rules.

Small businesses are not affected by this rule change.

(17) If small businesses are not exempt, describe (a) the manner in which the agency reduced the economic impact of the proposed rule(s) on small businesses, including a detailed recitation of the efforts of the agency to comply with the mandate to reduce the disproportionate impact of the rule(s) upon small

businesses as described below (in accordance with MCL 24.240(1)(A-D)), or (b) the reasons such a reduction was not lawful or feasible.

Small businesses are not affected by this rule change.

(A) Identify and estimate the number of small businesses affected by the proposed rule(s) and the probable effect on small business.

Small businesses are not affected by this rule change.

(B) Describe how the agency established differing compliance or reporting requirements or timetables for small businesses under the rule after projecting the required reporting, record-keeping, and other administrative costs.

Small businesses are not affected by this rule change.

(C) Describe how the agency consolidated or simplified the compliance and reporting requirements and identify the skills necessary to comply with the reporting requirements.

Small businesses are not affected by this rule change.

(D) Describe how the agency established performance standards to replace design or operation standards required by the proposed rules.

Small businesses are not affected by this rule change.

(18) Identify any disproportionate impact the proposed rule(s) may have on small businesses because of their size or geographic location.

Small businesses are not affected by this rule change.

(19) Identify the nature of any report and the estimated cost of its preparation by small business required to comply with the proposed rule(s).

Small businesses are not affected by this rule change.

(20) Analyze the costs of compliance for all small businesses affected by the proposed rule(s), including costs of equipment, supplies, labor, and increased administrative costs.

Small businesses are not affected by this rule change.

(21) Identify the nature and estimated cost of any legal, consulting, or accounting services that small businesses would incur in complying with the proposed rule(s).

Small businesses are not affected by this rule change.

(22) Estimate the ability of small businesses to absorb the costs without suffering economic harm and without adversely affecting competition in the marketplace.

Small businesses are not affected by this rule change.

(23) Estimate the cost, if any, to the agency of administering or enforcing a rule that exempts or sets lesser standards for compliance by small businesses.

Small businesses are not affected by this rule change.

(24) Identify the impact on the public interest of exempting or setting lesser standards of compliance for small businesses.

Small businesses are not affected by this rule change.

(25) Describe whether and how the agency has involved small businesses in the development of the proposed rule(s). If small business was involved in the development of the rule(s), please identify the business(es).

Small businesses are not affected by this rule change.

Cost-Benefit Analysis of Rules (independent of statutory impact):

(26) Estimate the actual statewide compliance costs of the rule amendments on businesses or groups. Identify the businesses or groups who will be directly affected by, bear the cost of, or directly benefit from the proposed rule(s). What additional costs will be imposed on businesses and other groups as a result of these proposed rules (i.e. new equipment, supplies, labor, accounting, or recordkeeping)? Please identify the types and number of businesses and groups. Be sure to quantify how each entity will be affected.

There are no compliance costs or additional costs to businesses associated with this rule change.

(27) Estimate the actual statewide compliance costs of the proposed rule(s) on individuals (regulated individuals or the public). Please include the costs of education, training, application fees, examination fees, license fees, new equipment, supplies, labor, accounting, or recordkeeping). How many and what category of individuals will be affected by the rules? What qualitative and quantitative impact does the proposed change in rule(s) have on these individuals?

R325.176 Rule 6-9 Since there is already a monitoring and reporting system for school required vaccinations there should be no additional cost to a school to report and require these vaccine changes for students. If a child was found to be out of compliance for this vaccine, there may be some additional time spent by school staff to notify the parent about the need to obtain the vaccine. Changing the requirement from 6th grade to 7th grade should reduce the time needed by schools since more students should be complete at this older age since it better matched the national immunization recommendations. This process is already done by schools for other required vaccines.

R325.176 Rule 12 will require review of education of families for non-medical exemptions by LHDs.

(28) Quantify any cost reductions to businesses, individuals, groups of individuals, or governmental units as a result of the proposed rule(s).

R325.176 Rule 6-9 may reduce costs by decreasing number of vaccine doses used to vaccinate students. During the first year of 7th grade reporting costs will be less due to students being reported the previous year. Since the reporting will be more uniform for 7th graders it should require less follow-up from the schools to assure children are compliant with the immunization requirements.

R325.176 Rule 12 may prevent delaying immunizations that will improve the health and safety of children and teens. If more children are vaccinated it has the potential to reduce the risk to the general population of Michigan of vaccine preventable diseases. Investigation of vaccine preventable diseases is expensive and if there are less cases of disease, we should see a reduction in public health costs in outbreak control efforts.

(29) Estimate the primary and direct benefits and any secondary or indirect benefits of the proposed rule(s). Please provide both quantitative and qualitative information, as well as your assumptions.

R325.171-174 Clarification of these rules will increase efficiency of infectious disease reporting by healthcare providers, leading to increased disease control and prevention for Michigan citizens.

R325.175 will benefit the public by eliminating the possible risk to the public by the spread of a vaccine preventable disease.

R325.176 Rule 6-9 This rule change promotes updated vaccine assessments, and age-appropriate immunization delivered at the time of the adolescent visit.

R325.176 Rule 12 may reduce frivolous exemptions and exemptions that are signed for convenience. It also educates individuals on the benefits of vaccination.

(30) Explain how the proposed rule(s) will impact business growth and job creation (or elimination) in Michigan.

R325.176 Rule 6-9 and R325.176 Rule 12 will preserve the role of public health practitioners in preventing diseases, monitoring health and providing education to the community about vaccine-preventable diseases.

(31) Identify any individuals or businesses who will be disproportionately affected by the rules as a result of their industrial sector, segment of the public, business size, or geographic location.

None

(32) Identify the sources the agency relied upon in compiling the regulatory impact statement, including the methodology utilized in determining the existence and extent of the impact of a proposed rule(s) and a cost-benefit analysis of the proposed rule(s). How were estimates made, and what were your assumptions? Include internal and external sources, published reports, information provided by associations or organizations, etc., which demonstrate a need for the proposed rule(s).

The changes to these rules were recommended to the department by the Michigan Advisory Committee on Immunizations (MACI). These rule changes have been discussed and approved by local health department health officers and nurse coordinators. The requirements to educate parents on the risks and benefits of vaccines are a recommendation from the Association of Immunization Managers. The changes to the disease lists in the rules are intended to eliminate confusion about which list of diseases to follow, those in the rules or those published annually on www.michigan.gov/mdch.

Alternatives to Regulation:

(33) Identify any reasonable alternatives to the proposed rule(s) that would achieve the same or similar goals. In enumerating your alternatives, please include any statutory amendments that may be necessary to achieve such alternatives.

None.

(34) Discuss the feasibility of establishing a regulatory program similar to that proposed in the rule(s) that would operate through private market-based mechanisms. Please include a discussion of private market-based systems utilized by other states.

None.

(35) Discuss all significant alternatives the agency considered during rule development and why they were not incorporated into the rule(s). This section should include ideas considered both during internal discussions and discussions with stakeholders, affected parties, or advisory groups.

No significant alternatives were considered. This rule change was developed as an improvement to the present system.

Additional Information

(36) As required by MCL 24.245b(1)(c), please describe any instructions regarding the method of complying with the rules, if applicable.

There are no additional instructions associated with complying with the rule change. State and local health departments will monitor and evaluate the changes to the present system.

PART 4: REVIEW BY THE ORR

Date Regulatory Impact Statement (RIS) received:

9-15-2014

Date RIS approved:	10-13-2014
ORR assigned rule set number:	2014-073 CH

Date of disapproval:	Explain:
More information needed:	Explain:

(ORR-RIS March 2014)