

Relay Service at (800) 654-5984. Comments may also be submitted at ra-epbenuseall@pa.gov. When submitting e-mail comments, type "Comments on WMGR081" in the subject line. Faxed comments will not be accepted. Public comments must be submitted within 60 days of this notice and may recommend revisions to, and approval or denial of, the modifications. For more information, contact the Division of Municipal and Residual Waste at (717) 787-7381.

Persons with questions concerning the general permit modifications may contact Scott E. Walters at scwalters@pa.gov or at the telephone number listed previously. TDD users may contact the Department through the Pennsylvania AT&T Relay Service, (800) 654-5984.

MICHAEL L. KRANCER,
Secretary

[Pa.B. Doc. No. 13-624. Filed for public inspection April 5, 2013, 9:00 a.m.]

DEPARTMENT OF HEALTH

Long-Term Care Nursing Facilities; Request for Exception

The following long-term care nursing facility is seeking an exception to 28 Pa. Code § 211.9(g) (relating to pharmacy services):

Golden LivingCenter—South Hills
201 Village Drive
Canonsburg, PA 15317

The following long-term care nursing facility is seeking an exception to 28 Pa. Code § 211.12(b), (relating to nursing services):

Rothermel L. Caplan Transitional Care Unit
Willow at Fourth Street, P. O. Box 1282
Lebanon, PA 17046
FAC ID 121102

These requests are on file with the Department of Health (Department). Persons may receive a copy of a request for exception by requesting a copy from the Department of Health, Division of Nursing Care Facilities, Room 526, Health and Welfare Building, Harrisburg, PA 17120, (717) 787-1816, fax (717) 772-2163, ra-paexcept@pa.gov.

Persons who wish to comment on an exception request may do so by sending a letter by mail, e-mail or facsimile to the Division at the address listed previously.

Comments received by the Department within 10 days after the date of publication of this notice will be reviewed by the Department before it decides whether to approve or disapprove the request for exception.

Persons with a disability who wish to obtain a copy of the request and/or provide comments to the Department and require an auxiliary aid, service or other accommodation to do so should contact the Division at the address or phone number listed previously, or for speech and/or hearing impaired persons V/TT (717) 783-6514, or the Pennsylvania AT&T Relay Service (800) 654-5984 (TT).

MICHAEL WOLF,
Acting Secretary

[Pa.B. Doc. No. 13-625. Filed for public inspection April 5, 2013, 9:00 a.m.]

Nursing Home Patient Safety Trust Fund Surcharge for Fiscal Year 2012-2013 as Provided for under the Medical Care Availability and Reduction of Error (MCARE) Act

Sections 401—411 of the Medical Care Availability and Reduction of Error (MCARE) Act (MCARE Act) (40 P. S. §§ 1303.401—1303.411) require nursing homes to electronically report health care-associated infection (HAI) data to the Department of Health (Department) and the Patient Safety Authority (Authority). Mandatory reporting of nursing home HAIs was implemented in June 2009.

Section 409 of the MCARE Act states that every fiscal year, beginning July 1, 2008, each nursing home shall pay the Department a surcharge on its licensing fee to provide sufficient revenues for the Authority to perform its responsibilities related to this Act. The base amount of \$1 million for Fiscal Year (FY) 2008-2009 has the potential to be increased no more than the Consumer Price Index in each succeeding fiscal year.

The FY 2010-2011 surcharge was \$800,000. The Authority has recommended that the FY 2012-2013 surcharge assessment total \$900,000.

To assess the surcharge in an equitable manner, the number of licensed nursing home beds as of December 31, 2012, was totaled and that amount was divided into \$900,000. The total number of licensed beds is 88,599. This equates to a surcharge of \$10.158 per bed.

To obtain a copy of the assessment for all facilities, send an e-mail to paexcept@pa.gov, and request the 2012-2013 MCARE surcharge assessment list for Nursing Care Facilities.

Each facility will receive notification from the Department setting forth the amount due, date due and the name and address to which the payment should be sent. Payment will be due within 60 days. The MCARE Act authorizes the Department to assess an administrative penalty of \$1,000 per day on facilities who fail to pay the surcharge by the due date.

If a nursing care facility has questions concerning this notice, a representative from that facility should contact Susan Williamson, Director, Division of Nursing Care Facilities, Room 526, Health and Welfare Building, 825 Forster Street, Harrisburg, PA 17120, (717) 787-1816.

Persons with a disability who require an alternative format of this document (for example, large print, audio-tape or Braille) should contact Susan Williamson at the address or telephone number listed previously, or for speech and/or hearing impaired persons V/TT (717) 783-6514, or the Pennsylvania AT&T Relay Service at (800) 654-5984.

MICHAEL WOLF,
Acting Secretary

[Pa.B. Doc. No. 13-626. Filed for public inspection April 5, 2013, 9:00 a.m.]

Patient Safety Trust Fund Surcharge for Fiscal Year 2012-2013 as Provided for under the Medical Care Availability and Reduction of Error (MCARE) Act

On March 20, 2002, the Medical Care Availability and Reduction of Error (MCARE) Act (MCARE Act) (40 P. S.

§§ 1303.101—1303.910) was enacted. Among other provisions, the MCARE Act established the Patient Safety Authority (Authority) to collect, analyze and evaluate data regarding reports of serious events and incidents occurring in certain medical facilities and to make recommendations to those facilities regarding changes, trends and improvements in health care practices and procedures for the purpose of reducing the number and severity of serious events and incidents.

Section 305(a) of the MCARE Act (40 P.S. § 1303.305(a)) authorizes the establishment of a Patient Safety Trust Fund (Fund) for the operations of the Authority. Section 305(c) of the MCARE Act states that beginning July 1, 2002, and for every fiscal year thereafter, each medical facility covered by the MCARE Act shall pay the Department of Health (Department) a surcharge on its licensing fee as necessary to provide sufficient revenues for the Authority to operate. Section 305(c) of the MCARE Act also states that the total assessment amount for Fiscal Year (FY) 2002-2003 shall not exceed \$5 million and that the Department shall transfer the total assessment amount to the Fund within 30 days of receipt. Section 305(d) of the MCARE Act provides that for each succeeding calendar year, the Department shall determine and assess each medical facility a proportionate share of the Authority's budget. The base amount of \$5 million provided for in FY 2002-2003 shall be increased no more than the Consumer Price Index in each succeeding fiscal year.

Initially, the surcharge was assessed on ambulatory surgical facilities, birth centers and hospitals. Subsequently, the MCARE Act was amended and certain abortion facilities were also required to pay the surcharge.

With the cooperation of hospitals, birthing centers, abortion facilities and ambulatory surgery facilities in this Commonwealth, the surcharge has been implemented and has provided resources for the implementation of the web-based Pennsylvania Patient Safety Reporting System and the operation of the Authority.

This notice sets forth the procedure that the Department will follow in assessing and collecting the surcharge for FY 2012-2013. The Authority FY 2012-2013 surcharge assessment is \$5.5 million. The MCARE Act states that the surcharge shall be collected from medical facilities, which are defined as ambulatory surgical facilities (ASFs), birth centers and hospitals licensed under either the Health Care Facilities Act (35 P.S. §§ 448.101—448.904b) or Article X of the Public Welfare Code (62 P.S. §§ 1001—1088). Also included, as of May 1, 2006, are abortion facilities which are defined in 18 Pa.C.S. § 3203 (relating to definitions) and which perform 100 or more abortions during a calendar year. Nursing homes, which are assessed under sections 401—411 of the MCARE Act (40 P.S. §§ 1303.401—1303.411), receive a separate assessment notification.

To assess the surcharge in an equitable manner, the Department continues to use a common denominator in these facilities. For ASFs, birth centers and abortion facilities, the Department has chosen the number of operating and procedure rooms. For hospitals, the Department has chosen the number of beds contained on the license of each hospital, whether by the Department (general and special acute care hospitals) or the Department of Public Welfare (privately owned psychiatric hospitals). It was also necessary to pick a point in time to make this assessment; the Department has chosen December 31, 2012.

The number of operating/procedure rooms (for ASFs, birth centers and abortion facilities) and the number of licensed beds (for hospitals) was totaled and that number was divided into \$5.5 million to arrive at a charge per unit for the assessment. The total number of units (operating rooms, procedure rooms and licensed beds) is 44,762. Dividing this number into \$5.5 million results in a per unit assessment for each installment of approximately \$122.87.

To obtain a copy of the assessment for all facilities, send an e-mail to paexcept@pa.gov, and request the 2012-2013 MCARE surcharge assessment list.

Each facility will receive notification from the Department setting forth the amount due, date due and the name and address to which the payment should be sent. Payment will be due within 60 days. The MCARE Act authorized the Department to assess an administrative penalty of \$1,000 per day on facilities who fail to pay the surcharge by the due date.

If a medical facility has any questions concerning this notice, a representative from that facility should contact Joanne Salsgiver, Director, Department of Health, Division of Acute and Ambulatory Care, 625 Forster Street, Health and Welfare Building, Room 532, Harrisburg, PA 17120, (717) 783-8980.

Persons with a disability who require an alternative format of this document (for example, large print, audiotape or Braille) should contact the Division of Acute and Ambulatory Care at the previously listed address or telephone number, or for speech and/or hearing impaired persons V/TT (717) 783-6514, or the Pennsylvania AT&T Relay Service at (800) 654-5984.

MICHAEL WOLF,
Acting Secretary

[Pa.B. Doc. No. 13-627. Filed for public inspection April 5, 2013, 9:00 a.m.]

Special Pharmaceutical Benefits Program Advisory Council Public Meeting

The Statewide Special Pharmaceutical Benefits Program Advisory Council, established by the Department of Health (Department) under sections 301(a) and 317 of the Public Health Service Act (42 U.S.C.A. §§ 241(a) and 247b), will hold a public meeting on Thursday, April 25, 2013. The meeting will be held at the Family Health Council of Central PA, 3461 Market Street, Suite 200, Camp Hill, PA 17011 from 10 a.m. to 3 p.m.

For additional information, contact John Haines, Department of Health, Bureau of Communicable Diseases, 625 Forster Street, Room 611, Health and Welfare Building, Harrisburg, PA 17120, (800) 922-9384.

Persons with a disability, who wish to attend the meeting and require an auxiliary aid, service or other accommodation to do so should also contact John Haines at the previously listed number, or at V/TT (717) 783-6514 for speech and/or hearing impaired persons, or the Pennsylvania AT&T Relay Service at (800) 654-5984 (TT).

The Department reserves the right to cancel this meeting without prior notice.

MICHAEL WOLF,
Acting Secretary

[Pa.B. Doc. No. 13-628. Filed for public inspection April 5, 2013, 9:00 a.m.]

The Vermont Statutes Online

Title 18: Health

Chapter 219: HEALTH INFORMATION TECHNOLOGY AND TELEMEDICINE

18 V.S.A. § 9361. Health care providers providing telemedicine or store and forward services

§ 9361. Health care providers providing telemedicine or store and forward services

(a) Subject to the limitations of the license under which the individual is practicing, a health care provider licensed in this state may prescribe, dispense, or administer drugs or medical supplies, or otherwise provide treatment recommendations to a patient after having performed an appropriate examination of the patient either in person or by the use of instrumentation and diagnostic equipment through which images and medical records may be transmitted electronically. Treatment recommendations made via electronic means, including issuing a prescription via electronic means, shall be held to the same standards of appropriate practice as those in traditional provider-patient settings. For purposes of this subchapter, "telemedicine" shall have the same meaning as in 8 V.S.A. § 4100k.

(b) A patient receiving teleophthalmology or teledermatology by store and forward means shall be informed of the right to receive a consultation with the distant site health care provider and shall receive a consultation with the distant site health care provider upon request. If requested, the consultation with the distant site health care provider may occur either at the time of the initial consultation or within a reasonable time of the patient's notification of the results of the initial consultation. Receiving teledermatology or teleophthalmology by store and forward means shall not preclude a patient from receiving real time telemedicine or face-to-face services with the distant site health care provider at a future date. Originating site health care providers involved in the store and forward process shall ensure informed consent from the patient. For purposes of this subchapter, "store and forward" shall have the same meaning as in 8 V.S.A. § 4100k. (Added 2011, No. 107 (Adj

. Sess.), § 4, eff. May 8, 2012.)