900 KAR 2:040. Citations and violations; criteria and specific acts.

STATUTORY AUTHORITY: KRS 194.050, 216.555, 216.557, 216.563, 216.577
NECESSITY, FUNCTION, AND CONFORMITY: The Cabinet for Human Resources is required to publish, after consultation with industry, professional and consumer groups, administrative regulations setting forth the criteria and, where feasible, the specific acts which constitute Type A and B violations. This administrative regulation is designed to set forth the criteria and, where feasible, the specific acts.

Section 1. Definitions. (1) "Active treatment" means daily participation in accordance with an individual plan of care and services, in activities, experiences, or therapy which are part of a professionally developed and supervised program of health, social and/or habilitative services offered by or procured by contract or other written agreement by the institution for its residents.

(2) "Activities of daily living" means activities of self-help (example: being able to feed, bathe and/or dress oneself), communication (example: being able to place phone calls, write letters and understanding instructions) and socialization (example: being able to shop, being considerate of others, working with others and participating in activities).

(3) "Administrator" means the administrator of a long-term care facility.

(4) "Citation" means a written notification of violation of administrative regulations, standards and requirements as set forth by the cabinet pursuant to KRS 216.550 or the provisions of KRS 216.510 to 216.525, or applicable federal law and regulations governing the certification of a long-term care facility under Title 18 or 19 of the Social Security Act which violation has been classified a "Type A" or "Type B" violation pursuant to this administrative regulation. A citation is not a statement of deficiency.

(5) "Developmental nursing services" means treatment of a person's developmental needs by designing interventions to modify the rate and/or direction of the individual's development especially in the areas of self-help skills, personal hygiene and sex education while also meeting his physical and medical needs.

(6) "Nonambulatory" means unable to walk without assistance.

(7) "Nonmobile" means unable to move from place to place.

(8) "Protective device" means devices that are designed to protect a person from falling, to include side rails, safety vest or safety belt.

(9) "Restraint" means any pharmaceutical agent or physical or mechanical device used to restrict the movement of a patient or the movement of a portion of a patient's body, and when used in the context of an intermediate care facility for the mentally retarded or developmentally disabled, means any pharmaceutical agent or any physical or mechanical device used to restrict the movement of an individual or the movement or normal function of a portion of the individual's body, excluding only those devices used to provide support for the achievement of functional body position or proper balance (such as positioning chairs) and devices used for specific medical and surgical (as distinguished from behavioral) treatment.

(10) "Type A violation" means a violation by a long-term care facility of the administrative regulations, standards and requirements as set forth by the cabinet pursuant to KRS 216.550 and 216.563 or the provisions of KRS 216.510 to 216.525, or applicable federal laws and regulations governing the certification of a long-term care facility under Title 18 or 19 of the Social Security Act which has been classified a "Type A" violation pursuant to this administrative regulation. Said violation presents an imminent danger to any resident of a long-term care facility and creates substantial risk that death or serious mental or physical harm will occur.

(11) "Type B violation" means a violation by a long-term care facility of the administrative regula-
tions, standards and requirements as set forth by the cabinet pursuant to KRS 216.550 and 216.563 or the provisions of KRS 216.510 to 216.525, or applicable federal law and regulations governing the certification of a long-term care facility under Title 18 or 19 of the Social Security Act which has been classified a "Type B" violation pursuant to this administrative regulation. Such violation presents a direct or immediate relationship to the health, safety or security of any resident, but which does not create an imminent danger and which is categorized a "Type B" violation in this administrative regulation.

Section 2. If, upon inspection of a long-term care facility for quality of care rating or investigation of such facility, the cabinet finds that there exists a "Type A" or "Type B" violation at the facility, a citation shall be issued to the licensee. Said citation shall specify, in writing, the nature of the violation and specify statutory provisions or administrative regulations alleged to have been violated.

Section 3. Type A Violations. (1) Upon the finding of a Type A violation, the cabinet shall advise the licensee, administrator or his designated representative, in writing, delivered as soon as practicable but no later than three (3) days, of the existence of said violation. Written notification may be delivered either by certified mail, return receipt requested, or by personal service of said notification upon the licensee, administrator or his designated representative. The time for correction of said violation shall begin upon the date written notification is received, or in the event the delivery is refused, upon the date of refusal.

(2) A "Type A" violation shall be abated or eliminated immediately upon written notification, unless a fixed period of time not to exceed ten (10) days, as determined by and within the discretion of the cabinet, is required for correction.

(3) A "Type A" violation is subject to a civil penalty in an amount not less than $1,000 nor more than $5,000 for each and every violation.

(4) Where a licensee has failed to correct a "Type A" violation within the time specified for correction, the cabinet shall assess the licensee a civil penalty in the amount of $500 for each day such deficiency continues beyond the date specified for correction.

(5) Application for an extension of time may be granted by the cabinet upon a showing by the licensee that adequate arrangements have been made to protect the health and safety of the residents. No extension of time so granted shall exceed ten (10) days.

Section 4. (1) The criteria for the conditions which constitute "Type A" and "Type B" violations are:
(a) The uniform criteria established for rating quality of care in accordance with KRS 216.550;
(b) The provisions of KRS 216.515 to 216.525; and
(c) Applicable federal laws and regulations governing the certification of long-term care facilities under Titles 18 and 19 of the Social Security Act.

(2) Any violation of the criteria set forth in subsection (1)(a) through (c) of this section which constitutes an imminent danger and substantial risk of death or serious mental or physical harm to a resident is classified a "Type A" violation.

(3) Any violation of the criteria set forth in subsection (1)(a) through (c) of this section which presents a direct or immediate relationship to the health, safety or security of any resident, but which does not create an imminent danger, is classified a "Type B" violation.

(4) The criteria are to be reviewed at least quarterly for the purpose of more clearly defining the specific acts or circumstances which constitute "Type A" and "Type B" violations.

Section 5. (1) The following specific acts or circumstances in violation of the rating system developed pursuant to KRS 216.550, the provisions of KRS 216.510 to KRS 216.525, or the applicable federal laws and regulations governing certification of long-term care facilities under Title 18 or 19 of
the Social Security Act and which presents an imminent danger and substantial risk of death or seri-
ous physical or mental harm to a resident or patient of the long-term care facility shall constitute
“Type A” violations.
(a) In all long-term care facilities.
1. Persons whose care needs exceed the capability of the facility to provide are knowingly admit-
ted as residents or patients of the facility.
2. A physician is not available and not consulted in the case of serious accident or illness and
such consultation and the response of the facility is not reflected within the resident's or patient's file.
3. Physical and pharmaceutical restraints are not used in accordance with the written instructions
of the attending physician (and in cases of emergency, oral orders of the physician or nursing as-
sessments made pursuant to KRS 314.011(6)(e) and 314.011(10)(e) are not subsequently reduced
to writing), dated and placed within the resident's or patient's file.
4. Protective devices are not used in accordance with the written instructions of the attending
physician, dated and within the patient's file.
5. Except in family care homes, the licensee has no evidence of a current inspection by the state
fire marshal indicating the facility complies with the applicable provisions of the life safety code.
6. The licensee does not maintain a system of heating and cooling capable of attaining a mini-
imum temperature of seventy- two (72) degrees which shall be provided in occupied areas in winter
conditions and a maximum temperature of eighty-five (85) degrees which shall be provided in sum-
er conditions, and in cases of emergency, the licensee does not take necessary precautions to
protect the health of residents or patients.
7. In the event of an error in medication, the attending physician is not advised and the error is not
recorded within the patient's or resident's file, and correction is not made within one (1) day of the
date of discovery.
8. Prescription medication is not kept under lock.
9. The resident's or patient's daily diet provided by the facility does not comply with his medically
prescribed special diet or dietary restriction (except for special days or celebrations medically ap-
proved), said special diet or dietary restriction is to appear in writing within the resident's or patient's
file.
10. There is not at least three (3) days' supply of food in the facility at all times.
11. The care required by admitted residents retained within the facility exceeds the skill of the li-
censee to provide.
(b) Family care homes.
1. The licensee does not provide twenty-four (24) hour supervision and assistance to the resi-
dents.
2. The licensee is not that person directly responsible for the daily operation of the home and,
when temporarily absent, the name of the individual to whom responsibility is delegated is not in writ-
ing and available to the cabinet.
3. When prescription medication is required to be administered by licensed personnel, arrange-
ments are not made in writing to assure the use of said personnel.
4. Basements in which residents are housed are not constructed for sleeping quarters and have
no outside door.
5. Residents are housed in rooms or detached buildings or enclosures which have not been in-
spected and approved by the cabinet.
6. The facility has admitted more than three (3) persons as residents.
(c) Personal care homes.
1. Residents of the facility are under the age of sixteen (16) years or are nonambulatory or non-
mobile.
2. The number and classifications of personnel required at the facility are not based upon the
number of patients and the amount and kind of personal care, nursing care, supervision and program needed to meet the needs of the patients as determined by medical orders and by services required by 902 KAR 20:036 as determined in accordance with 902 KAR 20:036, Section 3(8)(f)2.

3. One (1) attendant is not awake and on duty on each floor of the facility at all times.

(d) Intermediate care facilities.

1. Physician services for medical emergencies are not available on a twenty-four (24) hour, seven (7) day a week basis.

2. A responsible staff member is not on duty and awake at all times to assure prompt, appropriate action in cases of injury, illness, fire and other emergencies.

3. The facility does not have personnel to meet the needs of the patients on a twenty-four (24) hour basis, the number and classification of personnel are not based upon the number of patients and the amount and kind of personal care, nursing care, supervision and program needed to meet the needs of the patients as determined by medical orders and by services required by 902 KAR 20:051, in accordance with 902 KAR 20:051, Section 3(10)(c)2.

4. In the event the patient’s condition exceeds the scope of services offered by the facility, the patient, upon written orders of a physician (except in cases of emergency) is not transferred promptly to a hospital or skilled nursing facility or services are not contracted for from other community services.

(e) Skilled nursing facilities and nursing facilities.

1. The licensee does not provide the facility with a director of nursing services who is a registered nurse and who works full time during the day and who does devote full time to the nursing service of the facility.

2. There is not at least one (1) registered nurse or licensed practical nurse on duty at all times who is responsible for the nursing care of residents during her tour of duty; when a licensed practical nurse is on duty, no registered nurse is on call.

3. The licensee does not provide the personnel required to meet the needs of the patients on a twenty-four (24) hour a day basis, the number and classification of personnel so required are not based upon the number of patients, the amount and kind of personal care, nursing care, supervision and program needed to meet the needs of the patients as determined by medical orders and by services required by 902 KAR 20:026, in accordance with 902 KAR 20:026, Section 3(9)(d)2, or 902 KAR 20:300, in accordance with 902 KAR 20:300, Section 15(5). The cabinet shall use the administrative regulation that corresponds to the facility’s license.

4. In the event the patient’s condition exceeds the scope of services offered by the facility, the patient, upon written orders of a physician (except in cases of emergency) is not transferred promptly to a hospital or services are not contracted for from other community resources.

(f) Nursing homes (including Alzheimer's).

1. In the event the patient’s condition exceeds the scope of services offered by the facility, the patient, upon written orders of a physician (except in cases of emergency) is not transferred promptly to a hospital or skilled nursing facility or services are not contracted for from other community resources.

2. A responsible staff member is not on duty and awake at all times to assure prompt, appropriate action in cases of injury, illness, fire or other emergency.

3. The health care of each patient is not under the supervision of a physician and the patient’s records do not reflect the frequency of the physician’s contacts with the patient.

4. The licensee does not provide the personnel required to meet the needs of the patients on a twenty-four (24) hour a day basis, the number and classification of personnel so required are not based upon the number of patients, the amount and kind of personal care, nursing care, supervision and program needed to meet the needs of the patients as determined by medical orders and by services required by 902 KAR 20:048, in accordance with 902 KAR 20:048, Section 3(10)(c)2, or 902
KAR 20:291, in accordance with 902 KAR 20:291, Section 3(10)(c)2. The cabinet shall use the administrative regulation that corresponds to the facility's license.

(g) Intermediate care facilities for the mentally retarded and developmentally disabled.

1. The facility does not maintain and does not follow a written procedure to specify in a step-by-step manner the actions which shall be taken by staff when a resident is determined to be lost, unaccounted for, or other unauthorized absence.

2. The facility admits as patients those persons who do not have a physical or mental condition which requires developmental nursing services and an active treatment plan.

3. The licensee does not provide the personnel required to meet the needs of the patients on a twenty-four (24) hours a day basis. The number and classification required is not determined in a manner consistent with the requirements of 902 KAR 20:086, Section 3(11)(c) and in accordance with 902 KAR 20:086, Section 3(11)(f).

4. Physician services for medical emergencies are not available on a twenty-four (24) hour, seven (7) day a week basis.

5. A responsible staff member is not on duty and awake at all times to assure prompt, appropriate action in cases of injury, illness, fire and other emergencies.

6. In the event the patient's condition exceeds the scope of services offered by the facility, the patient, upon written orders of a physician (except in cases of emergency) is not transferred promptly to a hospital or skilled nursing facility or services are not contracted for from other community services.

(2) Pursuant to KRS 216.577, upon a finding that conditions within the facility which constitute the "Type A" violation have not been corrected within the time allowed by the cabinet for correction, the secretary shall take at least one (1) of the following actions with respect to the facility in addition to the issuance of a citation or the assessment of a civil penalty therefor.

(a) Institute proceedings to compel the facility's compliance with the requirement alleged to have been violated.

(b) Institute injunctive proceedings in circuit court to terminate the operation of the facility.

(c) Selectively transfer residents whose care needs are not being adequately met by the long-term care facility.

Section 6. Type B Violations. (1) A "Type B" violation shall be corrected within a time determined and approved by the Cabinet.

(2) A "Type B" violation is subject to a civil penalty in an amount not less than $100 nor more than $500, provided, however, that if such violation is corrected within the time specified by the Cabinet, no civil penalty shall be imposed.

(3) Where a licensee has failed to correct a "Type B" violation within the time specified for correction by the cabinet, the cabinet shall assess the licensee a civil penalty in the amount of $200 for each day the deficiency continues beyond the date specified for correction.

(4) Application for an extension of time may be granted by the cabinet upon a showing by the licensee that adequate arrangements have been made to protect the health and safety of the residents. No extension of time so granted shall exceed ten (10) days.

Section 7. (1) Upon the finding of a "Type B" violation, the cabinet shall advise the licensee, administrator, or his designated representative in writing, delivered as soon as practicable, but no later than five (5) days, of the existence of said violation. Delivery shall be by certified mail, return receipt requested or by personal service to the licensee, administrator or his designated representative. The time within which the citation shall be corrected shall run from the date of receipt of written notification, or in the event said written notification is refused, from the date of refusal.

(2) The following specific acts or circumstances in violation of the rating system developed pursu-
ant to KRS 216.550, the provisions of KRS 216.510 to 216.525, or the applicable federal laws and regulations governing certification of long-term care facilities under Title 18 or 19 of the Social Security Act and which present a direct or immediate relationship to the health, safety or security or any resident but which do not create an imminent danger shall constitute "Type B" violations:

(a) In all long-term care facilities.
   1. The facility does not have a written fire control and evacuation plan with which those present and responsible for supervision are familiar.
   2. The facility does not maintain an active program of pest control for all areas of its physical plant.
   3. The facility does not serve at least three (3) meals per day with not more than fifteen (15) hours between the evening meal and breakfast and such meals do not meet the current recommended dietary allowances of the Food and Nutrition Board of the National Research Council adjusted for age, sex and activity, and in accordance with physician's orders. Between meal and bedtime snacks are not available, except where medically contraindicated.
   4. The licensee knowingly violates the provision of KRS 216.515 and 216.520.
   5. A complete medical record is not kept on each patient with all entries current, dated and signed.
   6. Patients or residents requiring help in eating are not assisted.
   7. Except for those facilities with an integrated heating, ventilation and air conditioning system (HVAC system) the licensee does not maintain the facility with screens on windows.
   8. Except for family care homes, all food is not procured, stored, prepared, distributed, and served under sanitary conditions consistent with the Kentucky Food Service Code (902 KAR 45:005).
   9. If a patient or resident refuses food served, nutritional substitutions are not offered; the consistency of the food is not prepared with reference to the ability of the individual patient to ingest.
  10. The facility does not implement a regular program to prevent decubiti with emphasis on the following:
      a. Procedures to maintain clean linen of the patient or resident. Clothes and linens are cleaned each time the bed or clothing is soiled. Rubber, plastic or other type of linen protectors are cleaned and completely covered to prevent direct contact with the patient.
      b. Effort is made to assist the patient or resident in being up and out of bed as much as his condition permits, unless medically contraindicated. If the patient or resident cannot move himself, he has his position changed as often as necessary but not less than every two (2) hours.
  11. The facility does not keep resident records and patient files confidential in a manner consistent with the requirements of the Kentucky Revised Statutes and administrative regulations.
  12. Except in family care homes, cold water and hot water with a maximum temperature of 110 degrees Fahrenheit are not available for resident or patient use.
  13. Meals do not correspond to the posted menus; menus are not planned and posted one (1) week in advance; when changes in the menu are necessary, substitutions do not provide equal nutritive value.
  14. The facility does not have an administrator who is responsible for the operation of the facility and does not delegate such responsibility in his absence.

(b) Family care homes.
   1. The facility does not have a written procedure for providing or obtaining emergency services.
   2. Telephone service, if available in the area, is not accessible to the residents.
   3. The facility does not have at least one (1) ABC rated fire extinguisher.
   4. The facility does not have one (1) toilet for each six (6) persons in the home, which includes residents receiving care, the licensee and family.
   5. Residents are not provided beds at least thirty-three (33) inches wide and six (6) feet long.
   6. The facility does not comply with the provisions of 902 KAR 20:041, Section 4(4).
(c) Personal care homes.
1. The facility does not provide each resident with a bed equipped with springs, a clean mattress, a mattress cover, two (2) sheets and a pillow, together with bed covering as required for the patient's comfort.
2. The facility uses special purpose areas for the protection or confinement of a resident which are not approved by the cabinet with specification for the use of the area.
3. The facility does not maintain and implement a schedule of activities for groups and individuals, both within and without the facility.
4. The facility does not maintain a program of orientation and in-service training which shall include at least the following component parts:
   a. Policies of the facility with regard to the performance of staff duties;
   b. Services provided by the facility;
   c. Recordkeeping procedures;
   d. Procedures for reporting adult and child abuse, neglect and exploitation to the cabinet pursuant to KRS Chapter 209 and KRS Chapter 620;
   e. Patient rights;
   f. Procedures for proper application of physical restraints;
   g. The aging process;
   h. The emotional problems of illness;
   i. The use of medication;
   j. Therapeutic diets;
   k. Activities of daily living; and
   l. Procedures for maintaining a clean healthful and pleasant environment. A record shall be maintained of each training session indicating topics discussed and staff attendance, by name.
5. The facility does not provide encouragement and assistance, as necessary, to residents in achieving and maintaining good personal hygiene, including such assistance with:
   a. Washing and bathing the body;
   b. Shaving;
   c. Cleaning of finger and toe nails;
   d. Cleaning of mouth and teeth; and
6. If any food service personnel are assigned duties outside the dietary department, the duties interfere with the sanitation, safety or time required for regular dietary assignments.
(d) Intermediate care facilities.
1. Each facility does not maintain a program of rehabilitative nursing care on a twenty-four (24) hour a day, seven (7) day a week basis, which program to include at least the following measures:
   a. Positioning and turning;
   b. Exercises;
   c. Bowel and bladder training, when appropriate; and
   d. Ambulation.
2. The facility does not provide each patient with a standard size bed equipped with springs, a clean mattress, mattress cover, two (2) sheets and a pillow and such bed covering as required to keep the patient comfortable.
3. The facility does not maintain a program to provide encouragement and assistance to patients to achieve and maintain good personal hygiene, including, as necessary, the following:
   a. Washing and bathing the body;
   b. Shaving;
   c. Cleaning of finger and toe nails;
   d. Cleaning of mouth and teeth; and
e. Washing, grooming and cutting of hair.

4. If any food service personnel are assigned duties outside the dietary department, the duties interfere with the sanitation, safety or time required for regular dietary assignments.

5. All employees do not receive orientation and in-service training to correspond to their respective jobs; nursing personnel do not participate in in-service training or continuing education at least quarterly.

6. The facility does not maintain and implement a schedule of activities for groups and individuals, both within and without the facility.

(e) Nursing homes (including Alzheimer's).

1. The facility does not include a program of rehabilitative nursing care on a twenty-four (24) hour a day, seven (7) day a week basis, which program to include at least the following measures:
   a. Positioning and turning;
   b. Exercises;
   c. Bowel and bladder training, when appropriate; and
   d. Ambulation.

2. Each patient shall be provided a standard size bed equipped with springs, a clean mattress, mattress cover, two (2) sheets and a pillow and such bed covering as required to keep the patient comfortable.

3. Each facility does not maintain a program to provide assistance to patients to achieve and maintain good personal hygiene, including, as necessary, the following:
   a. Washing and bathing the body;
   b. Shaving;
   c. Cleaning of finger and toe nails;
   d. Cleaning of mouth and teeth; and
   e. Washing, grooming and cutting of hair.

4. If any food service personnel are assigned duties outside the dietary department, the duties interfere with the sanitation, safety or time required for regular dietary assignments.

5. The facility does not maintain and implement a schedule of activities for groups and individuals, both within and without the facility.

6. All employees do not receive orientation and in-service training to correspond to their respective jobs; nursing personnel do not participate in in-service training or continuing education at least quarterly.

(f) Skilled nursing facilities and nursing facilities.

1. The facility does not maintain a program of rehabilitative nursing care on a twenty-four (24) hour a day, seven (7) day a week basis, which program to include at least the following measures:
   a. Positioning and turning;
   b. Exercises;
   c. Bowel and bladder training, when appropriate; and
   d. Ambulation.

2. The facility does not provide each patient with a standard size bed equipped with springs, a clean mattress, mattress cover, two (2) sheets and a pillow and such bed covering as required to keep the patient comfortable.

3. The facility does not maintain a program to provide assistance to patients to achieve and maintain good personal hygiene, including, as necessary, the following:
   a. Washing and bathing the body;
   b. Shaving;
   c. Cleaning of finger and toe nails;
   d. Cleaning of mouth and teeth; and
   e. Washing, grooming and cutting of hair.
4. If any food service personnel are assigned duties outside the dietary department, the duties interfere with the sanitation, safety or time required for regular dietary assignments.

5. The facility does not maintain and implement a schedule of activities for groups and individuals, consistent with the requirements of 902 KAR 20:026, Section 4(9), or 902 KAR 20:300, Section 6(5). The cabinet shall use the administrative regulation that corresponds to the facility's license.

6. The licensee does not provide in-service training to its personnel in accordance with the requirements of 902 KAR 20:026, Section 3(9)(e), or 902 KAR 20:300, Section 15(3)(c). The cabinet shall use the administrative regulation that corresponds to the facility's license.

(g) Intermediate care facilities for the mentally retarded and developmentally disabled.

1. Within one (1) month after the admission of each resident, the facility does not enter the following in the resident's record:
   a. A report of the review and updating of the preadmission updating.
   b. A prognosis that can be used in programming and placement;
   c. A comprehensive evaluation and individual program plan designed by an interdisciplinary team.

2. The facility does not assure that:
   a. Each resident who does not eliminate appropriately and independently must be in a regular systematic toilet training program and a record must be kept of his progress in the program; and
   b. Any resident who is incontinent is bathed or cleaned immediately upon voiding or soiling unless specifically contraindicated by the training program, and all soiled items are changed.

3. The facility does not maintain and implement a schedule of activities for groups and individuals, consistent with requirements of 902 KAR 20:086, Section 4(9), and (10).

4. The facility does not maintain an orientation and in-service training program which is consistent with the requirements of 902 KAR 20:086, Section 3(11)(n).

5. The facility does not provide each patient with a standard size bed equipped with springs, a clean mattress, mattress cover, two (2) sheets and a pillow and such bed covering as required to keep the patient comfortable. Rubber or other impervious sheets shall be placed over the mattress cover when necessary.

Section 8. Civil penalties assessed for "Type A" and "Type B" violations pursuant to KRS 216.557 shall be trebled when a licensee has received a citation for violating a requirement for which it has received a citation and paid a fine during the previous twelve (12) months.

Section 9. (1) In determining the amount of any penalty imposed for "Type A" and "Type B" violations, the cabinet shall consider at least the following factors:
   (a) The gravity of the violation, including the probability that death or serious physical or mental harm to a resident will result or has resulted; the severity of the actual or potential harm, and the extent to which the provisions of the applicable statutes or administrative regulations were violated;
   (b) The reasonable diligence exercised by the licensee and efforts to correct violations;
   (c) The number and type of previous violations committed by the licensee; and
   (d) The amount of assessment necessary to insure immediate and continued compliance

(2) All fines collected by the cabinet shall be paid and administered in accordance with the requirements of KRS 216.560. (9 Ky.R. 756; Am. 1018; 1281; eff. 5-4-83; 16 Ky.R. 924; eff. 1-12-90; 20 Ky.R. 2172; eff. 3-14-94.)